



State of Connecticut  
Department of Correction



**Connecticut Department of Correction Announces Leadership Appointments, Reverses Specialty Care Backlog**

*New Commissioner, New Medical Director, and Expanded Services Reflect a Human-Centered Vision for Connecticut Correction*

**(HARTFORD, CT)** — The Connecticut Department of Correction (“DOC”) today announced a series of leadership appointments and structural reforms that reflect a renewed commitment to how the agency approaches its mission: to keep staff safe while improving the climate by caring for the whole person and to help those under its supervision leave the system healthier and more supported than when they arrived.

Central to this work is a commitment to everyone inside DOC's facilities, staff and those under supervision alike. Correctional officers, clinicians, and support staff deserve safe working conditions, adequate resources, and an agency that stands behind them. A healthier, more stable environment benefits everyone within it, and that is the foundation on which this work is being built.

The announcements represent a deepened commitment to investing in the people DOC serves, expanding mental health services, spiritual support, vocational training, education, and—especially—medical care. DOC has made substantial progress in addressing the backlog of specialty medical appointment requests in six weeks. Between April 1 and May 8:

<b>1,289</b> Total specialty medical appointments booked	<b>998</b> Specialty appointments completed	<b>~250 appointment bookings/week</b> Appointments scheduled outpacing new appointment requests (50–100/wk) in recent weeks
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**A New Commissioner with a Clear Vision**

Commissioner Sharonda Carlos formally assumed leadership of the DOC on May 1, 2026, following the retirement of Commissioner Angel Quiros. She brings more than two decades

of experience within DOC, rising from substance abuse counselor to Deputy Commissioner of Administration.

Since assuming her role, Commissioner Carlos has directed her focus toward a thorough assessment of the agency's strengths, identifying opportunities for improvement, and building a plan for meaningful, measurable progress.

“This is a human services agency,” **said Commissioner Carlos.** “As correctional professionals, we are here to serve the humanity of every individual in our care, and to do everything in our power to support their well-being and address whatever they are facing. That means meeting medical needs, but it also means tending to mental health, addiction struggles, spiritual well-being, education, and developing the skills someone will need to build a successful life when they leave.”

### **A Dedicated Medical Leader for a Complex Population**

Central to that vision is the creation of a new senior leadership position: **Dr. Craig G. Burns, M.D.,** has been appointed **Executive Director of Inmate Medical Services.**

Dr. Burns’ career has been devoted entirely to Connecticut’s most complex patient populations. He trained in General Adult Psychiatry and Forensic Psychiatry at Yale, served as Assistant Chief of Psychiatric Services for UConn’s Correctional Managed Health Care program, and most recently held senior clinical leadership roles within DOC, including Chief Mental Health Officer.

“Those under DOC's supervision often arrive with significant, untreated health needs,” **said Dr. Burns.** “Many have never had consistent access to healthcare. Some carry diseases that, left untreated, they would carry back into their communities. The work we do here is a public health responsibility, and I am honored to help build a system of care that the people we serve deserve, and that Connecticut can be proud of.”

### **Turning a Corner: Addressing Specialty Care Backlog**

DOC is working closely with the Office of Policy and Management (OPM) and the Department of Social Services (DSS), as well as UConn Health, through a joint task force focused on healthcare access, wait times, and resource alignment. The task force is rapidly addressing the backlog of outstanding external clinical and specialty appointments while identifying durable, long-term solutions to transform the current system.

- **Backlog is being reversed:** Appointment bookings are outpacing new appointment requests. A priority review is underway to identify the highest-need cases, and improvements to the triage system are reducing unnecessary specialty referrals.
- **System modernization underway:** Technological advancements are reducing paper-based scheduling delays and enabling telehealth, e-consults, mobile care vendors, and even in-house sleep studies.
- **Federal Medicaid shifts:** The 1115 Waiver is now being implemented to provide Medicaid coverage to eligible individuals in their first 60 days of incarceration and up to 60 days pre-release. The Consolidated Appropriations Act of 2024 expands coverage for youth under 21 and individuals formerly in foster care within 30 days of release. DOC is exploring additional Medicaid administrative services partnerships to improve utilization management and shift toward a population health management model integrated with state Medicaid — addressing care continuity for the individuals who enter and leave DOC each year.
- **Concrete next steps:** In the next 60 days, DOC is evaluating and launching temporary specialty clinics in cardiology and gastroenterology, which represent the most acute shortages. In the next 90 days and beyond, a \$1M investment from the Governor’s budget will fund a permanent interagency team to institutionalize this task force’s work, including the development of a comprehensive staffing, facilities, and technology plan covering inpatient, outpatient, and specialty care. DOC is also looking to expand discharge capacity for individuals with chronic conditions at nursing-home level of care, freeing clinical resources for acute needs.

### **Experienced Leaders in New Roles**

As part of this restructuring, two long-time DOC leaders have been appointed to new positions that align their expertise with the agency's expanded mission. Robert Richeson, formerly the agency's Chief Operating Officer, will now oversee healthcare expansion initiatives and service development, with a focus on expanding clinic capacity, reducing bottlenecks in outside specialty referrals, and building partnerships with healthcare networks statewide. Dr. Byron Kennedy, DOC’s former Chief Medical Officer, is now serving as the Director of Academic Affairs and Regulations and is focused on credentialing, regulatory compliance, HIPAA oversight, and the training and education of medical staff.

## **Expanding What Care Looks Like: Prevention, Mental Health, and Whole-Person Services**

DOC has received funding to expand its workforce of Advanced Practice Registered Nurses (APRNs) and clinical social workers, strengthening primary care and behavioral health capacity across facilities. The agency is expanding clinic operations statewide, working with UConn Health and other healthcare networks to improve access to specialty services, and building continuity-of-care pathways so that those approaching discharge can transition into community-based care without interruption.

DOC has also pioneered innovative preventive care models. The agency was among the first correctional systems in the nation to adopt Cologuard colorectal cancer screening for those over 40, an initiative DOC approached the company about directly after identifying a population-wide gap in preventive care. A mammography van now visits York Correctional Institution, Connecticut's facility for women, ensuring that those under supervision have access to the same preventive screenings available in the broader community.

In infectious disease, DOC has made substantial progress in ensuring all Hepatitis C-positive individuals are cured before leaving DOC's care, meaning they will not transmit that disease when they return to their communities. This is a meaningful public health outcome for individuals and communities alike.

The expansion of clinical mental health services is a centerpiece of this work. The agency is increasing the number of psychiatrists, psychologists, and clinical social workers embedded in its facilities, recognizing that mental health needs are central to well-being and to the long-term success of those whom DOC serves.

## **Spiritual Care, Education, and Vocation**

Whole-person care at DOC extends to spiritual support, education, and vocational preparation. The agency's chaplains are full correctional employees who provide Christian, Jewish, Muslim, and other religious services within facilities across the state.

The agency has expanded access to vocational training and higher education within its facilities, partnering with educational institutions and workforce development organizations to ensure that those leaving DOC's supervision have real skills and prospects. These efforts draw on evidence-based models including the Vera Institute of Justice's T.R.U.E. and W.O.R.T.H. initiatives, the human-centered approach of Chicago Beyond, and the Norwegian correctional model—a global benchmark for rehabilitative care and low reoffending rates. DOC, in collaboration with UCONN's Institute for Municipal and

Regional Policy, is also participating in the Amend program, which brings evidence-based reform practices from Norway directly to American facilities.

“This agency is turning a corner,” **said Commissioner Carlos.** “Not just in leadership, but in purpose. Every person under our supervision is worth investing in. The changes we are announcing today reflect a commitment to treating those in our care with the dignity and humanity they deserve, and to creating conditions where change is possible. That is how we serve the people of Connecticut. That is how we do our jobs.”

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For Immediate Release: May 19, 2026

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