

**Department of Correction  
Objective Point Base Classification Report to the  
Joint Committee on Public Safety and  
House and Senate Committees on Ways and Means  
Pursuant To DOC Budget Line Item FY22 8900-0001**

Pursuant to the Massachusetts Department of Correction (DOC) line item 8900-0001 of the Fiscal Year 2021 General Appropriations Act, this report overviews the Objective Point Base (“OPB”) Classification system for all inmates incarcerated in state prison facilities.

The OPB is the standardized custody level assignment of an inmate based on objectively defined criteria. The criteria are weighed, scored and organized into a valid and reliable classification instrument accompanied by an operational manual for applying the instrument to inmates in a systematic manner. OPB classification systems rely on factors that have been proven to predict prison adjustment and address issues of overclassification and underclassification.

The development of the DOC’s OPB Classification system began in 2002 with our request for technical assistance from the National Institute of Corrections. The system was introduced in 2006 and became fully operational at all facilities in 2008. Since this time, the tool has been modified which has increased the number of inmates eligible for placement in lower security without compromising the safety and security of staff, inmates and the public. Prior to any modification, research data was analyzed and indicated that DOC’s inmate profiles were virtually the same. According to the US Department of Justice, NIC Series, *A Guide for Correctional Agencies, Objective Prison Classification*, revalidation of a prison classification system shall occur every three (3) to five (5) years. In 2013, DOC began a revalidation of the OPB classification tool to ensure its validity. Based on that review, several changes to the OPB form were implemented in 2014. Those changes included lowering the threshold score for males and females, as well as adjusting several variables to higher thresholds, all of which resulted in more inmates obtaining classification for minimum custody.

In keeping with the recommended time frames the MA DOC, in 2018, initiated a second revalidation. The review was completed in May 2019 and all proposed changes were approved in September 2019. Approved changes were implemented on November 18, 2019 and included adjusting several variables/restrictions and adding a fourth age category for male offenders, all of which resulted in more inmates becoming eligible for placement in a lower security.

Custody Level Breakdown for MA DOC Inmates  
as of December 1, 2020

Maximum Security	12%
Medium Security	76%
Minimum Security or Below	12%

The current waitlists are higher than usual due to COVID-19 restrictions that have impacted inter-facility transfers. As of December 1, 2020, the waitlists are as follow: 12 inmates waiting for a maximum security bed; 82 inmates waiting for a medium security bed; 52 inmates waiting for a minimum security bed; and 1 inmate waiting for a pre-release security bed. The total number of inmates waiting to transfer as of December 1, 2020 was 147.

A necessary feature of an OPB Classification System is the use of overrides which allows staff to depart from the scored custody level when appropriate. A restriction is when a Department of Correction (“DOC”) policy prevents an inmate from placement in lower custody, regardless

of their total score (e.g., inmates whose immigration status is pending or those with an immigration detainer or deportation order are not to be considered for minimum or below). Classification staff has no authority to disregard these restrictions. An override is applied when a scored custody level is changed based on the professional judgment of trained classification staff. The use of overrides should be between 5% and 15% of the classified population.

Override Rates for DOC inmates as of December 1, 2020 are:

Higher Security	6%
Lower Security	6%
Total	12%

<sup>1</sup> Source: *Classification of High Risk and Special Management Prisoners: A National Assessment of Current Practices* (Austin and McGinnis, 2004).