DEPARTMENT OF CORRECTIONS AND REHABILITATION - BEST PRACTICES TO REDUCE RECIDIVISM - BACKGROUND MEMORANDUM

DEPARTMENT OF CORRECTIONS AND REHABILITATION STUDY
Section 9 of House Bill No. 1015 (2019) (Appendix A) provides for a comprehensive study of the Department of Corrections and Rehabilitation (DOCR). The study must include:

1. A review, with input from a consultant engaged by DOCR, of gender-responsive correctional and rehabilitation facility and service needs. The review must include:
   a. The preferable location of facilities;
   b. The service needs of individuals sentenced to DOCR; and
   c. The impact on families of individuals sentenced to DOCR.

2. An assessment of facilities at the Missouri River Correctional Center, the James River Correctional Center, and the State Hospital, with input from a consultant engaged by DOCR. The assessment must:
   a. Include the DOCR master plan, staffing plan, comprehensive service delivery strategy, and cost estimates;
   b. Be based on providing comprehensive services to those committed to the care, custody, and control of DOCR;
   c. Include options for community-based and family-involved environments; and
   d. Consider the opportunity for vocational and workforce development.

3. A review of vocational opportunities, educational opportunities, workforce development, and medical and behavioral health treatment for those committed to the care, custody, and control of DOCR.

Background
The 2019 Legislative Assembly appropriated $229,678,076 from the general fund and $41,955,889 from other funds to DOCR for the 2019-21 biennium. The appropriation for the department provided for an increase of 54.5 full-time equivalent (FTE) positions, which increased the total number of FTE positions within the department to 899.79.

Inmate counts as of April 2019, as documented by DOCR, indicate an average inmate count for the 2017-19 biennium of 1,531 males and 204 females. The average estimated inmate count for the 2015-17 biennium was 1,567 male inmates and 223 female inmates.

Adult Services Division
North Dakota Century Code Section 12-47-01 provides for the establishment of the State Penitentiary. The main prison complex in Bismarck houses maximum and medium security male inmates. In April 2019, the State Penitentiary housed 749 male inmates. The James River Correctional Center in Jamestown is classified as a medium security housing facility and, in April 2019, housed 437 male inmates. The Missouri River Correctional Center is south of Bismarck, and has no fences or barriers to contain the inmates. The Missouri River Correctional Center houses minimum security male inmates whose sentences are not less than 30 days or more than one year. In April 2019 the Missouri River Correctional Center housed 187 male inmates. The adult services division offers addiction treatment services, a sex offender treatment program, and mental health programs through its treatment department. The division’s education program offers a variety of education programs, skills training, and vocational programs. In addition, the division offers work experience through Roughrider Industries.

Parole and Probation Division
The department has 16 offices across the state staffed by parole and probation officers who manage offenders on parole or supervised probation and complete presentence investigations ordered by courts. The officers supervise offender compliance with the supervision conditions and provide cognitive, behavioral, and other forms of counseling services.

The division operates or participates in drug court programs, GPS monitoring of offenders, drug and alcohol testing of offenders, and monitoring of sex offenders, and contracts for services with halfway houses and the Bismarck Transition Center to provide transition services.
Dakota Women's Correctional and Rehabilitation Center

During the 2003-05 biennium, DOCR began to contract with the Dakota Women's Correctional and Rehabilitation Center (DWCRC) in New England to house its female inmates. The DWCRC is owned and operated by the Southwest Multi-County Correction Center Board. The prison at the DWCRC consists of a 70-bed minimum security unit, a 40-bed medium security unit, and a 16-bed orientation unit. In May 2006, a 5-bed high security unit was added to the facility. In April 2019, the DWCRC housed 122 female state inmates.

Division of Juvenile Services

The Division of Juvenile Services has eight regional offices serving the eight human service regions across the state and is staffed to provide supervision to juveniles committed by the courts. The division also oversees the Youth Correctional Center, which is located west of Mandan and is the state's secure juvenile correctional institution. The Youth Correctional Center serves as a secure detention and rehabilitation facility for adjudicated juveniles who require the most restrictive placement and maximum staff supervision and provides appropriate programming to address delinquent behavior.

Juvenile programming at the Youth Correctional Center includes drug and alcohol programming; child psychiatric and psychological services; sex offender programming; a pretreatment program for juveniles who are difficult to manage; and a security intervention group program to inform, educate, and provide juveniles with alternatives to gang activity and gang affiliation. The Youth Correctional Center provides adjudicated adolescents an opportunity to complete or progress toward completing their education coursework while in residence through an accredited junior high and high school.

Tompkins Rehabilitation and Corrections Center

The Tompkins Rehabilitation and Corrections Center is located on the State Hospital campus and historically has been operated by the Department of Human Services (DHS) in collaboration with DOCR. The center provides a cognitive behavioral treatment approach utilizing cognitive restructuring groups to reduce risks to reoffend. The center consists of three 30-bed wards—one ward (30 beds) for females and two wards (60 beds) for males. The 2019 Legislative Assembly provided for DOCR to assume control of the 60-bed male unit of the Tompkins Rehabilitation and Corrections Center.

Free Through Recovery Program

The 2017 Legislative Assembly provided for the establishment of a community behavioral health program as a term of parole or an alternative to incarceration. The Department of Corrections and Rehabilitation, in cooperation with DHS, developed and implemented the Free Through Recovery Program. The Department of Corrections and Rehabilitation reported the program eventually should grow to serve 600 people, but there is a lack of services available in certain geographic areas.

Pretrial Services

The 2019 Legislative Assembly appropriated $755,034 from the general fund and 7 FTE positions for a pretrial services pilot program in three judicial districts.

Previous Studies

During the 2015-16 interim, the Incarceration Issues Committee studied pretrial services, sentencing alternatives, treatment options, and other related issues.

In conducting its study, the committee received reports from representatives of numerous state agencies, local government officials, and other entities, including the Council of State Governments (CSG) Justice Center. The representatives of CSG conducted meetings with stakeholders throughout the state and gathered data from the various entities throughout the criminal justice system. Representatives of CSG provided the committee regular updates regarding its justice reinvestment initiative as well as recommendations for proposed legislation.

The committee recommended House Bill No. 1041 (2017), relating to sentence reduction credit, medical paroles, domestic violence offender treatment, grading of theft offenses, credit for time spent in custody, terms and conditions of probation, controlled substances and controlled substance paraphernalia, addiction counseling services, and the supplemental nutrition assistance program. The bill was passed by the 2017 Legislative Assembly.

BEST PRACTICES TO REDUCE RECIDIVISM STUDY

House Concurrent Resolution No. 3015 (2019) (Appendix B) provides for a study of best practices to reduce offender recidivism, increase educational opportunities, prepare incarcerated offenders to rejoin their communities, establish and implement a community transitional housing program, including independent host homes, and encourage communities to reintegrate previously incarcerated individuals into society.
Background

In 2005 the Legislative Assembly created the Commission on Alternatives to Incarceration through House Bill No. 1473 (2005), codified as Section 54-35-24, to study sentencing alternatives, mandatory sentences, treatment options, and various criminal justice-related issues. After the commission studied various criminal justice-related issues during each interim since 2005-06, Section 54-35-24 expired on August 1, 2017.

The 2015 Legislative Assembly established an Incarceration Issues Committee. The committee, during the 2015-16 interim, studied pretrial sentencing alternatives, treatment options, and other related issues, which included an analysis of justice reinvestment reforms to seek cost-effective and evidence-based strategies to enhance public safety and properly manage corrections and supervision populations. The committee received reports from representatives of numerous state agencies, local government officials, and other entities, including the CSG Justice Center. The committee recommended House Bill No. 1041 (2017), which authorized sentence reductions for good conduct and medical paroles, authorized a court to use incarceration for a period not to exceed 30 days in lieu of a petition for revocation of probation, and required a sentencing court to sentence an individual who has pled guilty to, or has been found guilty of, a Class C felony offense or Class A misdemeanor offense to a term of probation at the time of initial sentencing, except for a violent offense.

The 2015-16 interim Human Services Committee studied behavioral health. The committee reviewed behavioral health-related information, including an overview of behavioral health, an overview of a behavioral health system of care, key legal obligations related to behavioral health services, and the DHS behavioral health services delivery system. The committee recommended Senate Bill No. 2038 (2017) relating to extending the holding period from 24 to 72 hours for emergency involuntary commitments for individuals with a serious physical condition or illness and House Bill No. 1040 (2017), which would have appropriated funds to DHS to allow for drug and alcohol programming, support services, and targeted case management services for individuals with severe mental illness and severe emotional disturbance. Although House Bill No. 1040 was amended to remove a $12 million appropriation for targeted case management services, the bill included funding for children's prevention and early intervention behavioral health services, peer-to-peer support services, and family-to-family support services.

Senate Bill No. 2015 (2017) directed DOCR to establish and implement a community behavioral health program to provide comprehensive community-based services for individuals who have serious behavioral health conditions as a term and condition of parole and probation and as a sentencing alternative under Section 12.1-32-02. The bill appropriated $7 million to DHS for the purpose of implementing the community behavioral health program during the 2017-19 biennium and created the Justice Reinvestment Oversight Committee to study the implementation of the community behavioral health program and justice reinvestment policies.

PROPOSED APPROACH FOR STUDIES

1. With respect to the comprehensive study of DOCR, the committee may consider:
   a. Inviting representatives from DOCR and the consultant engaged by DOCR to provide information regarding the preferable location of facilities, the service needs of individuals sentenced to DOCR, and the impact on families of individuals sentenced to DOCR;
   b. Inviting representatives from DOCR and the consultant engaged by DOCR to provide information regarding facilities at the Missouri River Correctional Center, the James River Correctional Center, and the State Hospital;
   c. Inviting representatives from the DWCRC and the city of New England to provide information regarding the DWCRC; and
   d. Touring DOCR facilities, including contracted facilities.

2. With respect to the study of best practices to reduce offender recidivism, increase educational opportunities, prepare incarcerated offenders to rejoin their communities, establish and implement a community transitional housing program, including independent host homes, and encourage communities to reintegrate previously incarcerated individuals into society, the committee may consider inviting representatives from DOCR, parole and probation, and DHS to provide an assessment of the services available in local communities.