

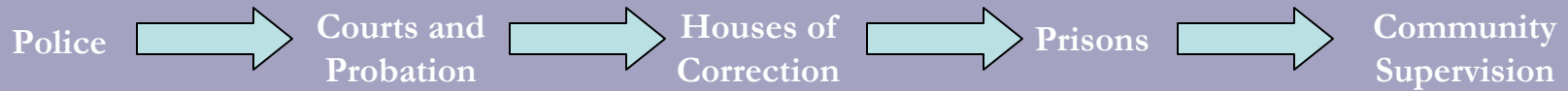


Goal:
Public Safety

Correcting the Approach: Managing Prisons
Effectively in Challenging Times

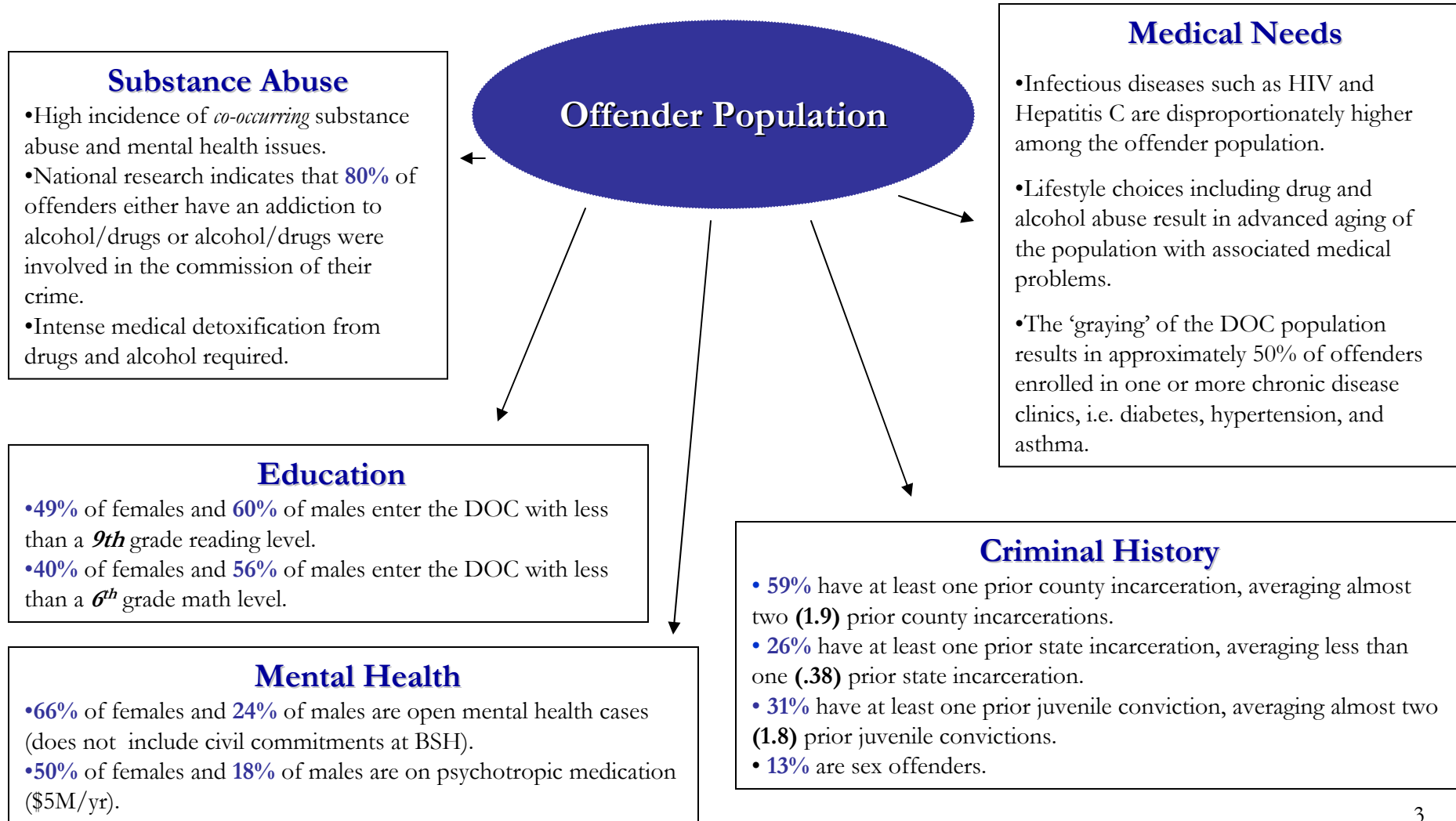
Harold W. Clarke, Commissioner
March 16, 2009

Managing Prisons Effectively in Challenging Times



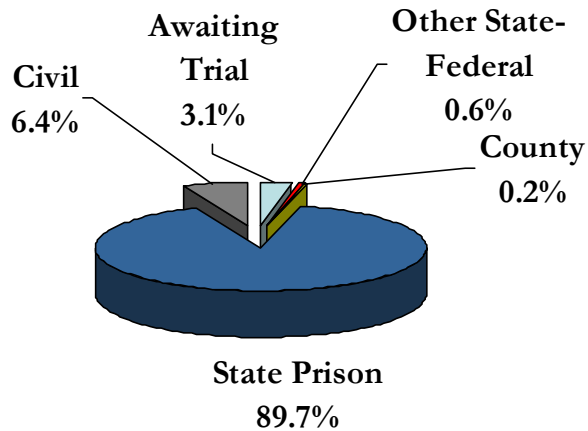
- **Successful reentry is the cornerstone of enhanced public safety efforts.**
- **Re-entry is a purposeful commitment that begins at the point of entry in the criminal justice system until the point of discharge from supervision.**
- **A comprehensive system must be established to identify highest and best use of resources and the most promising paths to success.**
- **Create cohesion among major stakeholders to identify the most appropriate methods for maximum use of resources.**
- **Agencies shall collect and evaluate data to support the reduction of recidivism.**
- **Focus interventions and programs on evidence-based practices.**
- **Establish resources in communities to provide appropriate supervision, treatment and services.**
- **Effectively illustrate to the public that reducing recidivism through reentry will successfully reintegrate offenders to the community and break the cycle of criminal behavior.**

Multitude of deficiencies and challenges during incarceration and reentry.



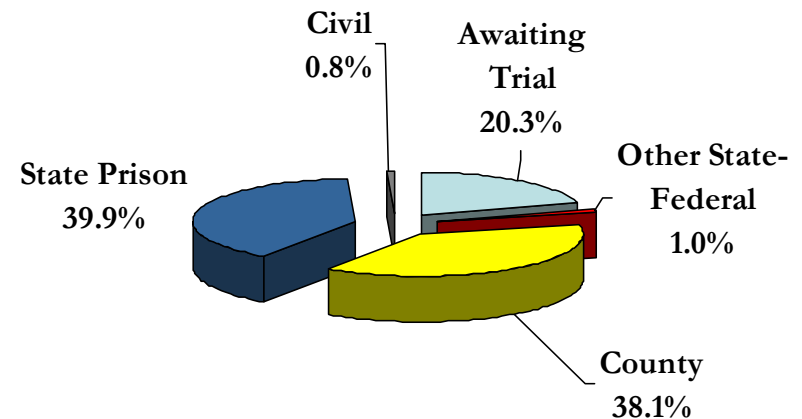
Diverse Offender Populations and Competing Missions

Male MA DOC Custody* Population on 1 December 2008 by Sentence Type



Total male custody population 10,462

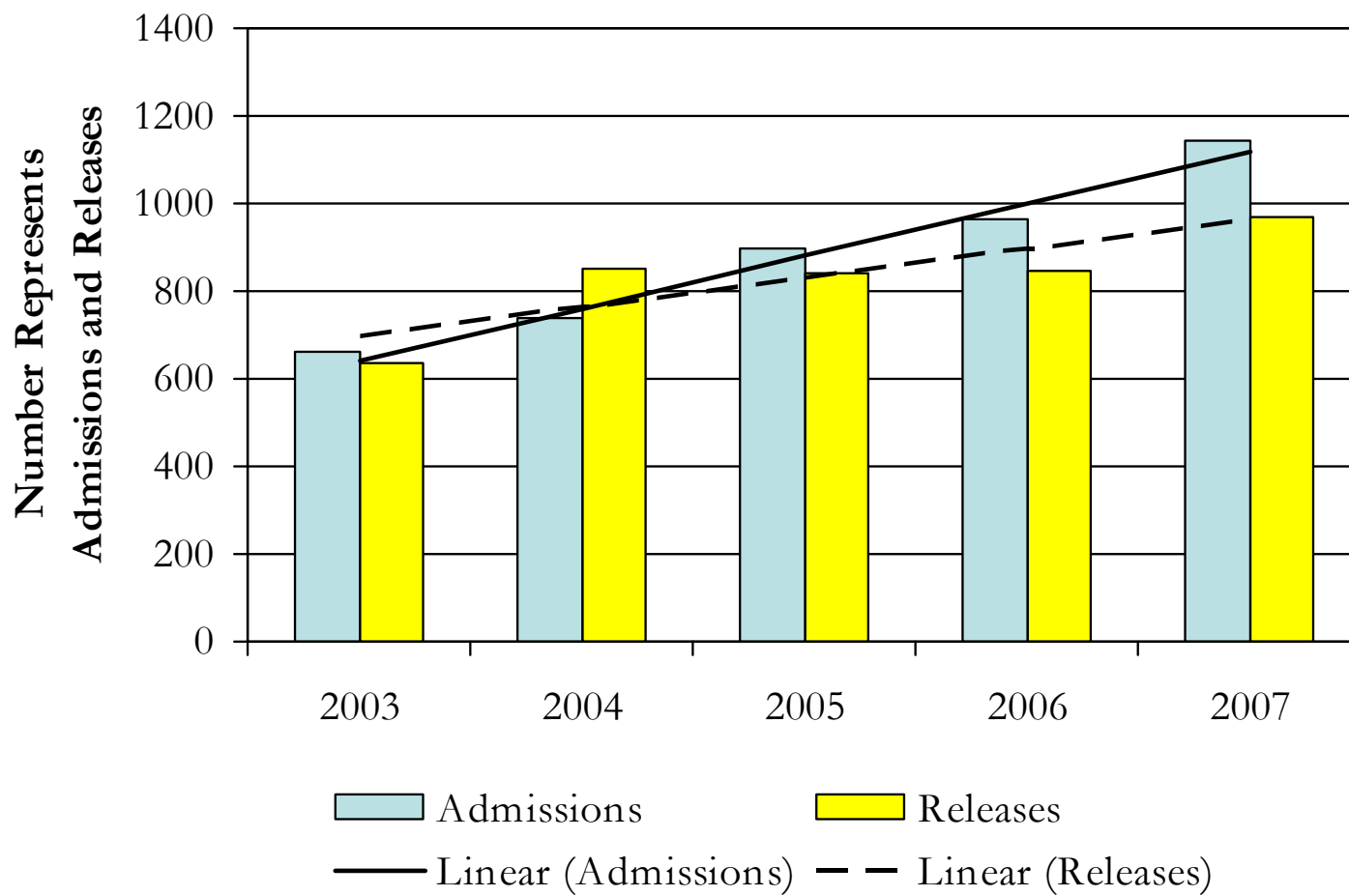
Female MA DOC Custody* Population on 1 December 2008 by Sentence Type



Total female custody population 770

The Department is charged with a number of unique responsibilities requiring considerable resources and management attention.

Mandatory Minimums



Admissions for mandatory minimums outpaced releases 4 out of 5 years. This resulted in 243 additional inmates which represented 25% of the growth in the criminally sentenced population.

Evidence-Based Approaches

Washington State Institute for Public Policy Estimates as of October, 2006	Effects on Crime Outcomes Percent change in crime outcomes, & the number of [national studies] in which the estimate is based	Benefits and Costs (Per Participant, net present value, 2006 dollars)			
<u>Notes:</u> “n/e” means not estimates at this time. Prevention program costs are partial program costs, pro-rates to match crime outcomes.		Benefits to Crime Victims (of the reduction in crime)	Benefits to Taxpayers (of the reduction in crime)	Costs (marginal program cost, compared to the cost of alternative)	Total Benefit (total benefits minus costs, per participant)
Programs for People in the Adult Offender System					
Vocational education in prison	-9.0% (4)	\$8114	\$6806	\$1182	\$13738
Intensive supervision: treatment-oriented programs	-16.7% (11)	\$9318	\$9369	\$7124	\$11563
General education in prison (basic education on post-secondary)	-7.0% (17)	\$6235	\$5306	\$962	\$10669
Cognitive-behavioral therapy in prison or community	-6.3% (25)	\$5658	\$4746	\$105	\$10299
Drug treatment in Community	-9.3% (6)	\$5133	\$5495	\$574	\$10054
Correctional industries in prison	-5.9% (4)	\$5360	\$4496	\$417	\$9439
Drug treatment in prison (therapeutic communities or outpatient)	-5.7% (20)	\$5133	\$4306	\$1604	\$7836
Adult drug courts	-8.0% (57)	\$4395	\$4705	\$4333	\$4767
Employment and job training in the community	-4.3% (16)	\$2373	\$2386	\$400	\$4359
Electronic monitoring to offset jail time	0% (9)	\$0	\$0	-\$870	\$870
Sex offender treatment in prison with aftercare	-7.0% (6)	\$6422	\$2885	\$12585	-\$3258
Intensive supervision: surveillance-oriented programs	0% (23)	\$0	\$0	\$3747	-\$3747
Washington's Dangerously Mentally Ill Offender program	-20% (1)	\$18202	\$15116	n/e	n/e
Drug treatment in jail	-4.5% (9)	\$2481	\$2656	n/e	n/e
Adult boot camps	0% (22)	\$0	\$0	n/e	n/e
Domestic violence education cognitive-behavioral treatment	0% (9)	\$0	\$0	n/e	n/e
Jail diversion for mentally ill offenders	0% (11)	\$0	\$0	n/e	n/e
Life Skills education program for adults	0% (4)	\$0	\$0	n/e	n/e

Response

Reducing Sentenced Male Recidivism: An Evidence-Based Approach⁶

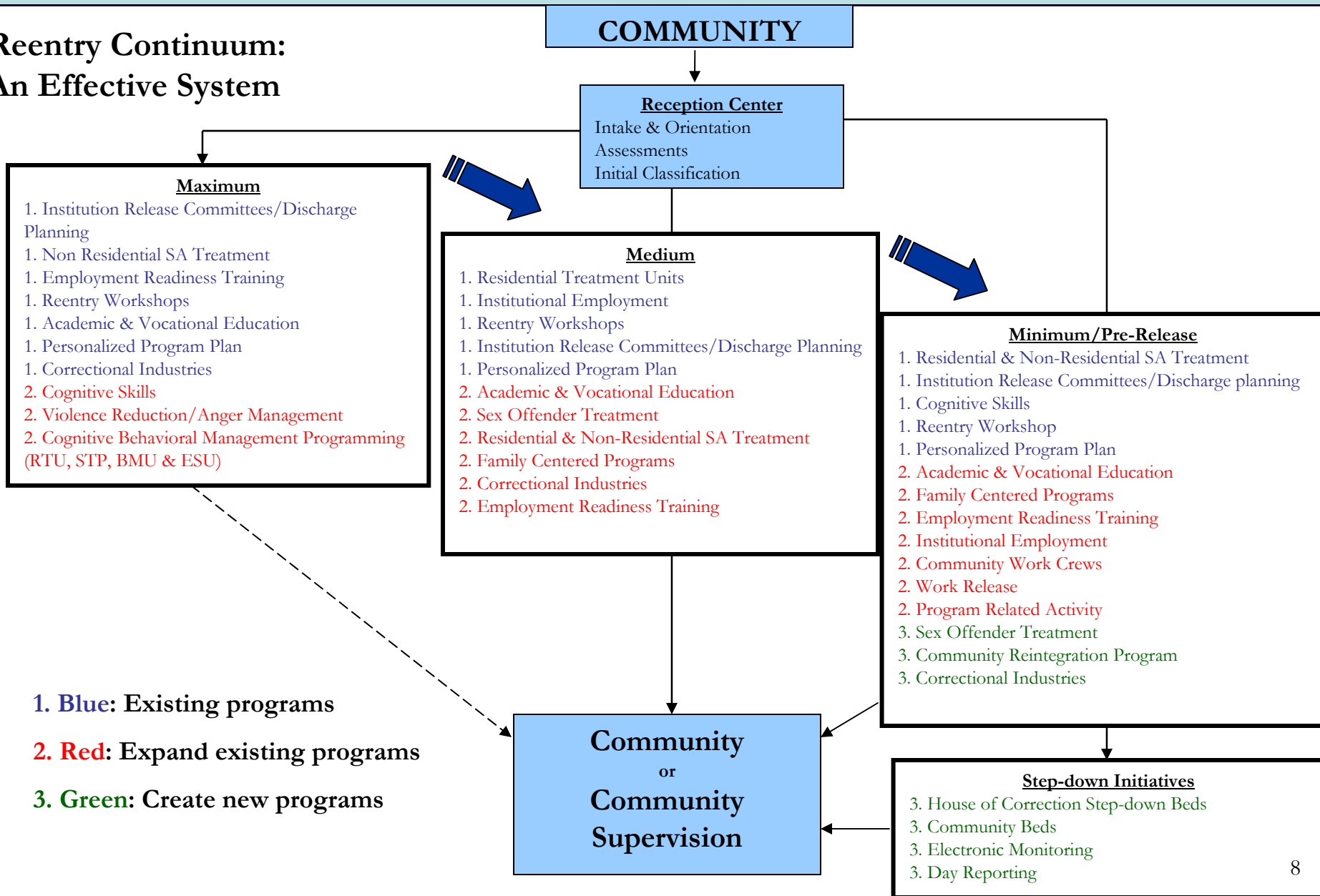
Program	Estimated Effect on Recidivism Rates ⁸	# of offenders released who would benefit from program	#Of offenders released who participated in Program	# and % increase w/out additional funding	# and % increase with additional funding	Program Budget Request**
Residential Substance Abuse Treatment	-14%	1,297	623 (48%)	687 (53%)	987 (76%)	\$1,350,000*
Re-entry Workshop	Not available	1,578	882 (56%)	1,420 (90%)	Not applicable	Not applicable
Sex Offender Treatment	-16.5%	158	21 (13%)	66 (42%)	106 (67%)	\$340,000
Violence Reduction	-18%	500	173 (35%)	200 (40%)	350 (70%)	\$90,000
Cognitive Skills	-9%	500	247 (49%)	270 (54%)	420 (84%)	\$90,000
Family Centered Programs	Not available	999	23 (2%)	400 (40%)	800 (80%)	\$180,000
Academic Education	-9%	1,285	949 (73%)	1,024 (79%)	1,174 (91%)	\$300,000
Vocational Education	-11%	1,446	747 (51%)	772 (53%)	1,050 (73%)	\$700,000
Industries	-7.8%	1,446	81 (5.6%)	156 (11%)	281 (19%)	\$1,700,000
Total						\$4,750,000

*2007 Male Releases to the Street.

** Funding does not include associated infrastructure needs. Capacity needs are addressed in the Division of Capital Asset Management Master Plan.

Response

Reentry Continuum: An Effective System



Specialized Services for Mental Health Population

Response



Need

- New and expanded mental health services, programs, units – 2007, 2008
- New Mental health Contract and Vendor
- Residential Treatment Units (NCCI-med security; SBCC-max security)
- Secure Treatment Unit (SBCC-max security)
- Day Treatment Services (MCI-Framingham)
- Behavior Management Services with individualized Behavior Plans (MCI-Cedar Junction; MCI-Framingham; SBCC)
- Mental Health Discharge Planning
- Gender Responsive, Trauma Informed Mode of Mental Health Delivery

- Behavior Management Units (MCI-Cedar Junction)
- Emergency Stabilization Units (MCI-Framingham)
- Secure Program Unit (Old Colony Correctional Center)
- Expanded Discharge Planning

Offenders have a constitutional right, thus DOC has a legal obligation to provide adequate medical care. The lack of mental health resources in the community has led to the increasing incarceration rate of the seriously mentally ill. While not necessarily consistent with the DOC's mission, treatment of the seriously mentally ill is a reality that must be faced by the DOC for the indefinite future.

Increasing Stakeholder Partnerships

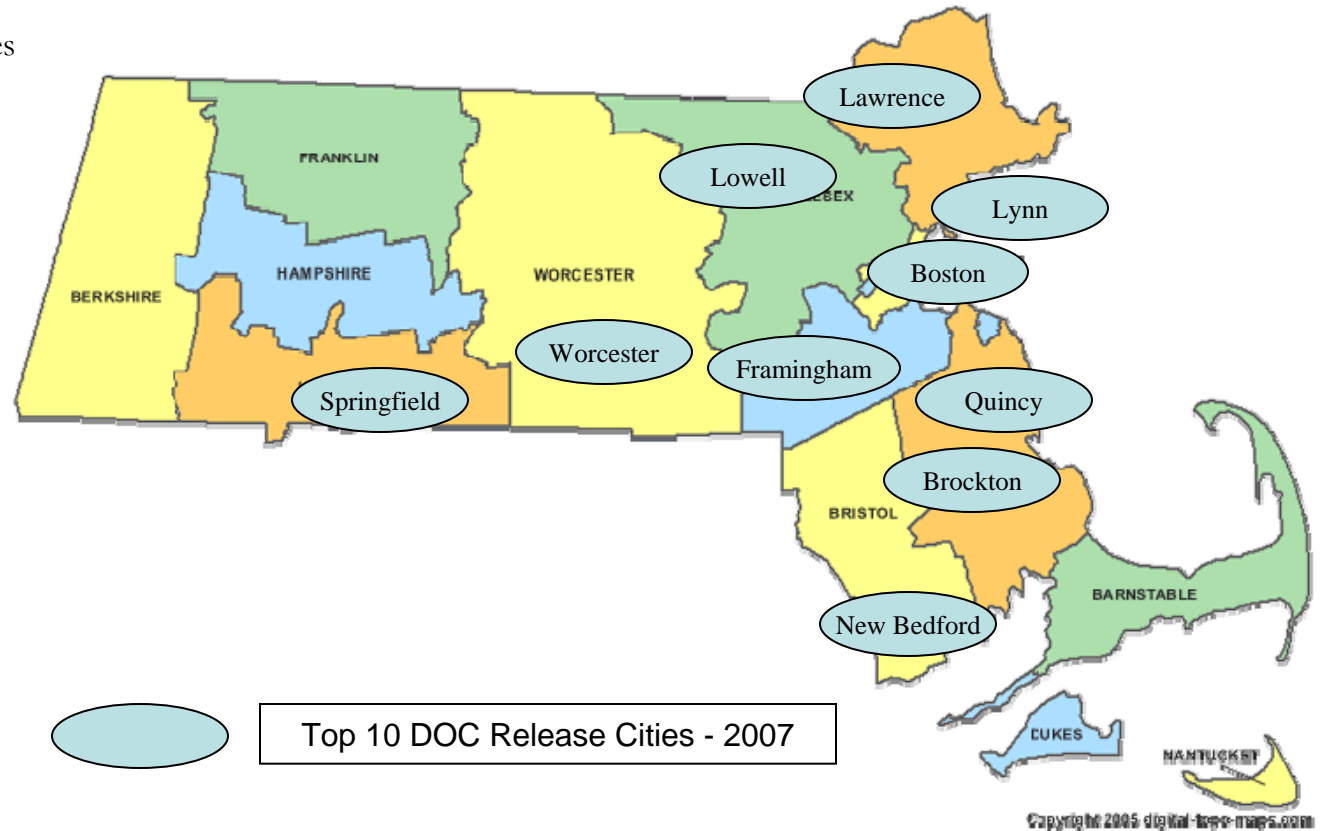


Re-entry Success Factors	Current Collaborations	Future/Enhanced Collaborations
Housing	Interagency Council of Housing and Homelessness, Veteran's (Federal & State), Office of Elderly Affairs and Parole	Department of Transitional Assistance, Department of Housing and Community Development, Department of Public Health, Local Housing Authorities
Employment	US Department of Justice, Community Colleges, MA Department of Education, US Department of Education, Health and Human Services, Department of Workforce Development	Community Colleges, One Stop Career Centers, Employers, Chamber of Commerce
Identification	Registry of Vital Statistics	Registry of Motor Vehicles, Social Security Administration
Medical / Mental Health	MassHealth, League of Community Health Centers, Department of Mental Health, Department of Public Health (HDAP)	League of Community Health Centers, Department of Mental Health, Department of Public Health

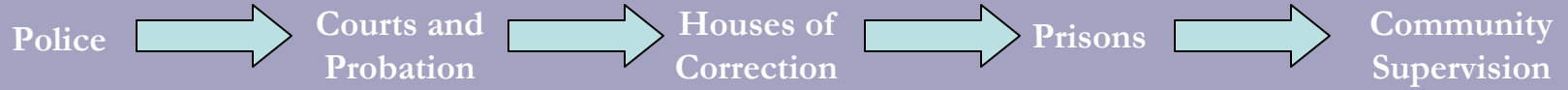
Regional Community Beds will facilitate a successful transition from incarceration to the offender's releasing community.

Goal:

- Release offenders into communities capable of supporting their needs,
 - Housing
 - Employment
 - Substance abuse treatment
 - Mental health / medical
 - Education
 - Family support



Reentry: Smart on Crime



- Successful reentry is the cornerstone of enhanced public safety efforts.
- By reducing recidivism through expansion of evidence-based programs, we will have fewer victims, reduce crime victim costs, costs to criminal justice agencies and costs to the community.
- Partnering with local community healthcare providers, housing authorities, substance abuse treatment providers, mental health service providers, career centers, workforce development boards, faith-based organizations, communities colleges, and other community organizations will provide appropriate services and support to all offenders following discharge from the criminal justice system.
- We can effectively illustrate to the public that reducing recidivism through reentry **will** successfully reintegrate offenders to the community and break the cycle of criminal behavior.