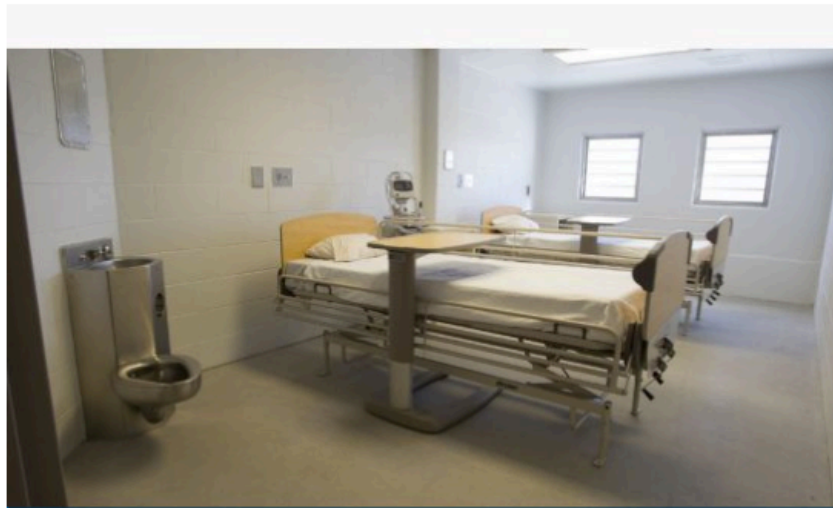
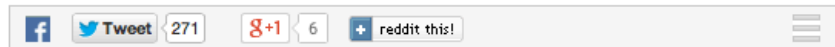


News / GTA

No hospital at new Ontario superjail; sick inmates kept in solitary

Ministry says sick inmates at Toronto South Detention Centre are in segregation “to ensure a private location for them to recover.”



VIEW 2 PHOTOS

BERNARD WEIL / TORONTO STAR FILE PHOTO

The health facilities at the state-of-the-art Toronto South Detention Centre have never opened.

By: **Amy Dempsey** GTA, Published on Thu Dec 18 2014

For nearly a year, Ontario’s new superjail has been operating without an infirmary or a promised 26-bed unit for inmates with mental illness.

The health facilities at the state-of-the-art Toronto South Detention Centre were shown off in a [media tour](#) months before the jail began accepting inmates in January, but those units have never opened.

The Star has learned that sick inmates — including those with physical injuries, infectious diseases and mental illnesses — are instead being housed in solitary confinement, held for up to 24 hours a day in cells alongside prisoners segregated for violent behaviour.

“We have all these facilities there that are supposed to make things better for the inmates and for the staff and that hasn’t happened because nothing has opened,” said Dave Graves, a Toronto South correctional officer and representative for Local 5112 of the Ontario Public Service Employees Union.

“A year and it has sat empty. It makes no sense to us.”

A spokesman for Ontario’s Ministry of Community Safety and Correctional Services confirmed that the infirmary and mental-health unit at the new jail are not open and said 21 inmates with medical issues are currently being kept in the segregation unit “to ensure a private location for them to recover.”

“The health and well-being of inmates and staff is our top priority,” ministry spokesman Brent Ross said in an email. Whether they are in segregation or the regular prison population, inmates “continue to receive the medical care and medications they require,” Ross said.

In a followup email, another ministry spokesman said “inmates are assigned or removed from medical segregation solely at the discretion of medical staff.”

Ross said the health-care units are expected to open in early 2015. The ministry was vague on the reason for the delay, with Ross citing “commissioning activities, including recruitment of new staff.”

Graves, the Toronto South correctional officer, said the ministry has told union representatives that the jail has not been able to hire enough nurses. He said nurses currently working in the institution have told him they are understaffed and cannot keep up with daily demands.

Gordon Cobb, another Local 5112 union representative and correctional officer, said seriously ill inmates are sometimes transferred from segregation to an off-site hospital, which can be a burden on the system because guards must be stationed with hospitalized inmates.

Cobb said sick prisoners have routinely been housed in segregation in other Ontario jails he has worked in. “Would it be better to have those inmates out of those areas? Yes it would,” he said. “But procedure-wise that’s nothing new.”

While calls are growing for the use of solitary confinement to be limited or banned, the practice is still used widely in Canadian jails, federally and provincially, as a form of punishment and as a means to deal with prisoners whose illnesses make them difficult to manage.

A United Nations Special Rapporteur has said solitary confinement should be used only in exceptional circumstances and never for more than 15 consecutive days or it could amount to torture, citing several scientific studies that have suggested even a few days in social isolation can cause lasting mental damage.

Federal prison watchdog Howard Sapers has pushed for the use of segregation to be banned for inmates with the diagnosis of a serious mental illness, a history of self-injury or a previous suicide attempt. Last week Ottawa rejected key recommendations from the [Ashley Smith inquest](#) to limit the use of solitary confinement for mentally ill inmates in federal prisons.

Prison guards in Ontario and elsewhere have repeatedly expressed concerns about not having the proper training to deal with prisoners who have mental disorders.

The Toronto South is meant to have a 26-bed mental-health unit, as well as a forensic early intervention service staffed by the Centre for Addiction and Mental Health. Announced in June 2013, the forensic program — the first of its kind in Canada — was lauded as a means to improve safety and access to mental-health intervention for inmates. CAMH has hired and trained staff to run the service, but the Toronto South is not ready to launch it.

“We are hopeful that we will be up and running in the Toronto South Detention Centre early in the new year,” CAMH spokeswoman Kate Richards said in an email, referring questions about the delay to the ministry.

As of Tuesday, there were 51 inmates in the Toronto South solitary confinement unit — seven for disciplinary segregation, 21 for medical segregation and 23 for administrative segregation. Inmates can be placed in administrative segregation for their own protection or for the safety of others. The ministry denies that the administrative label is used for inmates with mental or physical illnesses.

One Toronto South correctional officer, who spoke on condition of anonymity due to fear of workplace reprisal, told the Star that inmates with addictions have been forced to go through drug withdrawal in solitary confinement. “It’s not very pretty to see them being put in segregation ... and I’m not a bleeding heart, believe me,” the guard said.

“There are times when, as part of their treatment and upon medical advice, an inmate undergoing withdrawal from drugs or alcohol may need to be placed in segregation to ensure their well-being and recovery,” ministry spokesman Greg Flood said in an email.

The correctional officer also said mentally ill prisoners have been placed in cells next to violent inmates who sometimes provoke them to the point of breakdown by shouting, banging on cell walls and encouraging them to kill themselves.

Defence lawyer Daniel Brown said he was shocked to get a call earlier this fall from a Toronto South inmate who was told he would be placed in segregation to recover after an ankle fracture. Brown said the inmate protested and was ultimately sent to another institution.

“It was surprising to think that they would open a jail without those facilities being in place,” Brown said. “And it was even more surprising to learn that someone would be held in segregation as a substitute for appropriate medical facilities.”

The Toronto South Detention Centre, a 1,650-bed adult male jail, was built to replace overcrowded and crumbling old institutions such as the Don Jail.

The institution is meant to be a model for future jails. “Our goal,” the ministry website says, “is to ensure that the province has an efficient and effective correctional infrastructure plan that keeps Ontario’s communities safe and to ensure that individuals in our custody are held in safe, secure and humane conditions.”

Construction wrapped up in 2012, but the new jail — the largest in the province — **sat empty** until 2014. The ministry cited commissioning activities and staffing issues for that delay as well. The Toronto South opened on Jan. 29 this year.

The centre holds offenders serving sentences of less than two years and inmates awaiting trial on charges ranging from minor property offences to murder, any of whom can end up in solitary confinement for various reasons at the discretion of jail staff.

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