



DEPARTMENT OF PUBLIC SAFETY  
AND CORRECTIONAL SERVICES

Report on Restrictive Housing – Fiscal Year 2017

Fulfilling Reporting Requirements Correctional Services Article, § 9-614,  
Annotated Code of Maryland

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Governor Lawrence J. Hogan  
Lt. Governor Boyd K. Rutherford  
Secretary Stephen T. Moyer

# Report on the use of Restrictive Housing during Fiscal Year 2017

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# INTRODUCTION

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Chapter 596 of the Acts of the 2016 Maryland General Assembly enacted Senate Bill 946 (SB 946), Correctional Services – Restrictive Housing – Report as Correctional Services Article, § 9-614, Annotated Code of Maryland. This statutory requirement directs the Department of Public Safety and Correctional Services (Department) to submit a report containing the preceding year’s restrictive housing data to the Governor’s Office of Crime Control and Prevention for publication on the agency’s public website. This year’s report includes restrictive and specialized housing data for fiscal year 2017.

Correctional Services Article, § 9-614, Annotated Code of Maryland requires the Department to report the following restrictive housing data elements:

- The total population of the correctional facility;
- The number of inmates who have been placed in restrictive housing during the preceding year by age, race, gender, classification of housing, and the basis for the inmate’s placement in restrictive housing;
- The Department’s definition of “serious mental illness” and the number of inmates with serious mental illness that were placed in restrictive housing during the preceding year;
- The number of inmates known to be pregnant when placed in restrictive housing during the preceding year;
- The average and median lengths of stay in restrictive housing of the inmates placed in restrictive housing during the preceding year;
- The number of incidents of death, self-harm, and attempts at self-harm by inmates in restrictive housing during the preceding year;
- The number of inmates released from restrictive housing directly into the community during the preceding year;
- Any other data the Department considers relevant to the use of restrictive housing by correctional facilities in the State; and
- Any changes to written policies or procedures at each correctional facility relating to the use and conditions of restrictive housing, including steps to reduce reliance on restrictive housing.

# OVERVIEW – Restrictive and Special Housing

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Four types of restrictive housing are used in the Department's correctional facilities:

- Administrative Segregation means that an inmate is confined to his or her assigned cell and retains many of the privileges allowed an inmate in general population. Administrative segregation is used when an inmate requires close observation by correctional staff or limited segregation from the general population. Administrative segregation is utilized to ensure the safety and security of the inmate, staff, the general inmate population, and the facility.
- Disciplinary Segregation means that an inmate is removed from the general inmate population and confined to a cell in a restricted housing unit. Inmates assigned to disciplinary segregation have certain privileges restricted in an effort to modify behavior. Disciplinary segregation is used for inmates found guilty by a hearing officer at an adjustment hearing for violating Departmental rules, institutional rules, or both.
- Maximum II Structured Housing (MIISH) means a securely controlled four stage step-down program for the Department's most frequently violent and dangerous inmates who are repeatedly placed on disciplinary segregation. The structured program encourages a reduction in violent behaviors through incentive based programming. As an inmate progresses through program's stages privileges are incrementally restored as an incentive for good behavior. The goal of the structured program is to prevent long-term assignment to disciplinary segregation by stabilizing violent inmates; and when possible, return them to general population.
- Serious Mental Illness Structured Housing is designed to provide a continuum of care and least restrictive environment consistent with institutional safety and security for those inmates with a diagnosed Serious Mental Illness (SMI), who might reasonably be expected to gain benefit from a structured program, and who earn repeated disciplinary segregation due to violent and/or dangerous behavior.

The Department uses two types of specialized housing for vulnerable inmates.

- Protective Custody is a special housing status for inmates who require protection for safety reasons, and includes separation from inmates assigned to the general population. Inmates in protective custody have the same privileges as inmates in general population.
- Special Needs Unit (SNU) is a special housing status designed to manage inmates diagnosed with a serious mental illness in the least restrictive environment possible. The goal of the SNU is to stabilize and provide treatment to SMI inmates; and when possible, return the inmates to general population with aftercare and ongoing support. Special

Needs Units are operated as general population tiers with a special designation. These units offer more intensive mental health services.

## DPSCS Population and Demographics

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The average daily population for the Department's inmate population in FY17 was 19,883. The male population was 19,059; the female population was 824.

At the end of FY17 the inmate population was 19,340. The male population was 18,522; the female population was 818.

During FY17 there were 29,253 inmates held in custody.<sup>1</sup>

The following charts present the racial summary of the FY17 end of year inmate population, as well as a summary by age:

Inmate Population	
Race	% of Population
Asian	0.4%
Black	70%
Indian	0.3%
Unknown	.8%
White	28.4%

Inmate Population	
Ages	% of Population
Under 18	0%
18 to 25	11.4%
26 to 30	19.4%
31 to 35	16.9%
36 to 40	13.9%
41 to 50	19.8%
51 to 60	13.6%
Over 60	5%

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<sup>1</sup> Method of calculation: FY16 EOY Inmate Population (20,374) + FY17 Intakes (6,173) + Returns (2,706) = 29,253

# Restrictive Housing: Individuals Placed & Placements

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In FY17, the Department placed 14,578 individual inmates on restrictive housing: 4,346 on administrative segregation and 10,232 on disciplinary segregation. Please note, some inmates were placed on restrictive housing more than once during the reporting period. During FY17, 49.8% of the inmates held in custody were placed on restrictive housing.

In FY17, there were 18,460 placements on restrictive housing: 5,270 on administrative segregation and 13,190 on disciplinary segregation. The tables below display the restrictive housing placements and removals by month.

<b>Administrative Segregation</b>	
Month	Placements
January	434
February	415
March	337
April	407
May	292
June	106
July	445
August	601
September	657
October	723
November	408
December	445

<b>Disciplinary Segregation</b>	
Month	Placements
January	1,180
February	1,149
March	1,200
April	1,047
May	821
June	166
July	1,358
August	1,340
September	1,179
October	1,270
November	1,253
December	1,227

<b>Administrative Segregation</b>	
Month	Removals
January	564
February	456
March	367
April	474
May	520
June	623
July	66
August	295
September	411
October	464
November	592
December	438

<b>Disciplinary Segregation</b>	
Month	Removals
January	1,350
February	1,129
March	1,410
April	1,278
May	1,283
June	1,191
July	180
August	904
September	1,110
October	1,040
November	1,079
December	1,236

The following charts and graphs display the age categories for the individual inmates placed on restrictive housing in FY17:

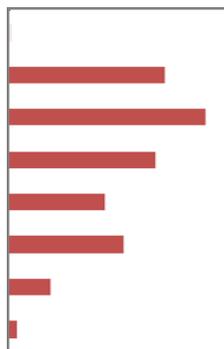
Individuals Placed on Restrictive Housing		
Ages	Count	% Restrictive Housing
17 and Under	3	0.0%
18 to 25	2,726	19.2%
26 to 30	3,572	25.2%
31 to 35	2,957	20.4%
36 to 40	1,985	13.3%
41 to 50	2,344	15.3%
51 to 60	857	5.6%
Over 60	134	0.9%

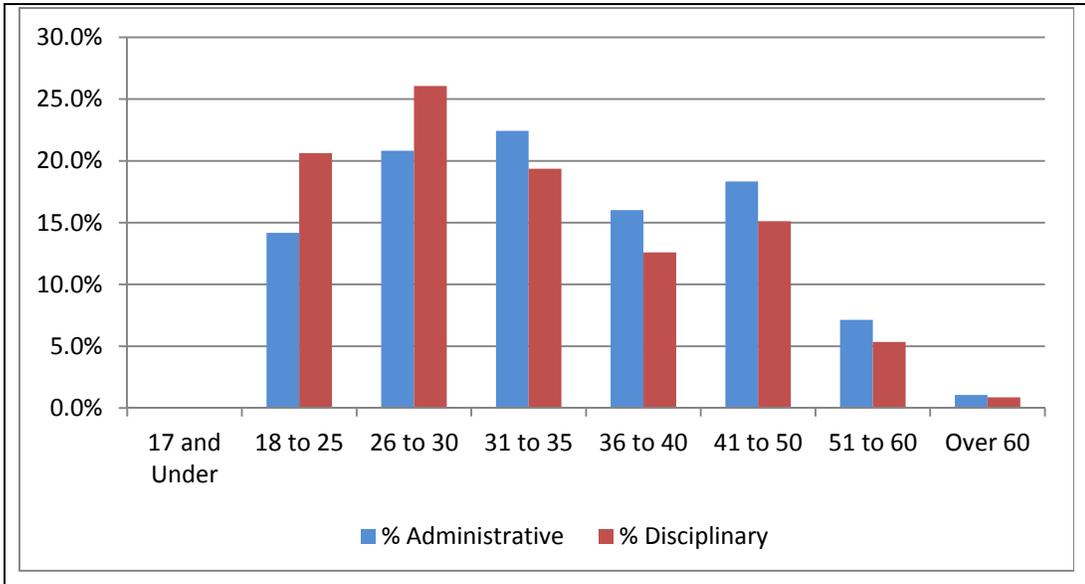


Individuals Placed on Administrative Segregation		
Ages	Count	% Administrative
17 and Under	1	0.0%
18 to 25	616	14.7%
26 to 30	905	21.8%
31 to 35	975	22.6%
36 to 40	696	15.7%
41 to 50	797	17.6%
51 to 60	310	6.7%
Over 60	46	1.0%



Individuals Placed on Disciplinary Segregation		
Ages	Count	% Disciplinary
17 and Under	2	0.0%
18 to 25	2,110	21.1%
26 to 30	2,667	26.6%
31 to 35	1,982	19.5%
36 to 40	1,289	12.3%
41 to 50	1,547	14.4%
51 to 60	547	5.2%
Over 60	88	0.8%



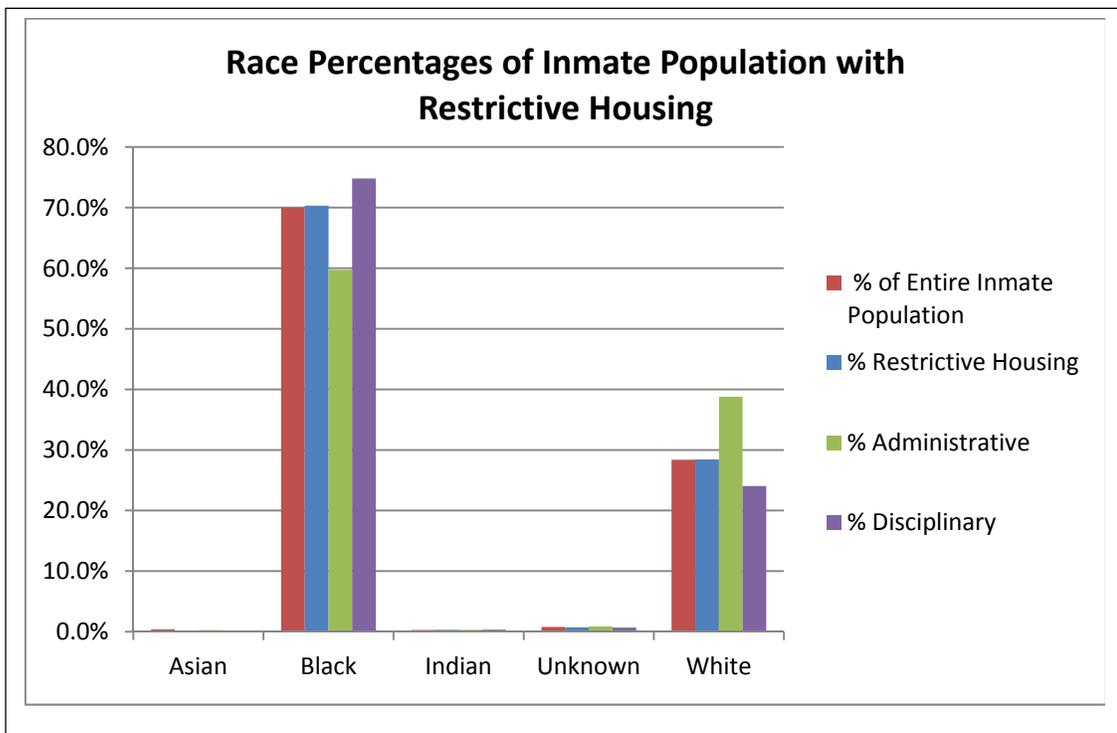


The following charts and graph display the racial summaries of the individual inmates placed on restrictive housing in FY17:

RACE	% Restrictive Housing
Asian	0.2%
Black	70.7%
Indian	0.4%
Unknown	0.8%
White	28.0%

RACE	% Administrative
Asian	0.3%
Black	60.3%
Indian	0.3%
Unknown	1.0%
White	38.2%

RACE	% Disciplinary
Asian	0.1%
Black	75.1%
Indian	0.4%
Unknown	0.7%
White	23.7%



# Serious Mental Illness

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The Department defines “Serious Mental Illness” (SMI) in accordance with the Code of Maryland Regulations (COMAR), as follows:

*COMAR 10.21.17.02 (76)*

- (76) "Serious mental illness" means a mental disorder that is:*
- (a) Manifest in an individual 18 years old or older;*
  - (b) Diagnosed, according to a current diagnostic classification system that is recognized by the Secretary as:
    - (i) Schizophrenic disorder;*
    - (ii) Major affective disorder;*
    - (iii) Other psychotic disorder; or*
    - (iv) Borderline or schizotypal personality disorder, with the exclusion of an abnormality that is manifested only by repeated criminal or otherwise antisocial conduct; and**
  - (c) Characterized by impaired functioning on a continuing or intermittent basis, for at least 2 years, and includes at least three of the following:
    - (i) Inability to maintain independent employment;*
    - (ii) Social behavior that results in interventions by the mental health system;*
    - (iii) Inability, due to cognitive disorganization, to procure financial assistance to support living in the community;*
    - (iv) Severe inability to establish or maintain a personal support system; or*
    - (v) Need for assistance with basic living skills.**

In FY17, the Department treated approximately 2,127 inmates diagnosed with a SMI. Of those individuals diagnosed with a SMI, 216 were placed on restrictive housing. Specifically, 84 inmates were placed on administrative segregation and 132 on disciplinary segregation.

# Pregnancy

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In FY17, there were no pregnant inmates placed on restrictive housing.

# Lengths of Stay

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The following chart displays the average and median length of stay, in days, for FY17 restrictive housing placements:

	Average	Median
Restrictive Housing	45.8	31
Administrative Segregation	51.5	35
Disciplinary Segregation	43.5	30

## Deaths, Self-Harm and Attempted Self-Harm

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The following chart displays suicidal gestures, attempts, and deaths occurring in FY17 while placed on restrictive housing:

<b>Self-Harm while on Restrictive Housing</b>			
	Suicidal Gestures	Attempted Suicides	Suicides
All Inmates	21	131	3
Restrictive Housing	2	28	0
Administrative Segregation	0	4	0
Disciplinary Segregation	2	24	0

## Direct Releases from Restrictive Housing

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The following chart displays the number of inmates released directly from restrictive housing in FY17 with the average, median and maximum length of stay, in days.

	<b>Releases while on Restrictive Housing</b>		<b>Length Of Stay</b>	
	Count	Average	Median	
Restrictive Housing	278	65.6	50	
Administrative Segregation	138	65.2	48	
Disciplinary Segregation	140	66	50	

## Restrictive Housing Policy and Procedure

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The Department has begun implementation of several initiatives that will improve the agency's ability to ethically and safely manage inmates with chronically violent behavior, and inmates with serious mental illness. Changes to Department policy and procedure include: (I) the establishment of a Maximum II Structured Housing (MIISH) program; (II) creation of a specialized housing unit for inmates with serious mental illness (SMI); (III) a proposal to modify the disciplinary matrix; and, (IV) nearly doubling the mental health services in the Department's new mental health contract.

## I. Development and Implementation of a Maximum II Structured Housing Program

One of the primary initiatives of the Department, as supported by numerous National Institute of Corrections (NIC) recommendations, has been to develop a structured housing program that targets violent inmates who routinely commit assaults and other serious rule violations while incarcerated.

The MIISH program was initiated in July 2017 and is located at North Branch Correctional Facility. MIISH is a securely controlled and monitored, four stage step-down program, for the Department's most frequently violent and dangerous inmates who are repeatedly placed on disciplinary segregation for the most serious rule violations (e.g. attempted murder, assault, hostage taking). The program targets an inmate's inappropriate behaviors – especially violent behaviors – and develops individualized case plans to alter outcomes through incentive based programming. The individualized case plans will target the top four risk factors for violent behavior, which include: (1) Antisocial Behavior; (2) Antisocial Personality Patterns; (3) Antisocial Cognition; and (4) Antisocial Associates.

## II. SMI Structured Housing Program

NIC recommended designating one correctional facility as the primary institution for a restrictive housing program for inmates who have been diagnosed with a SMI and continuously commit acts of violence while incarcerated. As a result the Department developed a SMI structured housing policy and program (SMISH). This program located at the Western Correctional Institution and began to receive referrals in September 2017, and has begun implementing policies and procedures to address the needs of this population. The SMISH program's daily operations and step-down structure is similar to the MIISH program, but tailored to address the specific mental health needs of the SMI population.

## III. Modification of the Disciplinary Segregation Matrix

NIC also recommended the Department modify its policies to adjust the Inmate Disciplinary Matrix. Section 12.02.27 of the Code of Maryland Regulations (COMAR) stipulates the Inmate Disciplinary process, covering the investigatory process, the hearing procedures, the adjustment history sentencing matrix, and the appeals process. If an inmate is found guilty of committing a rule violation, the officer presiding over the inmate discipline hearing utilizes the "Inmate Disciplinary Matrix" to determine the appropriate sanction. NIC recommended revising the matrix used for assigning disciplinary segregation time. NIC also recommended reducing the overall maximum disciplinary segregation time allowable for a single rule violation from 365 days to 60 days.

The Department has submitted proposed changes to COMAR that, if adopted, will reduce the overall maximum disciplinary segregation time for a single rule violation. Currently, the maximum allowable time for the most serious, and repeated, rule violations (e.g. hostage taking, escape, and assault) has been reduced from 365 days to 180 days.

<b>Current Policy</b>			
<i>Category of Inmate Rule Violation</i>	<b>Matrix for Imposition of Segregation Sentence</b>		
	<i>First Offense</i>	<i>Second Offense</i>	<i>Third Offense +</i>
IA	0-60	0-90	0-180
IB	0-30	0-60	0-90
II	0	0	0
III	0-15	0-30	0-60
IV	0	0	0
V	0	0	0

<b>Current COMAR</b>				
<i>Category of Inmate Rule Violation</i>	<b>Matrix for Imposition of Segregation Sentence</b>			
	<i>Violation Free</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>
I	30-60	60-120	90-180	180-365
II	0	0	0 or 15	30
III	0 or 15	0 or 30	0 or 45	60
IV	0	0 or 15	0 or 30	45
V	0	0	0 or 15	30

<i>Category of Inmate Rule Violation</i>	<b>Matrix for Imposition of Credit Revocation</b>		
	<i>First Offense</i>	<i>Second Offense</i>	<i>Third Offense +</i>
IA	60-90	90-180	180-365
IB	30-60	60-90	90-180
II	All	All	All
III	0-15	15-30	30-60
IV	0-5	5-15	15-30
V	0	0	0

<i>Category of Inmate Rule Violation</i>	<b>Matrix for Imposition of Credit Revocation</b>			
	<i>Violation Free</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>
I	30-60	60-90	90-120	120-All
II	All	All	All	All
III	5-10	10-20	20-30	30-60
IV	5	5-10	10-20	20-40
V	5	5	10	15-30

#### IV. Increasing Mental Health Staff under the New Contract

The Department recently entered into a new contract with a mental health services provider. The contract, effective January 1, 2018, nearly doubles the mental health staff within the State's correctional facilities; the previous contract required a total of 112 mental health positions statewide while the new contract mandates a total 206 positions statewide.

Under the new contract, staffing will be increased across all disciplines, including psychiatrists, psychiatric nurse practitioners, mental health counselors, and nurses. The new contract also has positions specific to addressing the programmatic and care needs of the Maximum II Structured Housing program and the Serious Mental Illness Structured Housing program. Specifically, the new contract dedicates the following positions to these programs:

- Mental Health Technicians who will assist in psycho-educational groups in the structure housing programs; and,
- Activities therapists who implement and oversee groups and activities to meet the educational, recreational, and social needs of the patients.

The new contract also increases the number of nurses dedicated to administrative and disciplinary segregation units, which will enable the Department to expand its Taking a Chance on Change (TCC) program.<sup>2</sup>

## CONCLUSION

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The roll out of the Maximum II Structured Housing Program and the SMI Structured Housing Program have been a slow, deliberate process, involving a significant amount of policy drafting, implementation and training. Beginning in 2018, the Department will have nearly doubled the mental health treatment staff under its new contract. The Department anticipates that these programs, alongside the proposed changes to COMAR and increased mental health staff, will have an impact on its use of segregation.

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<sup>2</sup> TCC is a structured in-cell treatment program designed to provide inmates housed in long-term restrictive/segregated units with the opportunity to participate in psychoeducational programming. The purpose of TCC is to address cognitive and behavioral deficits, as well as challenges common among inmates in long-term restrictive housing such as impulse control, anger, emotion regulation, effective communication, goal-setting, and long-term planning. TCC has been proven to make reductions in criminal thinking and disciplinary infractions evidenced in the current study suggest this is a promising intervention and mode of treatment delivery.