

**Name:** Andres Sosa

**Title:**

**Organization or Agency:**

**Topic:** Meeting Date Not Listed

NA

**Testimony:**

Here at Cheshire CI, the DOC has eliminated many of the prison inmates' resources only benefiting a group of inmates by segregating those lucky inmates into certain units those are the chosen ones who will get access to a higher education, programming/rehabilitation.

There is a lack of staffs in the inmates' field e.g., not enough mental health case workers who can tour per shift as required per the Directive tour and inspection, nor can they follow up with therapy appointments on a regular schedule timing. Cheshire have one mental health staff on 2nd shift for over 800 inmates.

There is no librarians in the resources center, it been turned into a post by having a CO present instead.

The rehabilitation changed, is hard to come by, there is no structures, the peoples put in charged don't care as a whole, they only look out for inmates on a one on one basis. It shouldn't be like this, it is sad and I see things getting worse before getting better.

I been incarcerated since the age of 18 years old in 1997, 28 years now. Is sad to say, when John Armstrong was the Doc commissioner inmates had more resources availabilities, you had counselors even on 2nd shift and weekends. I like to believe that nowadays Doc have a larger budget but inmates lack more resources!

The food quality is worse and the amount is less. This is to add that it be cold, you don't get at least one hot daily meal, trust me.

The commissary prices are too high and you find nothing healthy, 90% of the commissary items are sugar and cosmetics. Inmates' jobs payments went up but in one year the commissary prices went up three times, as an inmate you're back to square one.

Policies are not being follow nor enforce when is to benefit the inmates. Their wellbeing is disregarded and the medical care is bad. Why does DOC Medical Staff send inmates to Uconn Health for care by specialist, to then override those specialist orders by relying on a third party medical company such as:

NaphCare, Inc.  
2090 Columbia Road Suite 4000  
Birmingham, AL 35216

Does our government know this? is it a standard legal practice to do such things behind inmates' back with no consent asked?

Things look good on paper but what's being done behind the scene is where our government need to evaluate to ensure compliance by such executive branch DOC agency's subordinates.