

To: House Committee on Corrections & Institutions
Chair: Alice M. Emmons
From: Cornelius Hogan
Date: 2/1/2018

Reaction to the “Campus Plan”

Recently, AHS submitted a long-term building and facilities plan draft to the Vermont Legislature as a starting point for discussion regarding a longer term approach to facilities. Following are my reactions to the Plan.

The Campus Plan Is Not Consistent with Vermont Values

Vermont is by and large a very community oriented state. Having the second lowest population in the nation, we’re small enough to talk to each other. Human relationships embedded in the way we work together are a strong feature of the Vermont way. One concern about how the Plan was constructed is that of the 16 person planning team there were no representatives of communities. The Team needed to reflect the Vermont community ethic.

How much accumulated large facility correctional line operating experience did the planning group have? Deep experience in correctional large facilities is a very necessary component to construct a plan that weighs the balances between facilities and programs and cultures of large and small facilities. This effort focused only on facilities. There was no discussion regarding programs that could reduce populations, or the negative cultures of large correctional facilities that develop over time.

The original establishment of the regional community based facilities had one primary purpose: to engage inmates locally with their families and community services, along with opportunities to test inmates in their communities to prepare them for a healthy release. That became overwhelmed in the 80’s when stronger and lengthier sentences were imposed and overcrowding became the big issue. We need to get back to that earlier ethic.

Building a massive 925 bed for all of these populations creates problems that over time we won’t be able to solve. A 925 bed facility begins to rival the old days of the Vermont State Hospital which in the 50’s housed over 2000 people. It also begins to rival Windsor Prison where all inmates in Vermont were housed before the regional system was created. It is an isolationist idea.

Moving inmates into a large isolated facility causes a new problem. The release of inmates to parole means that 'dangerous' persons, in high security, are suddenly, and with little preparation released to the community. The regional facilities provide opportunities for important testing prior to release.

In general, although necessary, correctional facilities are "schools of crime". Large facilities are even better schools of crime.

Issues of Culture in Large Correctional Facilities

Large facilities remove possible positive relationships between inmates and staff, and relationships with family and people in communities. In smaller facilities these relationships become very valuable, both for control and rehabilitation. There is less personal pressure in smaller facilities. When we closed Winsor Prison in 1974, the Department consciously aimed to put in place smaller regional facilities where inmates could live in relatively low pressure places and where connections to local communities could be maintained. This process cannot occur in large and more isolated facilities, and there are negative consequences as a result.

There is much research and literature in the corrections realm that confirm this thinking. An older example, which left a long impression on me, is "Re-Socialization Within the Walls" by Korn and McCorkle. In effect, inmates create their own society inside, and it is not a positive society.

In large facilities, because of the inmate culture, the inmates and staff, for good custody reasons, separate to the point where decent human relationships between staff and inmates suffer and often disappear completely. This increases the concern for the safety of the custodial and other line staff. Inmates become more self-destructive. Watch some of the television programs about practices in large facilities across the country to understand what I'm talking about. This is what happened in Windsor Prison.

Gangs in large facilities grow and take their own territories. They compete and cause major trouble unseen by staff because of the separation between staff and inmates. Over time this kind of culture develops to the point where staff cannot control it. In VT's smaller facilities, we have been free, for almost 50 years, from serious disturbances or riots. We have had skirmishes, with little long term negative impact.

I would speculate that one of the reasons a Vermont inmates in Pennsylvania, who died of cancer without being noticed, was a result of the separation of staff and inmates, and the resulting lack of human relationship. This kind of neglect is common in large facilities.

Cost Issues

The arithmetic shows a 100 million dollar operating savings over the next 20 years. A 100 million savings represents only 3% savings, or 5 million per year, over 20 years. This is a risky fiscal scenario. Compare that to hospital costs which rise 65 million on average each year. A projected 100 million dollar operating savings is not predictable over 20 years, particularly when the operating costs could be higher, to some degree, as a result of the Core Civic potential for raising reality costs. Further, there will be an increased need for custodial staff as a result of the steady deterioration, over time, of inmate/staff relationships.

Given Vermont's history of cost overages in prison construction, at numbers at or beyond 10%, it is essential to initially reduce the number of people incarcerated and place funds into community supports on behalf of those people. Real savings accrue when offenders do not come back to prison or avoid prison in the first place. I estimate there are about 400 inmates who don't need to be incarcerated. This should be our first priority.

Part of the consideration for a mega-correctional facility approach is driven by the total cost of running correctional facilities and programs. National data shows Vermont as being near the top on the cost front.

Some years ago, economist Art Wolff posted a paper comparing Vermont correctional cost to the average cost in the nation. He found that Vermont was one of the few states, where probation service costs were assigned to the Department of Corrections. In most other states they are assigned to the courts. Further he found that Vermont was only one or two of the states who ran all correctional programs, including county jails. The cost data for the other states did not include the costs of county jails. This was a major glitch in the national data system. His general conclusion was that Vermont's costs, as reported, were much more in line with other state costs.

That reporting condition is still true.

Some Good Ideas in the Campus Plan

- An additional 12 bed forensic unit for Mental Health
- Decreasing psych beds at the Berlin facility to become eligible for Medicaid
- A 16 bed unit to replace the Middlesex temporary facility
- Increasing psych beds at the Medical Center
- Using Medicaid for Woodside, if possible. It's been tried before though and failed
- creating a nursing home level geriatric center

These are good practical ideas. Get on with them. You don't need a campus to get them done as was indicated in the report.

Conclusions

A campus for 925 people is not a good idea. Negative things can be achieved when large central construction violates the size of Vermont and our fundamental community based approaches of solving problems.

It is a good idea to move ahead now on the list of things that should be done, that were detailed above and in the report.

Woodside is grossly inadequate, and 25 beds is the right number. Since the closing of the Weeks School in the mid 1970's, for over 40 years, Vermont has had the lowest per-capita incarceration of youth in the country. We should be proud of this and not slip backwards.

It should be noted that there were 549 empty nursing home beds in Vermont as of the end of April 2017. This represents 19% of the total 2300 licensed nursing home beds that were empty. The capacity to reorganize the use of nursing home beds is real. Could there be nursing home bed facilities that could be reorganized to be used for any other of the special populations, such as the needed geriatric facility? Also, there will be more school closings over the years as the student population continues to decline. Will there be any opportunities there? Opportunities in other sectors should be explored.

The same demographic realities that are affecting schools and prisons will continue. Re-using empty facilities will become an increasing part of all of our policy work.

Relationships among human beings are an important predictor of what happens in life, good or bad. The number of ACE's (adverse childhood experiences) that children experience and the consequences later in life is a good example. This is one of the reasons Vermont has worked so hard on early childhood education and socialization. These principles carry throughout our lives, even when we are older. Correctional work is no different. Why should we consciously put people in situations where they are even more isolated, less socialized and put in the situation where people turn inwards and, as a result, become even more dangerous? We need to be moving closer to our communities, not away from them. Yes, we do have problems to solve, but not this way.

Further, how much, particularly on the corrections front, gets done over the next eleven years until 2029? This plan could result in serious neglect in Corrections over the next years while waiting for a mega-facility. And those troubles will incrementally increasing the cost.

Regarding risk factors for Mental Health, the risk is much more than lack of facilities. Much of the problem of overloading hospitals with mental health patients can be solved by strong leadership and process, by moving patients out of hospitals when they need to move, and having a singular unit in the Mental Health Agency to control movement more judiciously. This approach, along with the more modest facility changes listed in the report, short of becoming part of a mega-facility, can do the job.

Putting centralized mental Health into a campus, overwhelmed by correctional inmates, is the wrong message for those mental health clients, their families and communities. Removing mental health patients completely from hospitals is not a good idea simply because of the integration of mental health and physical health requirements. Current problems of overcrowding in hospitals can be solved procedurally, and with leadership from the Mental Health Department.

Eliminating out of state inmates is an important task to accomplish. But think about detentioners. The condition and numbers of detentioners in Vermont, has not changed over the decades. Instead of building housing we should heed the recommendations of that 1984 corrections overcrowding report and eliminate

half of the detentioners with electronic supervision and other techniques, rid facilities of most of the non-violent women (80% are non-violent), and find housing for another 200 inmates ready for release. This would result in a reduction of about 400 inmates from our facilities.

At that point you could build a much smaller facility for the remaining detentioners, even further reducing the number of beds for sentenced prisoners.

Planning for facilities should take these kinds of dynamics into account and should not be based on the status quo.

Further, the issue of demographics over time plays an important role. The end of the 'baby boom' with much lower birth rates, is having a major impact on our schools as school census has dropped from 108,000 students in Vermont, 20 years ago, to about 73,000 students today. This same dynamic is also affecting our prison population. Building a 925 bed facility in that dynamic doesn't make sense. A mega-facility will be built to last 50 – 100 years. Re-organizing space for corrections is much more possible with smaller facilities than a single larger one.

In the "Understanding the Problem" section of the report, I deeply disagree with the proposition that de-institutionalization over the last decades went too far. The real issue is that the drug and opioid issue has hit us like a ton of bricks. This problem has affected every major institution in our national and Vermont society, including schools, child protection, Mental Health, Corrections, hospitals, etc. This results in the need for more programmatic capacity and some additional facility capacity to help deal with the problem. But over the years, we will deal with the opioid problem. That doesn't mean that we don't have to make significant change in programmatic capacity and some carefully chosen facility adjustments.

But the Campus will primarily be a Corrections facility. Being assigned to the campus for people in need of Mental Health, and children needing to be controlled, is a serious issue. In their minds, and in the minds of the general public, they are being sent to the prison complex.

Of the seven identified populations identified, the focus is entirely on facilities. There is little or no information about what programs and interventions that are needed for these populations that can lessen the need for a mega-campus.

The report should not solely be on “a master facility plan”. It should be a plan to provide the best services to the individual populations. We need to identify what is possible, as close to our communities as possible.

Over the many years, the State of Vermont has worked hard to depend less on buildings and facilities as it moved the programs closer to communities. Examples are the closing of the Weeks School, Windsor Prison and the Brandon Training School. The Campus Plan is a major step backwards in the context of Vermont’s modern history. There are very real problems that need to be solved, but this solution, over time, will create more problems than it solves.

And, fundamentally, given their muddled histories, private prison corporations cannot be trusted.

We have to remember that Vermont is the second lowest population state in the nation. Our problems should not and cannot be solved using large state models.

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My Bio: Experience with Corrections

- Education: B.A. Rutgers University; Masters: The Wharton School of the University of Pennsylvania; Attended the Columbia School of Social Work
- 35 years of work in or supervising Corrections
 - 7 ½ years in NJ from being a line correction officer to negotiating the end of a major riot at Rahway Prison, a 2000 person facility. In NJ, I worked in 4 major correctional facilities, Annandale, Yardville, Trenton Prison and Rahway Prison and one in Vermont, Windsor Prison. They all exhibited serious problems.
 - 7 ½ years in Vermont corrections as Deputy Commissioner and Commissioner.
 - Negotiated 2 major riots (hostages, fires, etc.) at the rapidly failing Windsor Prison where I had to bring in a professional from the NJ prison system to bring things back under control while it was closing.
 - Secretary of Human Services in Vermont for 9 years, where the Department of Corrections was part of the Agency, during a period of

rapid increases in census as a primary result of Legislative changes in sentencing.

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