MASSACHUSETTS DEPARTMENT OF CORRECTION

BIANNUAL REPORT ON CLOSE CUSTODY UNIT

1st Biannual 2019



Carol A. Mici, Commissioner

Use of Restrictive Housing Report January 1, 2019 to June 30, 2019 to the Joint Committee on the Judiciary, Public Safety, Homeland Security and the House and Senate Committees on Ways and Means

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Methodology

The Close Custody Unit (CCU) is a form of Restrictive Housing (RH) for female inmates located inside MCI Framingham. RH in the MADOC is a status in which an inmate can move between units in the facility and remain on the same RH status. An RH status ends when the inmate is released to general population or to a specialty unit that no longer confines one to a cell for more than 22 hours per day. An inmate may have one or more than one RH statuses during a reporting time frame.

The data used for this report comes from the MADOC's Inmate Management System (IMS), and the MADOC Health Services Division (ERMA).

The data represents 327 RH statuses based on 232 female inmates with one or more discharge date(s) from a RH placement within the reporting time frame from January 1, 2019 to June 30, 2019. The following data tables describe this cohort.

Length of Stay in Restrictive Housing¹

Average length of stay = 10 days Median length of stay = 10 days

Table 1

Length of Stay	CCU Count	Percent
30 Days or Less	323	99%
31-60 Days	4	1%
60+ Days	0	0%
Total	327	100%

Length of Stay in Restrictive Housing of Inmates with Open Mental Health²

Average length of stay = 10 days Median length of stay = 11 days

Table 2

Length of Stay	CCU Count	Percent
30 Days or Less	258	98%
31-60 Days	4	2%
60+ Days	0	0%
Total	262	100%

¹ Data is based on 232 inmates with one or more discharge date(s) within the reporting time frame. Inmates who remained active during the reporting time frame and inmates who have a discharge date after the reporting time frame were excluded from this report as these inmates will be reported on in subsequent reports. The length of stay is tracked in days; Inmates with less than a full day length of stay were counted as one day.

² Data is based on inmates with Open Mental Health (OMH) released from RH within the reporting time frame. An OMH inmate is diagnosed with a mental illness or determined to be in need of mental health intervention on an ongoing basis. See Appendix II for a full definition. There were 185 OMH inmates who were discharged from RH during the reporting time frame based on their most recent mental health screening. This field signifies whether or not the inmate was on the institution's OMH caseload prior to entering this status or at any time during their status. Any inmate carrying the Gender Dysphoria (GD) diagnosis will remain an open mental health case. Inmates with Serious Mental Illness are included in the count for OMH for the purposes of this report. See Appendix II for a full definition of Serious Mental Illness.

Length of Stay in Restrictive Housing of Inmates 21 Years of Age or Younger³

Average length of stay = 10 days Median length of stay = 11 days

Length of Stay	CCU Count	Percent		
30 Days or Less	19	100%		
31-60 Days	0	0%		
60+ Days	0	0%		
Total	19	100%		

Criminally Sentenced Releases to the Community within 30 Days of Restrictive Housing Discharge Date⁴

Table 4

Release Breakdown	Count
Released to Community within	21
30 Days	

One Year Recidivism Rate of Inmates who were placed in Restrictive Housing 5

A recidivist is defined as any criminally sentenced inmate released to the community, via expiration of sentence or parole, from the MA DOC during 2017 who was re-incarcerated for a new sentence or violation of parole or probation to a Massachusetts state, county, or federal facility within one year of release.

2017 Female Releases to the Community

One year recidivism rates for inmates who were placed in RH from CY15 to CY17.

Table 5

Restrictive Housing Status	Count	Recidivist	Percent
Inmates with RH Status	178	25	14%
Inmates without RH Status	278	45	16%
Total	456	70	15%

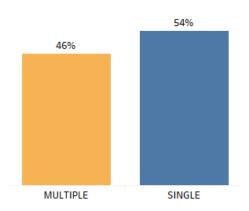
³ Data is based on inmates aged 21 years or younger on their date of discharge from RH within the reporting time frame. There were 12 inmates who were 21 years of age or younger when discharged from RH during the reporting time frame.

⁴ Data is based on criminally sentenced inmates who were discharged from RH and released to the community within 30 days of their RH discharge date. See Appendix II for a full definition.

⁵ Data is based on criminally sentenced inmates who were placed in RH between CY15 to CY17 and then released to the community in 2017.

Restrictive Housing Admissions

Data is based on inmates who had one or more admission date(s) within the reporting time frame regardless of their release date. The admission counts are based on 234 inmates. These counts include inmates with a single admission as well as inmates with multiple admissions, who were admitted and discharged during the reporting time frame and then re-admitted during the reporting period.



Single Versus Multiple Admissions

Admission Types CCU Count Percent

Multiple Admissions 154 46%

Single Admissions 178 54%

Total Admissions 332 100%

Appendix I: Open Mental Health Delineated by Diagnosis⁶

Diagnosis Code	Diagnosis	Count of Diagnoses
F43.21	Adjustment disorder with depressed mood (Chronic)	1
F43.23	Adjustment disorder with mixed anxiety and depressed mood (Chronic)	3
F43.20.1	Adjustment disorder, Unspecified (Acute)	2
F43.20	Adjustment disorder, unspecified (Chronic)	3
F43.22.1	Adjustment disorder, With anxiety (Acute)	4
F43.23.1	Adjustment disorder, With mixed anxiety and depressed mood (Acute)	6
F40.00.1	Agoraphobia (Acute)	1
F10.10	Alcohol abuse, uncomplicated (Chronic)	1
F10.230	Alcohol dependence with withdrawal, uncomplicated (Chronic)	2
F10.21	Alcohol dependence, in remission (Chronic)	1
F10.20	Alcohol dependence, uncomplicated (Chronic)	20
F10.10.1	Alcohol use disorder, Mild (Acute)	7
F10.20.1	Alcohol use disorder, Moderate (Acute)	14
F10.20.2	Alcohol use disorder, Severe (Acute)	22
F15.10.1	Amphetamine-type substance use disorder, Mild (Acute)	1
F15.20.1	Amphetamine-type substance use disorder, Moderate (Acute)	1
F15.20.2	Amphetamine-type substance use disorder, Severe (Acute)	1
F41.9	Anxiety disorder, unspecified (Chronic)	4
F90.2	Attention-deficit hyperactivity disorder, combined type (Chronic)	3
F90.8	Attention-deficit hyperactivity disorder, other type (Chronic)	1
F90.9	Attention-deficit hyperactivity disorder, unspecified type (Chronic)	4
F90.2.1	Attention-deficit/hyperactivity disorder, Combined presentation (Acute)	1
F90.1.1	Attention-deficit/hyperactivity disorder, Predominantly hyperactive/impulsive presentation (Acute)	10
F90.0.1	Attention-deficit/hyperactivity disorder, Predominantly inattentive presentation (Acute)	2
F90.0	Attn-defct hyperactivity disorder, predom inattentive type (Chronic)	3
F31.32	Bipolar disorder, current episode depressed, moderate (Chronic)	2
F31.9	Bipolar disorder, unspecified (Chronic)	8
F31.75.1	Bipolar I disorder, Current or most recent episode depressed, In partial remission (Acute)	1
F31.32.1	Bipolar I disorder, Current or most recent episode depressed, Moderate (Acute)	1
F31.12.1	Bipolar I disorder, Current or most recent episode manic, Moderate (Acute)	1
F31.2.1	Bipolar I disorder, Current or most recent episode manic, With psychotic features (Acute)	6
F31.81	Bipolar II disorder (Chronic)	4
F60.3.1	Borderline personality disorder (Acute)	2
F23	Brief psychotic disorder (Acute)	1

⁶ Inmate commitment numbers were utilized to calculate the diagnoses counts and a commitment number may be counted in one or more diagnoses.

F12.21	Cannabis dependence, in remission (Chronic)	2
F12.20.1	Cannabis use disorder, Moderate (Acute)	1
F12.20.2	Cannabis use disorder, Neuerate (Acute)	2
F12.90	Cannabis use, unspecified, uncomplicated (Acute)	6
F14.10	Cocaine abuse, uncomplicated (Chronic)	10
F14.20	Cocaine dependence, uncomplicated (Chronic)	9
F14.10.1	Cocaine use disorder, Mild (Acute)	2
F14.20.1	Cocaine use disorder, Moderate (Acute)	11
F14.20.2	Cocaine use disorder, Severe (Acute)	19
F64.1.1	Gender dysphoria in adolescents and adults (Acute)	6
F64.1	Gender identity disorder in adolescence and adulthood (Chronic)	3
F41.1.1	Generalized anxiety disorder (Acute)	6
F41.1	Generalized anxiety disorder (Chronic)	7
F16.21	Hallucinogen dependence, in remission (Chronic)	2
F63.2.1	Kleptomania (Acute)	1
F33.1.1	Major depressive disorder, Recurrent episode, Moderate (Acute)	7
F33.2.1	Major depressive disorder, Recurrent episode, Severe (Acute)	3
F32.2.1	Major depressive disorder, Single episode, Severe (Acute)	3
F32.9.1	Major depressive disorder, Single episode, Unspecified (Acute)	1
F33.3	Major depressy disorder, recurrent, severe w psych symptoms (Chronic)	1
F11.10	Opioid abuse, uncomplicated (Chronic)	4
F11.220	Opioid dependence with intoxication, uncomplicated (Chronic)	5
F11.23	Opioid dependence with withdrawal (Chronic)	1
F11.20	Opioid dependence, uncomplicated (Chronic)	29
F11.10.1	Opioid use disorder, Mild (Acute)	4
F11.20.1	Opioid use disorder, Moderate (Acute)	22
F11.20.2	Opioid use disorder, Severe (Acute)	33
F19.20.1	Other (or unknown) substance use disorder, Moderate (Acute)	1
F15.20.4	Other or unspecified stimulant use disorder, Severe (Acute)	1
F33.8	Other recurrent depressive disorders (Chronic)	5
F41.8.1	Other specified anxiety disorder (Acute)	7
F41.8	Other specified anxiety disorders (Chronic)	5
F32.8.1	Other specified depressive disorder (Acute)	6
F28.1	Other specified schizophrenia spectrum and other psychotic disorder (Acute)	4
F43.8.1	Other specified trauma- and stressor-related disorder (Acute)	3
F15.20	Other stimulant dependence, uncomplicated (Chronic)	1
F41.0.1	Panic disorder (Acute)	1
F41.0	Panic disorder without agoraphobia (Chronic)	2
F34.1.1	Persistent depressive disorder (dysthymia) (Acute)	1
F43.10.1	Posttraumatic stress disorder (Acute)	84
F43.11	Post-traumatic stress disorder, acute (Chronic)	1
F43.12	Post-traumatic stress disorder, chronic (Chronic)	2
F43.10	Post-traumatic stress disorder, unspecified (Chronic)	46
F25.0	Schizoaffective disorder, bipolar type (Chronic)	2

F25.9	Schizoaffective disorder, unspecified (Chronic)	1
F20.9.1	Schizophrenia (Acute)	3
F20.9	Schizophrenia, unspecified (Chronic)	3
F21.1	Schizotypal personality disorder (Acute)	3
F13.10	Sedative, hypnotic or anxiolytic abuse, uncomplicated (Chronic)	2
F13.20	Sedative, hypnotic or anxiolytic dependence, uncomplicated (Chronic)	6
F13.229.1	Sedative, hypnotic, or anxiolytic intoxication, With moderate or severe use disorder (Acute)	1
F13.10.1	Sedative, hypnotic, or anxiolytic use disorder, Mild (Acute)	4
F13.20.1	Sedative, hypnotic, or anxiolytic use disorder, Moderate (Acute)	4
F13.20.2	Sedative, hypnotic, or anxiolytic use disorder, Severe (Acute)	3
F13.90	Sedative, hypnotic, or anxiolytic use, unsp, uncomplicated (Acute)	5
F17.200.2	Tobacco use disorder, Severe (Acute)	2
F41.9.1	Unspecified anxiety disorder (Acute)	20
F90.9.1	Unspecified attention-deficit/hyperactivity disorder (Acute)	1
F31.9.5	Unspecified bipolar and related disorder (Acute)	12
F32.9.2	Unspecified depressive disorder (Acute)	29
F91.9.2	Unspecified disruptive, impulse-control, and conduct disorder (Acute)	5
F11.99.1	Unspecified opioid-related disorder (Acute)	1
F60.9.1	Unspecified personality disorder (Acute)	5
F29.1	Unspecified schizophrenia spectrum and other psychotic disorder (Acute)	6
F43.9.1	Unspecified trauma- and stressor-related disorder (Acute)	3
	Total	635

Appendix II. Definitions and Acronyms

Acronym	Term	Definition
ERMA	Electronic record management application	
IMS	Inmate Management System	(103 CMR 430.05) The Department's automated information system that provides processing, storage and retrieval of inmaterelated information needed by Department personnel and other authorized users within
		the criminal justice system.
MCI	Massachusetts Correctional Institution	
ОМН	Open Mental Health (OMH)	An inmate who is diagnosed with a mental illness or determined to be in need of mental health intervention on an ongoing basis. At any time during his or her incarceration, an inmate may become an open mental health case (OMH) based on a mental health crisis, including suicidal threats or self-injurious behavior and/or the display of signs and/or symptoms of mental illness or emotional distress. Based upon clinical indications and within the discretion of the Primary Care Clinician (PCC), in consultation with the site Psychiatrist (if on medication) and/or Site Mental Health Director, an inmate may also be removed from the active mental health caseload. However, any inmate carrying the Gender Dysphoria (GD) diagnosis will remain an
	Release to Community	open mental health case. The release of an inmate from the jurisdiction of the Massachusetts DOC by parole or by discharge to the community. Conditions warranting a release to the community generally include: court release (see Crime Lab), expiration of fine, payment of fine, parole and expiration of sentence.
RH	Restrictive Housing	(103 CMR 423.06) A placement that requires an inmate to be confined to a cell for at least 22 hours per day for the safe and secure operation of the facility. For purposes of this report, Restrictive Housing shall not include the following: any placement in a DDU as the result of a sanction imposed in accordance with 103 CMR 430.00: Inmate Discipline; any placement of an inmate on disciplinary detention as the result of a sanction imposed in accordance with 103 CMR 430.00; any placement ordered by a medical or mental health provider including, but not limited to, the placement of an inmate in a Health Services Unit; the placement of an inmate in a hospital; the placement of an inmate in a medical setting where treatment is being provided; or the placement of an inmate on a mental health watch.
RH Status	Restrictive Housing Status	An inmate is on Restrictive Housing Status while in restrictive housing and until the inmate is released to general population or to a specialty unit that no longer confines one to a cell for more than 22 hours per day.

		An inmate may move to different restrictive	
		housing units within or between facilities	
CDAL	Contrary Manufactulling and	during a single restrictive housing status.	
SMI	Serious Mental Illness	(M.G.L. c.127, §1) A current or recent	
		diagnosis by a qualified mental health	
		professional of one or more of the following	
		disorders described in the 5 th edition of the	
		Diagnostic and Statistical Manual of Mental	
		Disorders:	
		(a) schizophrenia and other psychotic	
		disorders;	
		(b) major depressive disorders;	
		(c) all types of bipolar disorders;	
		(d) a neurodevelopmental disorder,	
		dementia or other cognitive disorder;	
		(e) any disorder commonly characterized	
		by breaks with reality or perceptions of	
		reality;	
		(f) all types of anxiety disorders;	
		(g) trauma and stressor related disorders;	
		or	
		(h) severe personality disorders; or a	
		finding by a qualified mental health	
		professional that the inmate is at serious risk	
		of substantially deteriorating mentally or	
		emotionally while confined in restrictive	
		housing, or already has so deteriorated	
		while confined in restrictive housing, such	
		that diversion or removal is deemed to be	
		clinically appropriate by a qualified mental	
		health professional.	