

# Department of Corrections



**Presentation for  
House Appropriation Committee  
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# Offender Medical Care



# July 2016 Legislative Reports

- The 2015 Budget Bill HB1400 directed the VADOC to issue a request for information and provide a report to the Secretary of Public Safety and Homeland Security, the Director of the Departments of Planning and Budget, and the Chairmen of the House Appropriations and Senate Finance Committees:
  - Item 384 - Issue a request for information to identify innovative cost-saving inmate health care models and to provide a report estimating long-term savings from the approaches identified by 10/1/2015.
  - DOC completed and submitted this information as directed.



# July 2016 Legislative Reports

- HB1400 also directed the VADOC to provide the following report to the Secretary of Public Safety and Homeland Security, the Directors of the Departments of Planning and Budget and Human Resources Management, and the Chairmen of the House Appropriations and Senate Finance Committees:
  - Item 384 - Provide a report assessing the costs, benefits, and administrative actions required to eliminate the Department's reliance on a private contractor for the delivery of inmate health care at multiple facilities, and to provide the same services internally using either state employees or individual contract medical personnel by 7/1/2016.



# July 2016 Legislative Reports

- The VADOC is currently working with the Department of Health Administration at Virginia Commonwealth University to prepare a comprehensive review of the options available.
- The VADOC is prudently waiting for the final report prior to implementing any changes to the provision of healthcare services to the offenders.



# Comprehensive Healthcare Contracts

- In November 2015, the VADOC entered into a contract with Armor Correctional Health Services and Mediko, P.C. to provide healthcare services at seventeen facilities:
  - Augusta Correctional Center (*Mediko*)
  - Coffeewood Correctional Center (*Mediko*)
  - Deerfield Correctional Center (*Armor*)
  - Deerfield Men’s Work Center (*Armor*)
  - Deerfield Women’s Work Center (*Armor*)
  - Brunswick Women’s Pre-Release Center (*Armor*)
  - Southampton Men’s Detention Center (*Armor*)
  - Fluvanna Correctional Center for Women (*Armor*)
  - Greensville Correctional Center (*Armor*)
  - Greensville Work Center (*Armor*)
  - Indian Creek Correctional Center (*Armor*)
  - Lunenburg Correctional Center (*Armor*)
  - Powhatan Reception & Classification Center (*Armor*)
  - St. Brides Correctional Center (*Armor*)
  - Sussex I State Prison (*Armor*)
  - Sussex II State Prison (*Armor*)



# Comprehensive Healthcare Contracts

- Healthcare contracts provide for all staffing, on site care, pharmaceuticals, and offsite outpatient care.
- Contract term is three years (with five one-year extensions allowed). Current pricing locked until November 2018.
- Current pricing is approximately \$81.5M annually.



# Fluvanna Correctional Center for Women

- Currently under court ordered medical monitoring due to litigation.
- Lawsuits increase staffing and specialist expenses.



# Hepatitis C Treatment Program

- Managed by VCU Hepatology Department since July 2015
- Enables the VADOC to pay 340b pricing for medications at a savings of approximately 40%
- As of December 2015:
  - 178 offenders have been approved by the VADOC for referral to the clinic
  - 98 offenders have been seen in the clinic
  - 89 offenders have been started on treatment
  - 66 offenders completed treatment



# Hepatitis C Treatment Program

- Medical treatment regimen will vary by patient; average cost approximately \$57,178.
- Total cost of medication for Hepatitis C treatment as of December 2015: \$4,178,180.
- The American Society for the Study of Liver Disease reports a cure rate of 89%.



# Offender Reentry

# NICs Eight Guiding Principles for Effective Interventions to Reduce Recidivism





# Why EBP?

1. Reduces crime;
2. Cost-effective;
3. Avoids future victimizations;
4. Reduces prison populations & costs;
5. Reduces social, economic, & family costs;
6. Frees prison beds for more serious offenders;  
and
7. Allows states to re-focus spending on other priorities.



# Culpeper Correctional Center for Women

- Statewide Female Out-of-Compliance was 476 as of January 19<sup>th</sup>, 2016.
- Governor's Introduced Budget Provides funding and FTE to open and operate the facility:
  - \$17M in FY2017 and \$22.3M in FY2018 along with 255 FTE for holding higher security female offenders.
  - Supports 5 housing units with the capacity for approximately 500 female offenders.
  - Scheduled opening date is the first week of January 2017.



# Funding to Enhance Prison Security

## Governor's Introduced Budget Provides:

- Funding to Enhance Prison Security:
  - \$2M in FY2017 and FY2018.
  - Funds will offset a portion of DOC's annual budget shortfall (approximately \$32M) which must generally be made up by holding security positions vacant.
  - \$32M annual shortfall is primarily composed of funding deficits in information technology, utilities, gasoline, probation and parole office leases and insurances.
  - \$2M employs 36 correctional officers on the front line.



# Funding for Offender Legal Materials

## Governor's Introduced Budget Provides:

- Use of General Funds to provide legal materials to offenders as mandated by the courts:
  - \$95K in FY2017 and FY2018.
  - Previously, this expense was supported by revenue generated from the offender commissary fund which must meet multiple inmate welfare requirements.



# Funding for Pilot Jail Reentry Program

## Governor's Introduced Budget Provides:

- \$1.6M and 19 FTE in FY2017 and FY2018.
- Establishes six Pilot Reentry Programs for State-responsible offenders being released from jail.
- Proposed local and regional jail sites:
  - Chesapeake City Jail (Chesapeake)
  - Danville City Jail (Danville)
  - Richmond Criminal Justice Center (Richmond)
  - Riverside Regional Jail (Prince George)
  - Southwestern Virginia Regional Jail (Abingdon)
  - Western Virginia Regional Jail (Salem)
- DOC will operate the programs at the pilot sites.
- Technical assistance, fidelity reviews, training and on-going evaluations will be provided by DOC.



# Funding for Pilot Jail Reentry Program

- Approximately 5,600 state responsible offenders serve their entire sentence in local/regional jails.
  - Shorter sentences, non-violent
  - Recidivism rates higher; impact on local communities
  - Reenter in less than 12 – 18 months



# Funding for Pilot Jail Reentry Program

- Senator David Marsden formed a working group to address the challenge of locally incarcerated offenders and the need to reduce the recidivism rate of this growing population.
- Workgroup comprised of stakeholders (finance staff, DOC, Comp Board, Attorney General's jail reentry coordinator).
  - Visited jails
  - Surveyed all local/regional jails



# Funding for Pilot Jail Reentry Program

- Findings:
  - SR offenders housed locally are underserved with reentry programming
  - Barriers to service delivery; large gaps
  - Many services are not evidence based or coordinated
  - Not coordinated with post release State probation
  - Many jails positive about providing services but lack resources and expertise in evidence based practices



# Mental Health Services and Cognitive Programing

## Governor's Introduced Budget Provides:

- Funding for Mental Health Services and Cognitive Programming at Community Corrections District Offices:
  - \$2.2M in FY2017 and FY2018.
  - Provides funding for 20 new Mental Health Specialists at targeted District Office.
  - Provides for contracted telepsychiatry at Probation and Parole Districts in instances where a licensed psychiatrist is needed for crisis situations.



# Mental Health Services and Cognitive Programing

Governor's Introduced Budget Provides:

- Resources provide contract with private vendor to support Peer-Specialist Pilot Programs in three of the largest Probation and Parole Districts for offenders with mental disorders.
  - Norfolk
  - Richmond
  - Roanoke



# Mental Health Services and Cognitive Programing

Governor's Introduced Budget Provides:

- Resources for 1 new Cognitive Counselor at each of 6 Evidence Based Decision Making Pilot Project sites to address reentry services for offenders placed on state probation in local communities from jails and directly from courts.
  - Norfolk
  - Richmond
  - Petersburg
  - Chesterfield
  - Staunton-Augusta-Waynesboro
  - Prince William-Manassas, Manassas Park



# Offenders with Mental Health Issues

- Recidivate at a higher rate and more quickly than those without.
  - 25% of DOC recidivists had a known mental health problem.
  - 28.1% of those with mental health issues were re-incarcerated within 3 years compared with 21.4% of those without mental health problems.
- Significantly more costly to incarcerate (\$27,000) than provide treatment.
- Existing community resources not available to DOC offenders in many locations.
- If DOC can only prevent 58 mental health offenders from recidivating each year it will completely offset the funding requirement.



# Offenders with Mental Health Issues

- Research shows that anti-social personality and criminal thinking are primary drivers of criminality.
- Evidence shows cognitive behavioral programs are effective at addressing this deficit.
- If the DOC can successfully prevent 14 fewer offenders from recidivating each year due to treatment, these services will break even with the funding requirements.



# Closing Remarks

- DOC continues to use available resources to effectively provide comprehensive offender healthcare through the use of both privatized services and its own operations.
- Offender reentry and the utilization of evidenced based practices to reduce recidivism must continue to be a major focus for the Department to ensure Public Safety throughout the Commonwealth.