

NEW YORK STATE COMMISSION OF CORRECTION

In the Matter of the Death : FINAL REPORT OF THE
: NEW YORK STATE COMMISSION
of Thomas Siewert, an inmate : OF CORRECTION
of the Dutchess County Jail :
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TO: Sheriff Adrian Anderson
Dutchess County Sheriff's Office
150 N. Hamilton Street
Poughkeepsie, NY 12601

GREETINGS:

WHEREAS, the Medical Review Board has reported to the NYS Commission of Correction pursuant to Correction Law, section 47(1)(d), regarding the death of Thomas Siewert who died on February 11, 2011 while an inmate in the custody of the Dutchess County Sheriff at the Dutchess County Jail, the Commission has determined that the following final report be issued.

FINDINGS:

1. Thomas Siewert was a 51 year old male who died from a suicidal hanging on 2/11/11 while in the custody of the Dutchess County Sheriff at the Dutchess County Jail. [REDACTED]

2. Thomas Siewert was born in Poughkeepsie, NY. His father resided in Georgia and his mother in Poughkeepsie, NY. He had 2 brothers, 2 sisters, was separated from his wife and had no children. He reported to have a GED from 1984 and worked as a HVAC technician up until 2010.

3. [REDACTED]
[REDACTED] In the instant offense, Siewert was arrested by the Town of Poughkeepsie Police on 2/3/11 on a warrant from the Town of Poughkeepsie Court. Siewert had outstanding charges from 2/3/10 when he was arrested by Poughkeepsie Town Police for Aggravated DWI E Felony. Siewert also had a warrant hold from the Town of Pleasant Valley Court for violation of probation stemming from a DWI conviction in 2008.

4. [REDACTED]

5. [REDACTED]

6. At approximately 3:30 p.m. on 2/3/11, Siewert was found on the sidewalk outside of a K-Mart store. Siewert reported he had been drinking and wanted to go to the hospital. A bystander called 911 and the Town of Poughkeepsie Police and Arlington Ambulance responded. Arlington Ambulance transported Siewert to Vassar Brothers Hospital. The Town of Poughkeepsie Police had a warrant for Siewert's arrest and requested the hospital notify them of his release.

Siewert was arrested and charged with VTL 1192 DWI E-felony 2nd offense. He was arraigned and remanded to the Dutchess County Jail on \$1000 cash bail or \$2500 bond.

7. Siewert was booked into the Dutchess County Jail on 2/3/11 at approximately 6:30 p.m. Medical and psychiatric care at the Dutchess County Jail is provided by Correctional Medical Care, Inc. (CMC, Inc.), a business corporation holding itself out as a medical care provider. Siewert was administered the Suicide Prevention Screening Guidelines and scored a "6" with affirmative answers for #3 worried about his wife, #4 worried about medical condition, #5 had a brother who committed suicide, #6 has used alcohol today, #10a. had a suicide attempt within the last year, and #16a. is apparently under the influence of alcohol. Siewert was referred to the jail's medical department for assessment.

8.

Prescribing a stat dose of a

[REDACTED] to a patient who is still exhibiting signs of [REDACTED], based solely on a telephone consult without the benefit of a physical exam by the prescribing physician, presents an unacceptable level of potential risk to the patient and represents improper and inadequate medical care by CMC, Inc.

9.

[REDACTED]

10.

[REDACTED]

The failure to carefully and thoroughly explore Siewert's documented [REDACTED] and to maintain suicide prevention precautions constituted inadequate mental health evaluation and treatment by CMC, Inc. and its employee, Dr. C.V.

11. All new admissions to the jail are seen for a routine mental health evaluation [REDACTED]

[REDACTED]

The failure of social

worker A.S. to take notice of Siewert's history of [REDACTED]

[REDACTED] represented inadequate mental health evaluation and treatment by CMC, Inc. and its employee, A.S.

12. [REDACTED]

13. [REDACTED]

14. [REDACTED]

15. [REDACTED]

16. [REDACTED]

[REDACTED] Formal, scheduled follow-up was clearly indicted by the patient's history and current presentation. Failure to do so represents inadequate mental health evaluation and treatment by CMC, Inc.

17. On 2/11/11, Siewert was housed in Housing Unit #5 cell #9. Officer L.S. was assigned to unit supervision for the 8:00 a.m. to 4:00 p.m. shift. Officer L.S. reported Siewert was in and out of his cell during her tour spending some time in the day area. He was quiet but did not appear to be in distress or despondent. Siewert was

- observed in his cell at the end of the tour count sitting cross legged on his bunk.
18. Officer S.M. relieved Officer L.S. for the 4:00 p.m. to 12:00 a.m. tour. Officer S.M. conducted his first tour of the unit and found all to be secure. Officer S.M. was relieved for a meal break at 4:11 p.m. by Officer D.E.
 19. Officer D.E. conducted a tour of the unit at 4:11 p.m. and observed Siewert sitting in his cell, on his bunk, with his feet out in front of him, leaning against the cell wall. Siewert had a blanket wrapped around his shoulders and book in his lap.
 20. Officer S.M. returned to the unit at 4:37 p.m. He conducted a tour of the unit and then began to deliver the dinner meal to inmates. Siewert was observed to be still sitting on his bunk with his legs out in front of him. Officer S.M. first delivered meals to cells 1 to 7. He then entered the opposite side of the unit to serve cells 8 to 13. Officer S.M. served the meal to the inmate in 8 cell and then secured the door. At 5:08 p.m., he opened cell #9 and called out to Siewert to get his meal. He received no response from Siewert so he banged on the door and called out Siewert's name. Officer S.M. still received no response so he proceeded into the cell. Officer S.M. then discovered that Siewert had fashioned a ligature from a laundry bag and had affixed it to the air vent above the bunk.
 21. The shaft which houses the air vent inside the cell is contained within an abutment that protrudes at the foot of the bunk. The vent is rear facing and is not visible from the cell door. From where the officers look into the cell from the cell door, it is not possible to see that an inmate may have something affixed to the air vent.
 22. Officer S.M. called a code 2 (medical emergency) on his radio. Officer M.M. heard the call and responded immediately. Officer S.M. directed Officer M.M. into cell #9. Officer M.M. found Siewert seated on the bunk, leaning against the abutment, legs out in front, with a ligature tied around his neck and affixed to the air vent. Officer M.M. cut the ligature with his rescue knife and laid Siewert down on his bunk.
 23. Responding staff including Sgt. H.M. and Lt. G.G. entered the cell. Sgt. H.M. helped Officer M.M. place Siewert onto the floor. Officer M.M. checked for a pulse, found none, and immediately began chest compressions.

24. 

25.



26. The Dutchess County Jail administration, along with their contract medical and mental health provider, Correctional Medical Care Inc., conducted an in-house mortality review regarding Siewert's suicide and identified some areas for system improvement:
- a. All of the mental health clinicians are required to perform a systematic suicide risk assessment and all referred patients and should be retained in the "CASE Approach" to suicide risk assessment.
 - b. A full time social worker who is trained to do systematic suicide risk assessments needs to be established (a full time social worker began in December 2011).
 - c. Rebound anxiety and dysphoria in patients with severe alcohol withdrawal and suspected sedative dependence, even after Librium taper, is a modifiable risk factor that should be treated aggressively with extended doses of Librium.
 - d. Mental health clinicians should obtain collateral information from family of inmates threatening suicide.
 - e. After evaluating an inmate due to concerns about suicide, documentation stating the inmate had "no suicide risk" is not as helpful as a note outlining symptoms, stressors, and precipitants and how they have responded to treatment interventions.

RECOMMENDATIONS:

TO THE DUTCHESS COUNTY SHERIFF AND DUTCHESS COUNTY EXECUTIVE:

In light of the fundamental and egregious lapses of care in this case, the Sheriff, in conjunction with the Executive, shall review the status of CMC, Inc. with respect to its capabilities as a medical, and in particular, a mental health service provider.

TO THE PRESIDENT OF CORRECTIONAL MEDICAL CARE INC.:

1. Conduct a quality assurance review with all mental health clinical staff to assure that all pertinent patient information including but not limited to, suicide screening, patient chart, sick call requests, are properly reviewed prior to a clinical encounter.

2. In accordance with the completed mortality review have all mental health clinicians perform systematic suicide risk assessments and be trained in the "CASE" approach to suicide risk assessment.
3. In accordance with the completed mortality review conduct a quality improvement training with medical and mental health clinicians to recognize that rebound anxiety and dysphoria in patients with severe alcohol withdrawal and suspected sedative dependence, even after Librium taper, is a modifiable risk factor that should be treated aggressively with extended doses of Librium.
4. In accordance with the completed mortality review, establish a policy that required mental health clinicians to obtain collateral information from family of inmates threatening suicide.
5. In accordance with the completed mortality review conduct a quality improvement training with mental health clinicians to assure that, after evaluating an inmate due to concerns about suicide, the documentation contains a note outlining symptoms, stressors, and precipitants and how they have responded to treatment interventions.

TO THE NYS EDUCATION DEPARTMENT, OFFICE OF THE PROFESSIONS:

That the Office of the Professions inquire into whether CMC, Inc., a general business corporation, may lawfully hold itself out as a medical care provider in New York State.

WITNESS, HONORABLE PHYLLIS HARRISON-ROSS, M.D., Commissioner, NYS Commission of Correction, Alfred E. Smith State Office Building, 80 South Swan Street, 12th Floor, in the City of Albany, New York 12210 this 19th day of June, 2012.


Phyllis Harrison-Ross, M.D.
Commissioner

PHR:mj
11-M-18
3/12

cc: Marc Molinaro, Dutchess County Executive
Emre Umar, President, Correctional
Medical Care, Inc.