

MILWAUKEE COUNTY**OFFICE OF THE SHERIFF****SHERIFF DENITA R. BALL**

DATE: Tuesday, May 6, 2025

TO: Milwaukee County Board of Supervisors, Chairwoman Marcelia Nicholson

FROM: Director Joshua Briggs
Deputy Director David Rugaber
Captain Telia Evans

RE: Informational Report Creative Corrections Corrective Action Plan

In October of 2024, the Milwaukee County Jail (MCJ) was audited by Creative Corrections and was ordered by the Milwaukee County Board of Supervisors. This was an independent audit of MCJ's practices and procedures in relation to the safety and security of the occupants. Creative Corrections was on-site from October 21st to 25th, 2024. During the on-site visit, Security staff spent a great deal of time with Creative Corrections' subject matter experts. The final report was completed with 20 findings identified for areas that were audited. The corrective action phase of the audit ran from approximately January 2025 until April 2025. During the corrective action phase, Creative Corrections subject matter expert for security remained in regular communication with MCJ's leadership.

The following 20 findings were identified regarding MCJ's policies, procedures, and practices as it relates to security:

1. Occupants were routinely restrained to benches for extended periods in both the booking area and the special management housing unit. Specifically, the team found that individuals on suicide watch in the booking area were subjected to this form of restraint practice that could potentially harm the occupants.

Corrective Action Taken: In January 2025, MCJ Leadership met with Milwaukee County Principal Architect Troy Wohlt and the State Jail Inspector Heather Laurence to discuss the need to remove the benches from the booking room and create or retrofit current cells into suicide watch observation cells. The current restraint benches in our specialized housing units are used when occupants tamper with building fixtures, and we are waiting on maintenance to put the cell back in service. We do not have dedicated maintenance at the jail; we share maintenance with numerous county buildings. When incidents occur after hours, we must wait for the on-call maintenance personnel to place the cell back in service before putting the occupant back into the cell. We may sometimes have to wait up to an hour for their arrival. Due to the high population, we rarely have empty cells to place the occupant in until their current cell is returned to service. We do not have another alternative to using the restraint benches in the specialized housing units. We submitted two Capital Projects to retrofit a booking cell, a mental health unit cell, a 4D outdoor recreation cell, and the 4A gym. These areas will be safe cells to

place an occupant in when in crisis. Project # WC030701 and Project # WC030801 were submitted April 2025.

2. The facility lacks detailed post orders — specific procedures and guidelines for each correctional post. These post orders are essential for providing correctional officers with clear instructions on how to carry out their duties during their shifts. Post orders are not maintained on correctional posts.

Corrective Action Taken: Updated post orders were submitted to the subject matter expert from Creative Corrections for feedback. With the feedback and recommendations from Creative Corrections we updated our current post orders. A memo was disseminated to staff on how to locate the post orders. Staff was also required to sign off on an acknowledgement form stating they understand how to locate the post orders and are required to check them daily. The post orders are electronically stored, and all security staff has access to them.

3. The current practice of maintenance work performed by county staff has serious deficiencies in managing tool security. It fails to categorize tools according to their potential risk, treating a simple tape measure the same as a potentially dangerous hammer. Furthermore, it was observed that unit officers do not perform an inventory of tools entering and leaving their posts. This lack of tracking creates opportunities for tools to go missing or be misused without detection, increasing the risk of escapes, self-harm, and violence within the facility.

Corrective Action Taken: MCJ has created a tool accountability process for our staff. Information Management Services Division (IMSD) created a drop-down box for facilities/tool accountability in our Jail Management System for the staff to document the tool inventory. We are prepared to conduct roll call training and have staff sign off on an acknowledgement form that were trained and understand the required process. We are waiting for Milwaukee County Facilities maintenance leadership to create toolkits that will be for the Jail only. Once completed, we have designated a storage area in the Jail for them to store the tools. We requested that facilities create an inventory list of their current tool carts until the new process is implemented. This has not been completed. A bureau requisition was submitted for funding the toolkits that will be dedicated Jail only.

4. The assessment revealed a lack of security practices, specifically there were instances where pod doors were left unsecured while facility staff conducted repairs and restraints were unaccounted for. This lapse in security protocols creates a significant vulnerability and increases the potential for unauthorized access, escapes, or contraband smuggling.

Corrective Action Taken: A memo went out to staff regarding securing all slider and sub-pod doors throughout the entire facility. An acknowledgement form was signed by staff. A procedure for restraint accountability was put into place in the specialized housing units, documentation is available to staff on their workstation and located electronically with the post orders.

5. An armory inspection uncovered concerning deficiencies, including missing inventory records and outdated or inadequate protective gear for staff. The lack of proper inventory control raises concerns about potential weapon mismanagement, while insufficient protective equipment leaves staff vulnerable in potentially dangerous situations

Corrective Action Taken: There has been an inventory of the armory completed where the equipment and weapons were evaluated and disposed of if faulty or in disrepair. The CERT cart that carries the equipment used on a call has an inventory sheet attached, and it is the responsibility of the designated

team member to inventory said cart to ensure all items needed for a call are accounted for. There are two supervisors who are also team leaders assigned to inventory and inspect the armory regularly. The need for new equipment to keep staff safe on calls was identified and an order for brand new updated equipment was submitted to Sheriff Administration for approval. This included new riot suits, helmets, gas masks, and respirators. In the same order, new gas masks and helmets for our riot preparation cart was ordered and awaiting approval. This gear is for line staff, who are not members of CERT. Once new gear is purchased, all team members will be fitted and issued their own equipment to alleviate the need for daily issuance checklists. Pictures and documentation were submitted to Creative Corrections.

6. The current inmate counting practices needs improvement. The policy could be clearer about how often counts happen and the specific steps involved. It also needs to include a way to track inmates who are temporarily away from their assigned areas. These issues could lead to inaccurate counts and potential security risks.

Corrective Action Taken: MCJ increased our current inmate counts on Saturday, November 16, 2024. The four facility inmate count sheets for Saturday, November 16, 2024, and the updated classification post order were submitted to Creative Corrections.

7. The facility needs to implement the Key Watcher system promptly. This will improve security by preventing key loss and unauthorized access.

Corrective Action Taken: We are waiting on the vendor Hoffman Security to push out additional software upgrade to the key boxes, import all users to the portal, and provide a handheld scanner to begin creating profiles. The county only has one Locksmith who is still working on transitioning all keys to smaller key rings and attach chits with key counts on each ring. Our first key box went live on Thursday, April 24, 2025.

8. The jail lacks a vigorous system of internal compliance audits for security practices. Implementing regular, ongoing audits is crucial to ensure consistent adherence to correctional standards and proactively identifying areas needing improvement.

Corrective Action Taken: Implemented a weekly audit for Food Logs and Suicide Watch Paperwork. Documentation of communication/expectation to the Supervisor and a completed Food Log Audit and Suicide Watch Paperwork was submitted to Creative Corrections. We will continue to implement perpetual audits.

9. During both the day and evening shifts, there is a lack of supervision within the specialized housing units. This creates a potentially dangerous situation for both inmates and staff, as there is no one readily available to respond to emergencies, address conflicts, or provide support.

Corrective Action Taken: MCJ currently have two Supervisors scheduled to oversee our specialized units. One is scheduled from 0830-1630 hours, with Mondays off every other weekend, and the other is scheduled from 1130-1930 hours, with Fridays off and every other week. We also schedule a supervisor on all three shifts to respond to all calls. Schedules were provided to Creative Corrections.

10. The facility needs to develop clear procedures for transferring occupants to suicide watch rooms in a timely manner. These procedures should be followed consistently by both booking staff and correctional supervisors to ensure the safety and well-being of at-risk individuals.

Corrective Action Taken: MCJ has an Operational Review meeting weekly on Tuesdays from 1000- 1130 hours. Jail Leadership meets with Wellpath Medical and Mental Health Leadership weekly. Meeting minutes were provided to Creative Corrections. On March 31, 2025, a new procedure/ color coded flow chart was implemented to streamline the process of an occupant being placed on suicide watch upon acceptance. MCJ collaborated with Medical, Mental Health staff and the Milwaukee Police Department, which provides a liaison that sits in our pre-booking area 24/7. This collaborative effort has allowed us to prioritize an individual in crisis get them through the booking process sooner and housed within one. The booking supervisors and staff were provided the process, and it clearly defines what steps to take and why.

11. The current calculated use of force policy lacks specific guidelines for all team members, including medical and mental health staff, on how to appropriately apply calculated force. This lack of clarity could lead to inconsistencies in practice and increase the risk of incidents escalating unnecessarily.

Corrective Action Taken: Custodial Policy 510 – Use of Force, subsection 510.5, outlines steps to take for a calculated use of force. The policy reads in part: If there is no need for immediate action, staff should attempt to resolve the situation through voluntary compliance or, if it reasonably appears necessary, the calculated use of force. A calculated use of force is called for when an inmate's presence or conduct poses a threat to safety or security and the inmate is in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing, and organization. The assistance of available non-custodial staff (e.g., psychologists, counselors) should be considered when attempting to resolve a situation without confrontation. A supervisor shall be present in any situation involving the calculated use of force. The supervisor shall notify the shift commander for approval and consultation prior to any calculated use of force action. The MCSO currently has steps in place for all UOF reviews on many different levels. After a UOF occurs, the incident is debriefed by the scene supervisor and all involved to include medical and mental health (for critical incidents). Within 14 days of a UOF the incident will be reviewed by a Captain to ensure compliance with agency policy. Once reviewed by the captain, the incident is then sent to Professional Standards Division and then the Training academy for the final approval. It should be noted that UOF incidents are reviewed by MCSO's independent UOF review board if it is deemed necessary. Any UOF initiated by the Correctional Emergency Response Team is reviewed by two Sergeants who also serve as Team Leaders. The incident is then reviewed by the CERT Commander (Captain) to ensure compliance with policy and training. At this time, and with all the above reviews in place, it is not likely for a subcommittee to be formed. An annual training Use of Force document was created along with a one-hour lesson plan, and every supervisor received this refresher training, and this will continue annually. We have also reached out to Force Science an on-line course for six of our staff members to become UOF experts after taking this course. Documentation was submitted Creative Corrections.

12. Suicide watch procedures, especially those involving one-on-one observation, need restructured. It is critical to ensure the observing staff member always has a clear and unobstructed view of the individual to maximize their safety.

Corrective Action Taken: MCJ submitted the request to facilities/maintenance. We submitted a Capital project to replace all cell doors, remove light switches from the cells. Some of the glass was replaced (pictures submitted to Creative Corrections) in the mental health unit cells, 3,4,5,7, and 8. Project # WC030401, Project # WC030601 were submitted in April 2025.

13. MCJ Leadership needs to perform weekly rounds in all the housing units.

Correction Action Taken: A log was created for Jail Leadership to track inspections because some areas of the facility do not have a Jail Management System for Jail Leadership to document inspections. Jail Leadership began inspections the week of January 27, 2025, and will continue. Logs were submitted to Creative Corrections.

14. Probationary staff need enhanced training to effectively work with occupants experiencing mental health crises or exhibiting suicidal behaviors. This training should equip them with the knowledge and skills to recognize warning signs, de-escalate situations, and provide appropriate support.

Corrective Action Taken: Received the training lesson plan from the academy. The training for probationary staff was updated/changed on November 1, 2024. Probationary staff are not assigned to the Mental Health Unit, we schedule staff from the Special Management Team who received specialized training to work with the occupants assigned to that area. The post orders for the one-on-one watch, housing unit 4D and Mental Health Unit were updated and submitted and submitted to Creative Corrections.

15. Existing staff, particularly correctional officers, require targeted training on suicide prevention and mental health awareness. This training should go beyond general concepts and include real-life examples relevant to the correctional setting. This approach reinforces the critical importance of recognizing and responding to suicide behavior in occupants and promotes a better understanding of mental health challenges. (Creative Corrections Mental Health SME will provide)

Correction Action Taken: Our annual in-service will begin Mid-May 2025. We are working with our medical and mental health partners from Wellpath for their in-service portion. Mental health will be 2 hours: 1 hour of lecture, 1 hour of scenario-based training relevant to a correctional setting, and 2 hours of medical/suicide prevention training. This training will be MCJ specific. Mental Health subject matter expert from Creative Corrections provided the mental health lesson plan during the on-site visit on April 15, 2025.

16. The jail's communication strategy needs improvement to ensure all occupants feel safe and supported. Currently, there is a lack of multilingual signage, which can create barriers for those who do not speak the primary language. This can prevent them from understanding critical information and accessing essential services. Additionally, there's limited information available to occupants regarding suicide awareness and mental health resources.

Corrective Action Taken: The occupant orientation video plays English and Spanish versions in the booking room in the open waiting area. The video loops and plays 24/7. The mental health signage was updated in the housing units and displays English and Spanish versions and are displayed on the pillars and the front of the officer's workstations where the occupants can easily read the signage and not remove it. We also use access to language lines that we use for people in our care who speak any other language outside of English and Spanish.

17. There is a gap in training for Correctional Supervisors regarding Calculated Use of Force procedures. To ensure all supervisors are equipped to handle use-of-force situations safely and effectively, it is essential to provide mandatory training on these procedures to every supervisor.

Corrective Action Taken: Custodial Policy 510 – Use of Force, subsection 510.5, outlines steps to take for a calculated use of force. The policy reads in part: If there is no need for immediate action, staff should attempt to resolve the situation through voluntary compliance or, if it reasonably appears

necessary, the calculated use of force. A calculated use of force is called for when an inmate's presence or conduct poses a threat to safety or security and the inmate is in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing, and organization. An annual training Use of Force document was created along with a one-hour lesson plan, and every supervisor received this refresher training, and this will continue annually.

18. The current safety program lacks oversight by a qualified safety professional. To ensure compliance with all applicable safety standards and regulations, the facility should provide resources and invest in training the current staff member in the areas of NFPA, OSHA, EPA, and other relevant areas.

Corrective Action Taken: Captain Jason Laird attended the Milwaukee County Risk Management quarterly meeting on Monday, March 10, 2025, from 1030-1230. The next meeting is scheduled for June of 2025. He is signed up for the safety OSHA training and has completed 5 of the 10 modules required. This is a refresher course as he completed this course 06/05/2018 and has his certification card.

19. The presence of extensive graffiti throughout the cells creates an unwelcoming and potentially distressing environment for occupants. This visual clutter can contribute to feelings of anxiety, agitation, and a sense of disorder. Taking steps to remove the graffiti and prevent further vandalism will improve the overall atmosphere and promote a more positive living space.

Corrective Action Taken: MCJ reached out to the Community Reintegration Center in March of 2024 to send 60 of our female occupants to their facility to begin a Graffiti Abatement, Maintenance and Cleaning Project. This would allow MCJ to close a housing unit to deep clean, paint and address all maintenance issues. In February 2025 the project was pushed back until July 1, 2025, pending maintenance issues with the space at CRC that MCJ would house 60 female occupants to complete that project, that is projected to take approximately one year to complete.

20. The occupant handbook should be updated to include the new visiting procedures. An annual review of the occupant handbook should be completed to address changes.

Corrective Action Taken: The handbook was updated and submitted to Creative Corrections in February 2025. An annual review will be conducted of the handbook. The handbook will also be reviewed if policies or procedures change. When the handbook is updated, the updated version is disseminated to the occupants.

MCJ completed 12 of the 20 findings during the corrective action plan. 8 of the findings are partially completed as the MCJ needs outside assistance. MCJ submitted 4 Capital Projects with an estimated cost of \$100,000 each. MCJ also submitted additional funding requests for designated tool kits with an estimated cost of \$10,000 and CERT/Riot gear with an estimated cost of \$76,000.

MCJ requested the following positions in the 2026 budget 4 additional Correctional Sergeants currently budgeted for 19 requesting 23, 52 additional Correctional Officers currently budgeted for 225 requesting 277 and 1 Captain (Security Director) currently budgeted for 8 requesting 9. This request is a recommendation from Creative Corrections they found that the Jail needed additional front-line supervisors, our current number of Correctional Officers does not sufficiently reflect the needed relief factor nor the optimal staffing for specific post. In addition, Creative Corrections recommended a Security Director similar to the CRC's position, this position would be at the Captain level.