

Department of Corrections DOC 101

VISION

We create safety and

equity by seeing potential,

supporting change,

and serving communities.

MISSION

We lead through innovation We advance restorative justice practices

We cultivate meaningful partnerships

> We provide justice-involved individuals with opportunities for self-improvement

We support staff wellness

We create rewarding career opportunities

We ensure our facilities and field offices are safe, secure, and healthy

VALUES

Accountability

We, individually and collectively, act in accordance with our mission and values in service to our vision.

Collaboration

We succeed when we have diverse and equitable partnerships that include our communities and the people in our care and custody.

Compassion

We treat everyone with respect and dignity and respond empathetically to people's lived experience.

Equity

We address systemic barriers that hinder opportunity and use fair and impartial decision-making.

Innovation

We use evolving research from diverse communities to identify, develop, and implement effective practices.

Integrity We practice our values in an honest and transparent way.

> Safety We create an equitable culture of physical, emotional, and material wholeness.

Overview

- Housed within Vermont **Agency of Human Services**
- Unified System
 - Pretrial supervision → detained → sentenced → community supervision

• Facilities:

- 6 in-state facilities
 - 5 men's facilities
 - 1 women's facility
- 1 out-of-state men's facility

• Probation & Parole:

- 12 district offices
- Training: Vermont Correctional Academy
- Budget: ~\$200M (98% General Fund)
- Staff: **1,124**



DOC Strategic Plan





Vermont Department of Corrections

Roadmap to 2030: Mission-focused, values-driven

STAFF AND STAFFING

Build a sustainable correctional workforce that invests in professional growth and staff wellbeing.

HEALTH AND WELLNESS

Achieve a holistic health and wellness system to improve outcomes for incarcerated and supervised individuals.

DIVERSITY, EQUITY, AND INCLUSION FOR A JUST SYSTEM

Advance diverse, equitable, and inclusive practices into all that we do to achieve a just corrections system.

MODERNIZATION

Strategic Plan Goals

STAFF AND STAFFING

Build a sustainable correctional workforce that invests in professional growth



GOAL 1: Staff are empowered by a workplace cultivated to embrace and support the full spectrum of individual experience and identity. GOAL 2: By 2030, staffing levels and staff retention are optimal and sustainable.

GOAL 3: Roles and processes are optimized to enhance staff engagement and operational efficiency.

GOAL 4: Opportunities for professional development and career growth are offered through a fair and transparent system.

GOAL 5: The Department provides opportunities and an environment that promotes staff health and wellness.

HEALTH AND WELLNESS

Achieve a holistic health and wellness system to improve outcomes for incarcerated and supervised individuals.



obligation.

GOAL 2: The Department engages Vermont's community members to support health and wellness outcomes for the population we serve.

GOAL 3: Health and wellness systems and processes operate efficiently and effectively.

GOAL 4: The Department supports and fosters holistic wellness for those in its care and custody.

DIVERSITY, EQUITY, AND INCLUSION FOR A JUST SYSTEM

Advance diverse, equitable, and inclusive practices into all that we do to achieve a just corrections system.

GOAL 1: Staff recognize and appreciate the daily impact of identity and why JEDI is vital to our success.

GOAL 2: The Department's systems, structural environment, policies and procedures are informed by trauma-informed practices. JEDI principles, and individuals with lived experience within the criminal justice system.

GOAL 3: Supervision, programs, and intervention services reflect the diverse needs of the people we serve.

GOAL 4: JEDI-responsive principles are embedded into all Department processes and retention efforts to equitably serve every staff member.

Modernize systems, structures, technologies, and processes to achieve the nation's leading model of corrections

GOAL 1: Vermont's correctional system employs modernized systems, structures, technologies, and processes.

GOAL 2: The Department cultivates meaningful partnerships to advance community engagement and restorative practices.

GOAL 3: Modernization is embedded within each strategic initiative and advances innovative, efficient, evidence-based, and data-driven solutions Department-wide.





Vermont's Incarcerated Population

Incarceration Rates by State - 2024

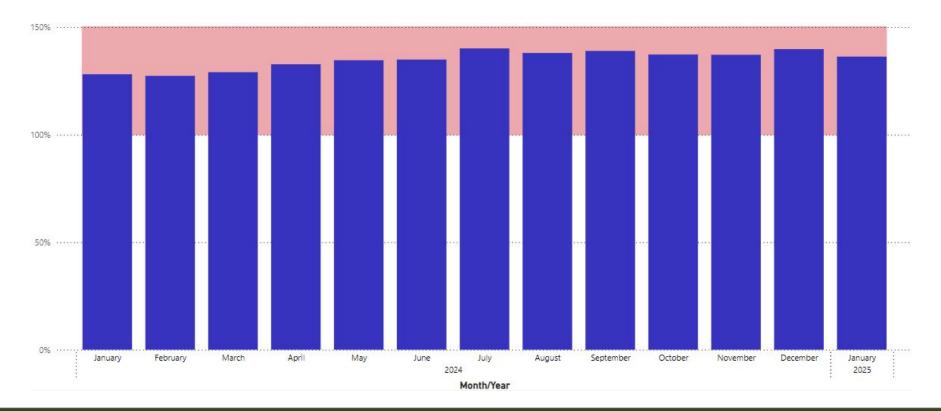
Rate per 100,000

Louisana	1,067	
Mississippi	1,020	
Arkansas	912	
United States	608	
Oregon	494	
California	494	
Hawaii	367	
Connecticut	326	
New York	317	
New Hampshire	278	
Maine	272	
Rhode Island	254	Vermont's overall incarceration rate ranks second-lowest nationally
Vermont	245	<
Massachusetts	241	

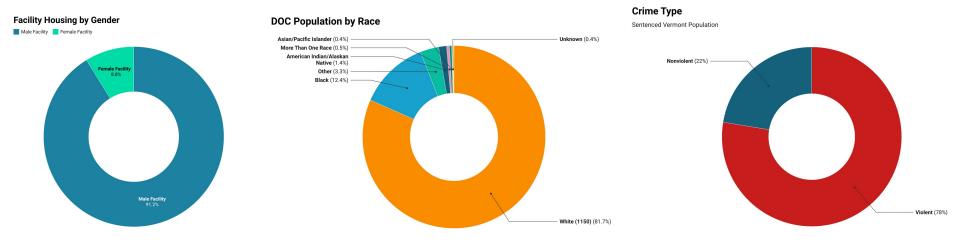
Includes those held in state prisons, local jails, federal prisons, USMS detainees, Indian Country jails, juvenile facilities, and involuntarily commitments Source: Prison Policy Initiative • Created with Datawrapper

Male Correctional Facility Bed Capacity: Last 12 Months

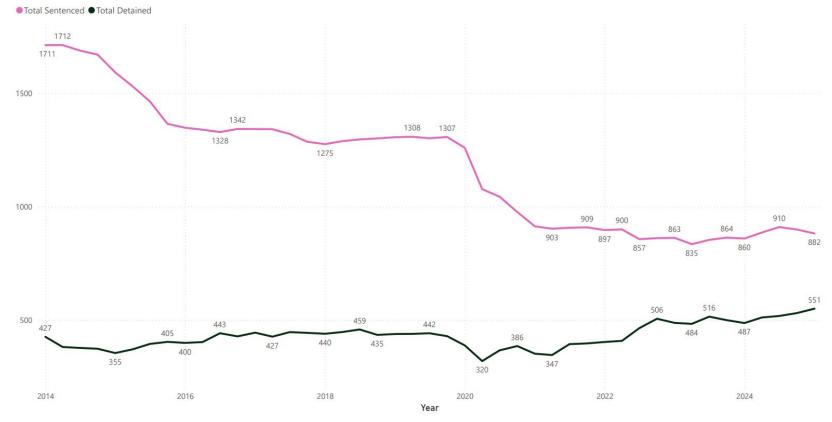
Vermont DOC facilities remain oversubscribed, with an average of **135%** of male general population beds in use statewide over the last year. The American Correctional Association recommends a census of no higher than 85%.



Vermont Incarcerated Population

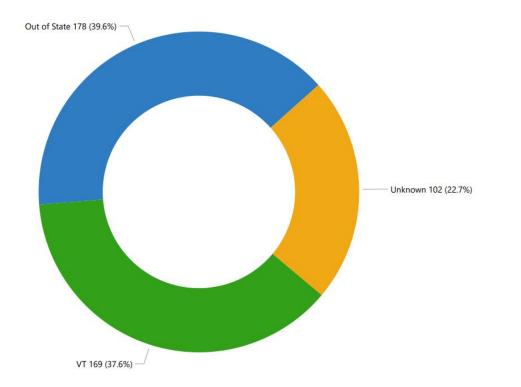


Quarterly Sentenced Individuals & Detainee Averages: 2014-2025



Total Sentenced = all individuals incarcerated by VTDOC who were sentenced for crime(s); Total Detained = all individuals incarcerated by VTDOC who are detained for crime(s).

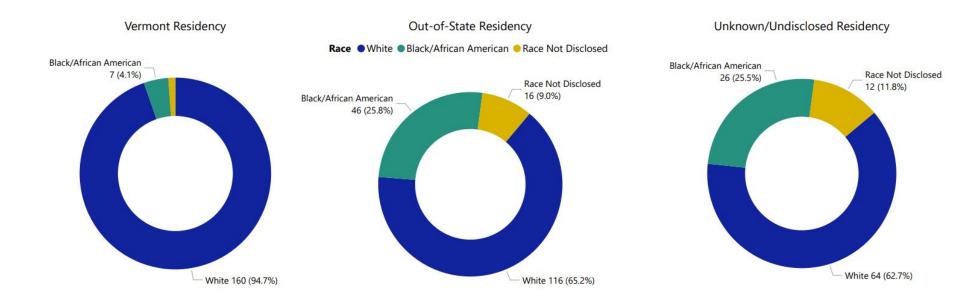
Detainee State of Residency Status



Note: Data as of December 31, 2024

Detainee Population by Race & State of Residency

State of residency for those detained awaiting trial in Vermont.



Note: Data as of December 31, 2024



Key Context



System Challenges

Staffing

• Vacancies, retention, state workforce demographics, overtime costs, physical workplace environment

Health & Wellness

- Serving physical/mental health needs of incarcerated individuals, particularly those detained awaiting trial
 - Lack of access/poor connection to medical care prior to justice-involvement
 - Sequelae of heavy substance use

DEI & Justice

- Remote hearings and court backlogs
- Lack of coordinated community reentry services and geographic disparities
- Paucity of community service providers, particularly for male-identifying individuals

Modernization

- Lack of WiFi and access to basic technology
- Lack of transitional housing stock/availability
- Deteriorating physical infrastructure
- Antiquated and highly manual data systems (OMS)





Key Correctional Reforms

Recruiting & Retaining Staff

Key Context:

 Fundamental system changes are needed to achieve sustainable staffing levels

Ongoing Efforts:

- DOC redesigning the role of the correctional officer and staff experience to recruit and retain all levels of today's workforce
 - **Invested over \$30M** to increase compensation for correctional staff in FY24-25
 - Redesigned shift schedules to create more work/life balance
 - Created Central Operations Specialist team to reduce staffing pressures on field and facilities

Efforts reduced vacancies by 50% since July 2022



New effort to transform correctional practices in Vermont



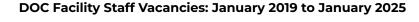


Recruiting & Retaining Staff



Next Steps:

- Piloting **remote correctional academy** to increase accessibility for new recruits
- Implementing strategic plan with key focus on staffing
 - Removing paper-based processes and automating tasks to ^{25%} reduce workload
 - Investing in supervisory training to improve staff
 experience
 - Increasing opportunities for mentorship and professional development
- Using data-driven approach for informed decision-making



35%



1115 Waiver: Medicaid Reentry Project

Key Context

- 1965 Social Security Act **explicitly prohibits incarcerated individuals** from receiving Medicaid except in rare cases
- Vermont received **approval from Biden administration** in 2024 to pursue 1115 waiver
- Initiative driven by **AHS interdisciplinary team**

Implementation

- Beginning January 1, 2026, Medicaid restarts **90 days prior** to sentenced individual's release
- All savings to be reinvested into health services
- Federal capacity building funds to modernize MMIS (DVHA claims processing system)



PUBLIC SAFETY

Vermont approved to expand Medicaid coverage for people transitioning out of prison

The expansion, which would cover 90 days before release, is expected to take about a year and a half to design and implement.

By Ethan Weinstein July 2, 2024, 5:58 pm

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Replacement Women's Facility

Key Context

- Vermont's sole women's facility, Chittenden Regional Correctional Facility (CRCF), was originally built as a short-term detention center for men
 - Lacks adequate space for programming, vocational training, specialized needs

Next Steps

- Identified two potential sites in Essex to **maintain proximity to current** service providers/staff in the Chittenden County area
 - Submitted zoning proposal to remove corrections overlay
 - Ongoing conversations with Town of Essex
- New, Scandinavian-style facility to offer more humane and dignified living and working environment

PUBLIC SAFETY The state wants to build a new women's prison. What do those held there think?

"This building is not fit to house people, to have people living in it and working in it," said one person who runs a program in the prison.

By Ethan Weinstein September 24, 2024, 3:56 pm

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Community Recovery Partnerships

Key Context

- Overdose is the <u>leading cause of death</u> for people recently released from incarceration nationwide (up to 129x risk)
- Increased community-based substance use treatment is **associated with** decreases in both jail admissions and overdose deaths
- Substance use and associated criminal behavior among the **leading causes of** incarceration in Vermont
- Every Vermont community with a correctional facility **already hosts an accredited recovery center**

Statewide Peer Coaching via Recovery Partners of Vermont Sites

- Scaling **<u>Rutland pilot</u>** statewide: Peer coaching in **5 of 6 facilities**
- In-reach peer recovery coaching bridges prison/community divide
- Recovery center challenges: staffing and new, complex caseload
- Funding: BAA (\$500,000), Opioid Settlement (\$1M), Senator Welch CDS (\$1.88M)

'They're helping me save the rest of my life': Rutland organization helps incarcerated people find sobriety and rebuild their lives

By Tiffany Tan May 18, 2023, 7:04 am





Mike St. Pierre at the Turning Point Center of Rutland in March. Photo by Glenn Russel|VTDigger

RUTLAND — In 2018, Mike St. Pierre was a year into his most recent incarceration at Rutland's Marble Valley Regional Correctional Facility when he felt drawn to attend a presentation by the local substance use recovery center. After listening to the visiting peer counselors talk about their paths to recovery, he decided to sign up for their prison programs.

DOC & Community College of Vermont

Key Context

- <u>Free community college</u> for incarcerated individuals and DOC staff
- Supported by **\$4.5M CDS** from Sen. Sanders via DOJ
- Classes available at **all major DOC sites** (exploring expansion to St. J and Rutland via expanded tech)
- **Expanded course offerings** for incarcerated individuals and eligibility for family members of correctional staff

Next Steps

- Secure WiFi to offer increased diversity of courses and different teaching modalities
 - Continued Pell funding dependent on WiFI
- Continue to resolve operational hurdles (space, facility scheduling, CCV staff schedules, technology)
- Offer vocational training modules



New program offers Vt. inmates free classes to prepare for life after prison



DOC Community Investments

This year, DOC allocated more than **\$11,000,000** in community-based services, programs, and alternatives to incarceration, including:

- **\$6,364,748** for transitional housing (Pathways, Burlington Housing Authority)
- **\$3,706,338** to Community Justice Centers across Vermont
- **\$1,060,000** for community recovery centers (Turning Points) for in-reach recovery coaching at all correctional facilities and probation and parole
- **\$714,516** granted to CRCF providers (Vermont Network DIVAS program, Vermont Works for Women, Lund Kids-A-Part, Mercy Connections) for trauma-informed counseling, mentoring, child visitation, vocational training
- **\$240,952** for Jenna's Promise reentry support, housing-first recovery model, and vocational training



Questions?

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Appendix

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DOC Population Statistics: Health

Medication Trends

- Population receiving medication: 96%
- Receiving psychotropic medications: **59%**
- Average number of medications: **5.5**
- Receiving Medication for Opioid Use Disorder (MOUD): Two-thirds

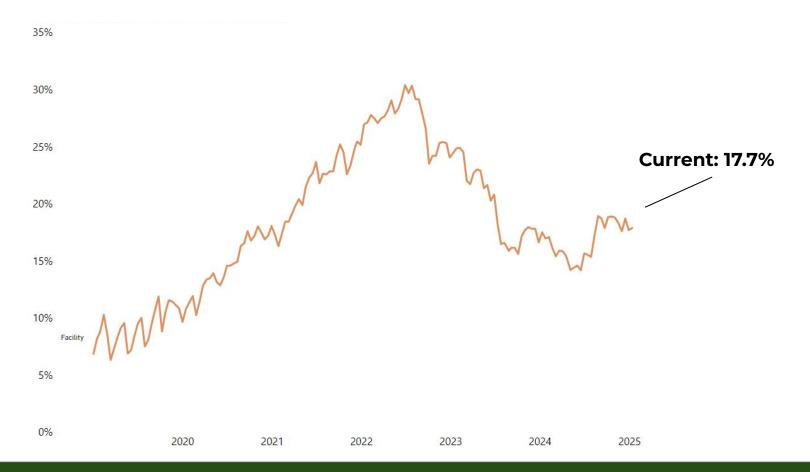
Health Trends

- **~1,000** individuals w/ diagnosed chronic illness
 - **88%** of the average daily incarcerated population
 - **47% increase** from 2015 to 2022
- Total ED visits by incarcerated individuals in 2024: 650





DOC Facility Staff Vacancies: January 2019 to January 2025



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