The Commonwealth of Massachusetts
Executive Office of Public Safety and Security
One Ashburton Place, Room 2133
Boston, Massachusetts 02108
Tel: (617) 727- 7775
TTY Tel: (617) 727-6618
Fax: (617) 727-4764
www.mass.gov/eopss

MAURA T. HEALEY
Governor

KIMBERLEY DRISCOLL
Lieutenant Governor

GINA K. KWON
Secretary

Restrictive Housing Oversight Committee (RHOC) Meeting
Thursday, April 16, 2026
Via Microsoft Teams
DRAFT

I. Call to Order

Undersecretary Peck called the meeting to order at 11:13 AM.

Restrictive Housing Oversight Committee - Attendance		
Name	**Present**	**Absent**
Undersecretary Andrew Peck, Chair	**X**	
Kevin Flanagan		**X**
Robert Fleischner, J.D.	**X**	
Hon. Geraldine Hines (resigned)		**X**
Tatum A. Pritchard, Esq.	**X**	
Kyle Pelletier		**X**
Dr. Joanne Tsakas Barros, PhD, LMHC, CCHP	**X**	
Bonita Tenneriello, Esq.	**X**	
Dr. Brandy Henry, PhD, LICSW	**X**	
Sheriff Cocchi		**X**

Also Present: Kevin Hall (Hampden County Sheriff's Office); Mary Valerio (member of the public)

II. Review and Approval of Minutes from Prior Meeting

Undersecretary Peck noted that draft minutes from the March 19, 2026 meeting had been circulated by email earlier in the week. Several members indicated they had not had the opportunity to review them.

Kyle Pelletier identified a correction needed in Section V of the draft minutes: a statement attributed to her regarding the discrepancy between the DOC's press release and the BAU dashboard data should have been attributed to Bob Fleischner. She also noted that the minutes should reference "BAU" (Behavioral Assessment Unit) rather than "BMU" (Behavioral Management Unit) in that section. Additionally, she noted that a statement attributed to her in Section VI did not reflect something she recalled contributing and may also have been Bob Fleischner's comment.

Bob Fleischner agreed with Kyle Pelletier's recollection on both points. Kyle Pelletier suggested that the committee defer the vote on the March minutes until the corrections could be verified, either with Bob Fleischner's confirmation or at the next meeting. Bob Fleischner noted he would need to abstain as he had not yet reviewed the draft.

The committee agreed to table approval of the March minutes until the May meeting.

III. Hampden County Site Visit Update

Undersecretary Peck noted that a site visit to the Hampden County House of Correction had been scheduled for the following day, April 17, 2026. He asked for confirmation of which members were planning to attend.

Several members, including Dr. Barros, Bonnie Tenneriello, and Holly Matthews, indicated that while they had previously communicated their availability, they had not received confirmation that the visit was officially scheduled and had not seen a calendar invitation. As a result, some members had scheduled conflicting commitments.

Adrian confirmed that the visit had been scheduled based on earlier availability responses from Undersecretary Peck, Dr. Barros, Holly Matthews, and Bonnie Tenneriello.
Given the confusion, Undersecretary Peck determined that the visit would need to be canceled and rescheduled. He asked Kevin Hall to coordinate with his office to provide new date options. Kevin Hall agreed to follow up and provide multiple dates. Undersecretary Peck asked that when the visit is rescheduled, a calendar invitation be sent to all confirmed attendees to avoid further scheduling miscommunications.

The committee confirmed that the April 17 visit was canceled and that Adrian would notify anyone who might otherwise have attended.

IV. Discussion of Dr. Barboza's Independent Expert Report on DOC Suicides

A. Attorney Tenneriello's Discussion Memorandum

Bonnie Tenneriello informed the committee that she had prepared a memorandum outlining suggested discussion points for the committee's planned conversation with DOC regarding the Barboza report. She noted that the memorandum had been sent to Adrian and Ryan that morning and apologized for the late circulation. Due to technical difficulties, she was unable to share his screen, and Ryan pulled up the document for the group.

Undersecretary Peck invited other members to share their own observations before turning to the memorandum. He noted that members who wished to submit additional discussion points could send them to Adrian for compilation and circulation.

B. BAU Placement, Conditions, and the K2 Crisis

Kevin Flanagan opened the discussion by raising a series of questions about the practical realities facing correctional facilities. He noted that two major prisons have closed in recent years, reducing the system's capacity to separate individuals who pose safety risks. He emphasized that the Barboza report identified housing placement as a central factor and asked where individuals should be placed if not in BAUs, particularly those who are intoxicated, violent, or in crisis. He noted that the report found four to five of the six individuals who died by suicide were intoxicated at the time, and pointed to synthetic marijuana (K2) as a pervasive and largely unaddressed problem. He also raised the issue of individuals throwing themselves from tiers, describing incidents he characterized as unprecedented in his experience.

Kevin Flanagan also raised the impact on correctional staff, noting that officers who witness these incidents experience significant trauma that extends to their families. He urged the committee to consider staff wellbeing alongside the conditions experienced by incarcerated individuals.

Undersecretary Peck acknowledged the importance of these questions, characterizing correctional facilities as "downstream indicators" of systemic failures upstream. He emphasized that he was not minimizing the severity of the issues but noted that many of the individuals in these facilities have been failed by other systems before arriving in custody. He observed that substance use in the community inevitably carries into correctional settings, and that addressing these issues requires a broader perspective.

C. Staffing, Mental Health Care, and DOC's Response

Bonnie Tenneriello noted that many of Dr. Barboza's recommendations address prevention and staffing. She highlighted several areas where the DOC's press release, in her assessment, did not adequately respond to the report's findings. These included: the need for integrated treatment of co-occurring substance use and mental health disorders, which is a community standard of care; the length and quality of clinical contacts and check-ins; collaborative safety planning; continuity of care with the same primary mental health clinician while individuals are held in BAUs; and the definition of "unacceptable risk" used to determine BAU placement. She emphasized that she was not assuming DOC is failing to act on these issues, but that the committee needs to hear specifics beyond what the press release contained.

She also noted that the Barboza report raised concerns about the BAU experience being similar to restrictive housing conditions, and that the committee has a legitimate interest in exploring what can be done to ease those conditions, given that BAUs are no longer classified as restrictive housing.

Sheriff Cocchi agreed that understaffing in sensitive areas is a significant concern and that individuals in those units require more intensive services and attention. He described having personally witnessed individuals jump from tiers, tucking their hands into their pants to prevent bracing their fall, and noted the severe impact on staff who witness these events. He called on the committee to agree that more and better work and more collaboration are needed, and emphasized the importance of advocating to the legislature for better-trained staff, more mental health clinicians, and investment in interdiction technology such as scanners capable of detecting substances embedded in paper.

Sheriff Cocchi cautioned that while he is committed to continuous improvement regardless of funding levels, the current budget environment threatens to reduce resources such as mental health clinicians, teachers, and programming that are essential to addressing these problems. He described a recent incident at his facility in which two inmates jumped from tiers within weeks of each other, requiring the installation of safety netting, and emphasized that funding should never be a barrier to protecting human life.

D. K2 Interdiction and the Paper Question

Kevin Flanagan raised the question of why incarcerated individuals need paper correspondence when tablets are available for accessing medical records, disciplinary reports, and other documents. He noted that a single legal-sized piece of paper laced with K2 can be worth $15,000 to $20,000 inside a facility, creating a criminal enterprise that drives violence. He suggested that moving to a paperless system could be an effective interdiction measure, while acknowledging that attorney-client privilege is the primary obstacle to this approach.

Bonnie Tenneriello responded that Prison Legal Services has been advocating for DOC to implement confidential attorney email as part of the tablet system redesign, which she described as a small piece of the broader issue. She acknowledged the severity of the K2 crisis but noted that paper serves important purposes for incarcerated individuals, including retaining photographs and personal items.

Tatum Pritchard stated that any system that eliminates attorney-client privilege would never be acceptable, while clarifying that she understood Kevin Flanagan was not suggesting that. Undersecretary Peck confirmed he was not advocating for the abridgment of constitutional rights and noted it was the first time he had heard about the confidential email issue.

E. Research on K2 and Substance Use in Correctional Settings

Dr. Barros recommended that the committee consider the work of Dr. Sion Kim Harris of Harvard University and Boston Children's Hospital, who conducts national and international research on the risk factors and neurological impacts of marijuana and synthetic cannabinoids, particularly on developing brains. Dr. Barros noted that correctional facilities often see the behavioral and health effects of emerging substances before those effects are widely recognized in the community, and that public messaging frequently lacks critical information about risk factors.

Undersecretary Peck noted that the committee's own annual report had called for integrated treatment systems and a culture of prevention, and that K2 presents a unique challenge because community-based providers have little experience treating it. He referenced ongoing discussions with the Department of Public Health (DPH) to address the issue, noting that DPH clinicians have acknowledged they do not encounter K2 in the community and lack established treatment protocols.

F. Correctional Perspective on BAU Placement

Sheriff Cocchi posed a broader question to the committee about what alternatives exist when individuals continue to exhibit dangerous behavior inside a correctional facility. He described a progression: individuals who repeatedly exhibit harmful behaviors in the community may eventually be sentenced to incarceration, but once inside a facility, which he called "a city behind the walls", those same behaviors continue. He noted that the system responds first with mental health services, emergency stabilization, and treatment programs, but when behaviors persist, correctional leadership is obligated by oath to protect both that individual and the broader population. He argued that stepping up the level of security, supervision, or services is sometimes necessary, and that restrictive housing exists for individuals who repeatedly fail to comport with institutional rules, for the safety of the broader population and themselves. He asked the committee directly whether anyone had research, evidence, or alternative models that could be piloted.

Kevin Flanagan built on this point, noting that while the Barboza report focuses on six suicides, it does not capture the scale of the daily K2 problem. He estimated that on any given shift at facilities like Old Colony, Shirley, or Norfolk, there could be a dozen individuals under the influence at once. He described the cascading resource demands: fire departments called for transport, staff exposed to secondhand smoke requiring medical attention, and disruption to other incarcerated individuals who are trying to participate in programming and comply with the rules. He questioned what the alternative is if individuals in BAUs are committing suicide and getting high, observing that the conditions being described sound indistinguishable from general population.

G. Disciplinary Response to Substance Use

Tatum Pritchard brought the discussion back to the RHOC's specific mandate, noting that Dr. Barboza's recommendation directly counters the framing of the preceding discussion: the report recommends ensuring that the experience within the BAU is not similar to restrictive housing, given the associated risks, and identifies the mirroring of restrictive housing conditions in the BAU as a contributing factor in the suicides. She stated that the discussion should not be oriented toward making conditions more punitive, and cautioned that the conversation should reflect current understanding of substance use disorder as a disease, not a behavior to be punished. She noted that individuals use substances for a variety of reasons, including severe depression and neurological dependency, and that framing them as troublemakers fails to recognize the human dimension of the issue. She also disagreed with the characterization that repeated substance use before a court inevitably leads to

incarceration, noting that use alone, absent trafficking or other criminal conduct, does not carry escalating criminal consequences.

Bonnie Tenneriello drew the committee's attention to Dr. Barboza's finding that individuals were being disciplined for substance use, including placement in BAUs even after being found non-responsive or significantly impaired. She characterized this as a glaring omission in the DOC's response. She emphasized the distinction between substance use, which is a disorder and a disability that must be accommodated under the law, and trafficking, which is a legitimate security concern.

Bonnie Tenneriello identified the specific section of the Barboza report: "Security Response to Intoxication" (page 11) which documents inconsistent responses to intoxication depending on staff, the absence of a clear policy governing response to intoxication, and a recommendation for a cross-disciplinary plan of action addressing the impact of treating intoxication as a disciplinary versus clinical issue.

H. Planning for the DOC Meeting

The committee discussed how to structure its planned meeting with DOC regarding the Barboza report. Bonnie Tenneriello offered to make her memorandum available on the committee's public website. Undersecretary Peck invited other members to submit additional discussion points to Adrian for compilation and circulation.

Bonnie Tenneriello suggested that DOC be given a limited amount of time for an opening presentation, with the majority of the meeting reserved for committee questions and discussion organized around identified topics. She proposed tentative topic areas including: BAU placement and conditions; mental health care, substance use treatment, and suicide risk; and disciplinary responses to substance use.

Undersecretary Peck acknowledged those topics and noted that DOC should have the opportunity to present and have a sense of what topics would be raised. The committee agreed that Adrian could compile submitted discussion points and circulate them, and that the topics would be used to structure the agenda for the DOC meeting.

V. Matters Not Known at Time of Posting

Bonnie Tenneriello reported an unconfirmed report of another suicide at MCI Norfolk. Kevin Flanagan confirmed he had heard the same report. Bonnie Tenneriello offered her condolences to the staff, the other individuals in the unit, and the family.

A. Post-Incident Response and Compassion

Sheriff Cocchi raised the broader question of what correctional institutions can do to demonstrate compassion following a death in custody. He asked the committee to consider what a respectful and appropriate response looks like, balancing empathy for the family with the need to avoid prejudicing an ongoing investigation.

Tatum Pritchard suggested that acknowledging these incidents as tragedies and offering grief counseling to staff and to other individuals in the affected unit could go a long way toward reasserting the humanity of everyone involved.

Bonnie Tenneriello agreed, sharing that she had been told by someone present in the residential treatment unit at Souza-Baranowski Correctional Center during a recent incident that the response consisted of a brief round of welfare checks with no substantive follow-up. She described being shocked by the reported lack of attention to individuals who had witnessed someone die on the floor of their unit.

Sheriff Cocchi proposed that the committee develop a brief checklist of essential post-incident actions that should be taken following a death in custody, including mental health assessments and grief counseling for both staff and incarcerated individuals. He also raised the issue of families who cannot afford burial costs, noting that he has personally paid for and attended funerals of individuals who died in his custody because no family member was able to claim the body. He suggested that a fund or process should exist to assist families in these situations.

Kevin Flanagan noted that while employee assistance programs exist for staff substance abuse and mental health referrals, the system for critical incident debriefing is inadequate. He referenced On-Site Academy, a program in the current budget that specializes in critical incident response for law enforcement and public safety personnel, as a potential resource. He also noted that the conversation should extend to staff suicides, which are an equally pressing concern.

Sheriff Cocchi concluded by stating that these issues require legislative action, not just committee recommendations, and called for collaboration among all stakeholders. He expressed optimism that Massachusetts is leading the country by having these conversations and working through these challenges openly.

VI. Public Comment

Mary Valerio addressed the committee, suggesting that true mental health and substance use treatment may be better handled outside the correctional system entirely, given the ongoing difficulty in achieving adequate treatment within correctional facilities. She recommended that individuals in acute mental health or substance use crisis be transferred to hospitals or dedicated treatment facilities rather than managed within correctional settings.

Ms. Valerio shared a personal experience in which she needed to notify a family member housed in a DOC facility that his brother had died unexpectedly. When she called the facility on a Saturday, staff told her there was nothing they could do and that she would need to deliver the news herself during her scheduled visit. She described having to inform the individual of his brother's death in the visiting room in front of other visitors, and cited it as an example of inadequate institutional compassion and notification protocols.

Ms. Valerio also raised concerns about interdiction, noting that while visitors undergo extensive screening, she has observed that staff, attorneys, deliveries, and takeout food entering facilities are not subject to the same level of scrutiny. She urged the committee to consider more comprehensive screening measures, including the expanded use of drug-detection dogs at all entry points. She concluded by reiterating that the most important issue is addressing the ongoing pattern of suicides, suggesting that if DOC is unable to manage the problem, individuals should be moved to facilities better equipped to provide appropriate care.

VII. Adjournment

Sheriff Cocchi moved to adjourn and the Committee unanimously voted to adjourn at approximately 12:41.