U.S. Department of Justice FY 2016 PERFORMANCE BUDGET Congressional Submission

Federal Prison System

Salaries and Expenses



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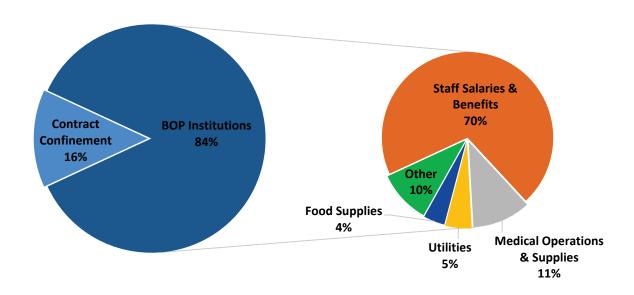
I. Overview for the Bureau of Prisons (BOP), Salaries and Expenses (S&E) Appropriation

A. Introduction

The FY 2016 Congressional budget request for the BOP S&E Appropriation totals \$7,204,158,000, with 37,927 FTEs, and 43,280 positions (20,921 Correctional Officers) to support Department of Justice (DOJ) Strategic Goal 3: Ensure and Support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Electronic copies of the Department of Justice's Congressional Budget Justifications and Capital Asset Plan and Business Case exhibits can be viewed or downloaded from the Internet using the Internet address: http://www.justice.gov/02organizations/bpp.htm.

The FY 2016 current services level funds the mandatory requirements necessary in FY 2016. It funds increases in pay and benefits and also addresses the uncontrollable increases in medical and food costs. The current services budget also provides funding for operation of the AUSP Thomson Facility. The activation of AUSP Thomson will provide much needed high security beds. The BOP's High Security Institutions are currently 52 percent over capacity, with the activation of AUSP Thompson this high security crowding will be reduced to 31 percent by the end of FY 2016.

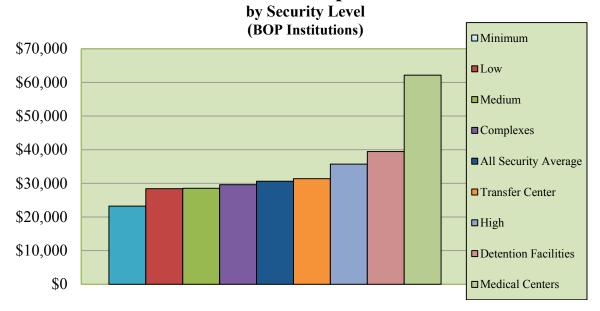
BOP Funding Allocations



These base requirements must be fully funded to cover actual costs of existing staff and operations, as noted in the FY 2014 Senate Report (S.R. 113-78), which stated that "While these activities are not considered mandatory for budget purposes, they are not truly discretionary in that the Committee has an obligation to adequately fund them regardless of budgetary constraints."

The FY 2016 budget proposes investments in additional staffing and inmate programs to address Second Chance Act requirements and programs that have proven to reduce recidivism. BOP's budget proposal emphasizes efficiency, effectiveness, and quality while focusing on meeting the changing needs of the American Justice System. The budget request represents the level of funding needed to fulfill its mission. Operating the nation's largest prison system, the BOP's top priority is to focus on safety and security of staff, inmates and surrounding communities.

FY 2014 Per Capita Costs



<u>About the BOP</u>: The BOP was established in 1930 to provide more progressive and humane care for federal inmates, to professionalize the prison service, and to ensure consistent and centralize administration of the 11 federal prisons in operation at that time. Today, the BOP includes 121 institutions, six regional offices, a Central Office, and community corrections offices that oversee residential reentry centers and home confinement programs. The Central Office and regional offices provide administrative oversight and support to the institutions and community corrections offices.



The BOP is responsible for the custody and care of more than 210,000 federal offenders. Approximately 80 percent of these inmates are confined in BOP operated correctional institutions or detention centers. The remainder is confined in secure privately managed or community-based facilities and local jails.

The BOP operates federal prisons at four security levels – minimum, low, medium, and high. In addition, there are administrative facilities which have special missions, such as the detention of pretrial offenders (the BOP operates a number of metropolitan detention centers and jail units); the treatment of inmates with serious or chronic medical problems; or the containment of extremely dangerous, violent, or escape-prone inmates. Further, the BOP confines all District of Columbia adult sentenced felons.

The BOP also utilizes privately operated facilities, bed space secured through Intergovernmental Agreements with state and local entities, and community based housing such as Residential Reentry Centers (RRCs or halfway houses) and home confinement, as appropriate. Also, through the National Institute of Corrections (NIC), the BOP provides assistance to federal, state, local, and international correctional agencies.

The BOP protects public safety by ensuring federal offenders serve their sentence of imprisonment in institutions that are safe, humane, cost-efficient, and appropriately secure. The BOP also helps reduce future criminal activity by encouraging inmates to participate in a range of programs that have been proven to help them adopt a crime-free lifestyle upon their return to the community.

The BOP's most important resource is its staff. The more than 39,000 employees of the BOP ensure the security of federal prisons, provide inmates with needed programs and services, and model mainstream values. The BOP's employees help the agency meet its obligation to protect public safety and provide security and safety to the staff and inmates in its facilities. All BOP staff in its facilities are correctional workers first and are committed to the highest level of performance.

BOP Fundamentals:

MISSION: The Federal Bureau of Prisons protects society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, and appropriately secure, and that provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.

CORE VALUES: Correctional Excellence: We are Correctional workers first, committed to the highest level of performance. Respect: We embrace diversity and recognize the value and dignity of staff, inmates, and the general public. Integrity: We demonstrate uncompromising ethical conduct in all our actions.



VISION STATEMENT: The Federal Bureau of Prisons, judged by any standard, is widely and consistently regarded as a model of outstanding public administration, and as the best value provider of efficient, safe, and humane correctional services and programs in America.

B. Growth of the Federal Inmate Population

Most of the challenges affecting the BOP today relate to the agency's growth. As time has passed and laws have changed, the BOP's responsibilities have grown, as has the prison population. At the end of 1930 (the year BOP was created), the agency operated 14 facilities for just over 13,000 inmates. By 1940, the BOP had grown to 24 facilities with 24,360 inmates. Except for a few fluctuations, the number of inmates did not change significantly between 1940 and 1980, when the population was 24,640. However, during this same time period, the number of facilities almost doubled (from 24 to 41) as the BOP gradually moved from operating large facilities confining inmates of many security levels to operating smaller facilities that each confined inmates with similar security needs.

As a result of federal law enforcement efforts and new legislation that dramatically altered sentencing in the federal criminal justice system, the BOP inmate population increased more than 750% between 1980 and 2014, rising from 24,640 to 214,149. The Sentencing Reform Act of 1984 established determinate sentencing, abolished parole, and reduced good conduct time; additionally, several mandatory minimum sentencing provisions were enacted in 1986, 1988, and 1990. From 1980 to 1989, the inmate population more than doubled, from just over 24,000 to almost 58,000. During the 1990s, the population more than doubled again, reaching approximately 134,000 at the end of 1999 as efforts to combat illegal drugs, weapons, and illegal immigration contributed to significantly increased conviction rates. From 2000 to the present, the population continued to increase reaching our current population of 210,624, as of January 08, 2015.

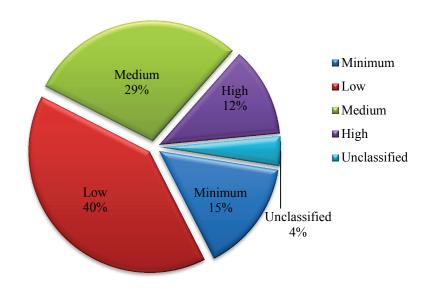
In some years the population increased by more than 11,000 inmates, the equivalent of at least 7 prisons. However, in 2014, the population fell by 5,149 and current population projections based on USSC data estimate that the inmate population may further drop by 14,987 between FY 2015 and FY 2016.

Projected Population,	Capacity, and	Crowding
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	2012 (Actual)	2013 (Actual)	2014 (Actual)	2015	2016
BOP Facilities					
Starting Capacity	127,795	128,359	129,726	132,803	133,928
Additional Approved/Planned	564	1,367	3,077	1,125	1,780
Subtotal Capacity	128,359	129,726	132,803	133,928	135,708
Pop. Projection	177,556	176,849	172,242	166,612	155,520
Percent Overcrowded	38%	36%	30%	24%	15%
Contract	41,131	42,449	41,907	42,437	43,642
Percent Contract	18.8%	19.4%	19.6%	20.8%	21.9%
Total Federal Prison Population	218,687	219,298	214,149	209,049	199,162

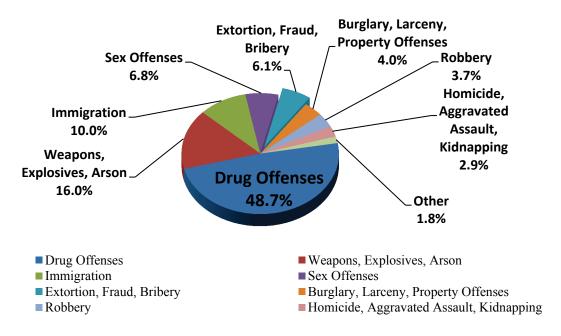
Note: The population projections are based on data and information from a variety of sources including the Administrative Office of the U.S. Courts, the U.S. Sentencing Commission, other DOJ components, and the BOP's own information system (SENTRY). The additional capacity projections shown above rely on enactment of funding for prison renovations, and prison activations. Projections beyond FY 2016 cannot be estimated at this time.

The following chart shows the breakdown of current BOP population by inmate's security level:



The following chart shows the breakdown of current BOP population by inmate's offense category:

Inmate Offenses



Last year's reduction in the inmate population decreased crowding in BOP's prisons to 30%, the lowest it has been since 1998. While current projections estimate overcrowding may fall to 15% in 2016, crowding remains a concern at medium and high security institutions which are currently operating at 39% and 52% above rated capacity, respectively.

Reductions in the population also help address a second critical concern for BOP: the number of staff available to supervise and provide evidence-based programs and services to inmates. As the population goes down, the ratio of inmates to staff members also goes down, thereby increasing the safety of staff, inmates, and the general public.

The size of the federal prison population and its related cost is a function of many factors, including the nation's crime levels, federal sentencing laws, and law enforcement policies, many of which are beyond the control of BOP. However, significant savings can be achieved by reducing sentence lengths and the number of people sentenced to prison. Recent changes by the United States Sentencing Commission and the Department of Justice are described below have the potential to impact both.

In August, 2013, the Attorney General announced the Department of Justice's (DOJ) "Smart on Crime" initiative. This initiative, based on a comprehensive review of the criminal justice system identified five goals:

- To ensure finite resources are devoted to the most important law enforcement priorities;
- To promote fairer enforcement of the laws and alleviate disparate impacts of the criminal justice system;
- To ensure just punishment for low-level, nonviolent convictions;
- To bolster prevention and reentry efforts to deter crime and reduce recidivism;
- To strengthen protections for vulnerable populations.

Recently, the United States Sentencing Commission (USSC) voted unanimously to apply a reduction in the sentencing guideline levels applicable to most federal drug trafficking offenders retroactively, meaning that many offenders currently in prison could be eligible for reduced sentences beginning November 2015. The Commission voted unanimously in April to amend the guidelines to lower the base offense levels in the Drug Quantity Table across drug types, which may mean lower sentences for most drug offenders going forward. In July, the Commission decided that judges could extend that reduction to offenders currently in prison, but with a requirement that reduced sentences cannot take effect until November 1, 2015. Under the guidelines, no offender would be released unless a judge reviews the case to determine whether a reduced sentence poses a risk to public safety and is otherwise appropriate. This measured approach reduces prison populations and responds to statutory and guideline changes while safeguarding public safety.

C. Inmate Programs

The BOP has a responsibility to provide inmates with opportunities to participate in programs that can provide them with the skills they need to lead crime-free lives after release. The BOP's philosophy is that release preparation begins the first day of imprisonment. Accordingly, federal prisons offer a variety of inmate programs to address reentry needs, including work, education, vocational training, substance abuse treatment, observance of faith and religion, psychological services and counseling, release preparation, and other programs that impart essential life skills. The BOP also provides other structured activities designed to teach inmates productive ways to use their time.



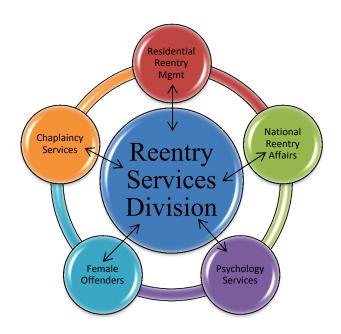
Daddy-Daughter Dance for offenders Federal Detention Center Miami. Florida.

Each year, over 45,000 federal inmates return to our communities. Most need job skills, vocational training, education, counseling, and other assistance such as treatment for substance use disorders, anger management, parenting skills, and linkage to community resources for continuity of care if they are to successfully reenter society.

Recently there have been several important developments in the field of reentry. In light of recent research findings and public sentiment, many members of Congress as well as external stakeholders (advocacy groups, judges, state and local governments and more) who would like to see the BOP adjust its reentry strategy.

The BOP has responded by creating a Reentry Services Division (RSD), which will further the BOP's mission of preparing inmates for reentry by focusing on reentry programming and community resource transition, thereby increasing public safety. The RSD is comprised of five branches that were previously part of the Correctional Programs Division: National Reentry Affairs, Chaplaincy Services, Residential Reentry Management, Female Offenders and Psychology Services.

In addition, the Director of the BOP announced in FY 2013 the availability of the BOP's Model Programs Catalog, an inventory of inmate programs that Central



Office recommends for adoption and implementation at BOP's institutions. The goal is to ensure BOP is using resources to implement effective and meaningful programs designed and proven to help reduce crime and maintain safety and security in BOP's prisons.

Substance Abuse Treatment

The BOP's substance abuse strategy includes a required drug education course, non-residential drug abuse treatment, residential drug abuse treatment, and community transition treatment. The Violent Crime Control and Law Enforcement Act of 1994 requires the BOP to provide residential drug abuse treatment to all inmates who volunteer and are eligible for the program. Inmates are strongly motivated to participate because certain non-violent offenders who

successfully complete all components of this recidivism-reducing program are eligible for a sentence reduction of up to one year.

In FY 2007 and FY 2008, the BOP lacked the capacity necessary to meet the statutory requirement; however from FY 2009 through FY 2014, the BOP was able to provide residential drug abuse treatment to 100 percent of the federal inmate population eligible for treatment.

The resources received in the previous budgets were essential to the expansion of drug treatment capacity, which have provided critical support to reach BOP's goal of providing 12 months sentence credits to all eligible inmates. The FY 2016 budget preserves funding provided in the FY 2014 and 2015 budget to further expand the residential drug treatment program to allow more inmates to participate in the program and earn an early release, thereby reducing crowding, costs, and recidivism.

Specific Pro-Social Values Programs

Based on the proven success of the residential substance abuse treatment program, the BOP has implemented additional cognitive-behavioral programs to address the needs of other segments of the inmate population (including younger offenders and high-security inmates). These programs focus on inmates' emotional and behavioral responses to difficult situations and emphasize life skills and the development of pro-social values, respect for self and others, responsibility for personal actions, and tolerance. Many of these programs have already been found to significantly reduce inmates' involvement in institution misconduct. The positive relationship between institution conduct and post-release success makes BOP hopeful about the ability of these programs to reduce recidivism.

Work Programs

Prison work programs teach inmates occupational skills and instill in offenders sound and lasting work habits and a work ethic. All sentenced inmates in federal correctional institutions are required to work (with the exception of those who for security or medical reasons are unable to do so). Most inmates are assigned to an institution job such as food service worker, orderly, painter, warehouse worker, or groundskeeper.

In addition to these BOP work assignments, Federal Prison Industries (FPI or trade name UNICOR) provides inmates the opportunity to gain marketable work skills and a general work ethic -- both of which can lead to viable, sustained employment upon release. It is one of the BOP's most important correctional programs because it has been proven to substantially reduce recidivism. FPI also keeps inmates productively occupied and significantly reduces the likelihood of misconduct.

Unfortunately, FPI participation has declined significantly over the past two decades as a result of Department of Defense authorization and appropriations bills that have weakened FPI's standing in the Federal procurement process. FPI employed 33 percent of the inmate population in 1988 but currently only reaches seven percent (approximately 12,400 individuals) of the inmate population housed in BOP facilities.

In order to increase work opportunities, FPI continues to explore opportunities with commercial customers. In the Consolidated and Further Continuing Appropriations Act of 2012 (P.L. 112-55), FPI received two new authorities to increase inmate employment. The first enables FPI to recapture work performed outside of the United States, also known as repatriation. The second authorizes FPI to participate in the Prison Industries Enhancement Certification Program, which allows FPI to partner with commercial businesses under a strict set of conditions to manufacture and sell prison-made goods in interstate commerce.

For FY 2016, new language is proposed in DOJ's General Provisions to enhance FPI opportunities. Section 220 establishes a pilot program that will assist FPI in increasing inmate work opportunities and enhancing its mission capability of protecting society and reducing crime by preparing inmates for successful reentry through job training. Section (a) will streamline intradepartmental procurement from FPI, enabling the Department to place more inmates in the FPI program, which reduces recidivism, and generates cost savings for the Department due to fewer inmates returning to BOP custody. Section (b)(1) will permit FPI to work directly with state prison industries and collaborate on work opportunities, thereby entering new markets and positioning the program to increase its sales and inmate workforce. Section (b)(2) will allow FPI to leverage its diverse factory operations and quick response time to meet the needs of disaster relief operations and increase inmate work opportunities. Finally, section (c)(1)(A)-(B) will increase FPI's acquisition efficiency so it can better serve existing customers and attract new business, thereby increasing inmate job training opportunities.

Education, Vocational Training, and Occupational Training

The BOP offers a variety of programs for inmates to enhance their education and to acquire skills to help them obtain employment after release. Institutions offer literacy classes, English as a Second Language, adult continuing education, parenting classes, recreation activities, wellness education, and library services.

With few exceptions, inmates who do not have a high school diploma or a General Educational Development (GED) certificate must participate in the literacy program for a minimum of 240 hours or until they obtain a GED. The English as a Second Language program enables inmates with limited proficiency in English to improve their English language skills. Also, a number of institutions offer inmates the opportunity to enroll in and pay for more traditional college courses that could lead to a bachelor's degree.

The BOP also facilitates vocational training and occupationally oriented higher education programs. Occupational and vocational training programs are based on the needs of the specific institution's inmate population, general labor market conditions, and institution labor force needs. On-the-job training is afforded to inmates through formal apprenticeship programs, institution job assignments, and work in the FPI program.

Life Connections

The Life Connections Program is a residential multi-faith-based program that provides the opportunity for inmates to deepen their spiritual life and assist in their ability to successfully reintegrate following release from prison.

Inmates who are not eligible for the residential Life Connections Program may volunteer to participate in a modified version of the program called Threshold. This is a non-residential spiritual/values based program taught by chaplains and volunteers over a six to nine month time period. This program is designed to strengthen the inmate's reentry to the community.

Specific Release Preparation Efforts

In addition to the wide array of inmate programs described above, the BOP provides a Release Preparation Program that inmates participate in toward the end of their sentence. The program includes classes in resume writing, job seeking, and job retention skills. It also includes presentations by officials from community-based organizations that help ex-inmates find employment and training opportunities after release from prison.

The BOP has established employment resource centers at most federal prisons to assist inmates with creating release folders to use in job searches; soliciting job leads from companies that have participated in mock job fairs; identifying other potential job openings; and identifying points of contact for information on employment references, job training, and educational programs.

Residential Reentry Centers

The BOP utilizes Residential Reentry Centers (RRCs) -- also known as community corrections centers or halfway houses -- to place inmates in the community prior to their release from custody in order to help them adjust to life in the community and find suitable post-release employment. These centers provide a structured, supervised environment and support job placement, counseling, and other services. As part of this community-based programming, some inmates are also placed on home confinement, which is statutorily limited to 10 percent of an inmate's sentence. Individuals confined to their homes are given strict schedules to maintain, adherence to which is telephonically or electronically monitored.

D. Challenges

For more than 80 years the BOP has earned many accomplishments and faced extraordinary challenges. The challenges that can positively affect or impede progress toward achievement of agency goals are complex and ever changing. Factors that impact BOP include: general economic conditions, legislation, investigative and prosecutorial initiatives, technology, and crime rates. The BOP continues to streamline operations and increase efficiency in order to operate as inexpensively and effectively as possible.

External Challenges: The BOP does not control the number of new admissions to federal prisons. As a result, BOP faces major challenges in effectively managing the federal inmate population in already crowded conditions. BOP has focused on ways to mitigate the negative effects of a large prison population. These include expanding contract bed capacity for low

security male criminal aliens, home confinement as appropriate, expansion of existing BOP capacity, acquisition of existing facilities, and construction of new facilities, as funding permits.

Internal Challenges: The largest internal challenge for the BOP is to provide adequate levels of bed space and staffing to safely manage the inmate population. Crowding is a very real danger in prisons – causing frustration and anger for inmates whose access to basic necessities like toilets, showers, and meals becomes very limited and who face hours of idleness resulting from limited availability of productive work and program opportunities. Crowding also strains facilities' infrastructure like water, sewage, and power systems, and increases the maintenance service needed to keep these systems operational.

Overcrowding, employee involvement in external military service assignments, unpredictable events such as September 11, 2001, and devastating natural disasters such as Hurricanes Sandy, Andrew, Ivan, Katrina, and Rita pose significant internal management challenges in the areas of cost control and staffing. The BOP actively monitors and works to address these areas of concern, while housing inmates in the safest and most cost effective manner.

In the years following September 11, 2001, the government's focus turned toward expanding its efforts to safeguard the American public from terrorism and increasing its national security intelligence and enforcement capabilities. While national security continues to be a high DOJ priority, the Department is reinvigorating its traditional missions as a new set of challenges have emerged, ranging from crime associated with the cyber-threats, gun safety, financial fraud enforcement, southwest border enforcement, rising health care fraud, a growing threat from intellectual property and international organized crime, and child exploitation. Most recently the DOJ is focused on improving reentry initiatives by expanding Second Chance Act programs and working to reduce recidivism rates by providing drug treatment, increasing alternatives to incarceration, and strengthening family and parental ties.

The BOP's biggest challenge is managing the over-crowded federal inmate population, and providing for their care and safety, as well as the safety of BOP staff and surrounding communities, within budgeted levels.

Crowding as of 01/08/15 Population 169,774 Rated Capacity 132,731 25,000 1 25,000 1 25,000 1 25,000

As the nation's largest correctional agency, the BOP is responsible for the incarceration of approximately 211,000 inmates. At the end of FY 2014, system-wide, the BOP was operating at 30 percent over rated capacity and crowding remains a special concern at higher security facilities, with 52 percent crowding at high security facilities and 39 percent at medium security facilities. Rated capacity is the baseline used to calculate prison crowding, and is essential to managing the BOP's inmate population to distribute the population throughout the system efficiently and equitably. The calculation for determining rated capacity involves stratified double bunking across all security levels and includes the following formulas: minimum and low security institutions at 100 percent double bunking; medium security institutions at 50 percent double bunking; and high security institutions at 25 percent double bunking. The combined inmate population confined in high and medium facilities represents 40 percent of the BOP's institution population.

The chart describes the statistics of the inmates housed in these facilities. There is a much higher incidence of serious assaults by inmates on staff at high and medium security institutions than at the lower security facilities.

The BOP manages overcrowding by double and triple bunking inmates throughout the system and housing them in space not originally designed for inmate housing, such as television rooms, open bays, and program space. At the end of FY 2014, 20,592 (95 percent) high security inmates were double bunked, and 7,446 (13 percent) of medium security inmates and 29,682 (68 percent) of low security inmates were triple bunked.

MEDIUM SECURITY INMATES

- 77% have a history of violence;
- 72% have been sanctioned for violating prison rules; and
- 52% have sentences in excess of 9 years.

HIGH SECURITY INMATES

- More than 89% have a history of violence:
- 85% have been sanctioned for violating prison rules:
- 50% have sentences in excess of 12 years; and
- One out of every four inmates is affiliated with a gang.

The Government Accountability Office (GAO) released a report on the BOP titled *Growing Inmate Crowding Negatively Affects Inmates, Staff, and Infrastructure* (GAO-12-743), September 2012. GAO states "According to BOP and our observations, the growth of the federal inmate population and related crowding have negatively affected inmates housed in BOP institutions, institution staff, and the infrastructure of BOP facilities, and have contributed to inmate misconduct, which affects staff and inmate security and safety."

Prison Crowding has been identified as a Federal Managers Financial Integrity Act (FMFIA) material weakness, and has been reported as such each year since FY 2006 in the DOJ's Performance and Accountability Report (PAR). The Department of Justice has historically reported FMFIA information via the PAR. However, in FY 2013 the Department began reporting such information through an Agency Financial Report (AFR) instead of the PAR. In the FY 2014 AFR, prison crowding is reported as a material weakness for the Department.

In describing the issue, the AFR states: "The BOP's formal Corrective Action Plan includes utilizing contract facilities; expanding existing institutions; and acquiring, constructing, and activating new institutions as funding permits." The report further states that "The Department's corrective action efforts are not limited to the BOP alone. The Department continues to consider and implement an array of crime prevention, sentencing, and corrections management improvements that focus on accountability and rehabilitation, while protecting public safety. The Department recognizes that the BOP's capacity management efforts must be teamed with targeted programs that are proven to reduce recidivism and promote effective re-entry. The BOP will continue to work with the Department on these programs."

In light of overcrowding and stresses on prison staffing, BOP's ability to safely manage the inmate population is identified as one of the top management and performance challenges facing the Department as identified by the Office of the Inspector General (OIG) List of Top Management Challenges for 2014. The OIG states "The Department of Justice (Department) continues to face two interrelated crises in the federal prison system. First, despite a slight decrease in the total number of federal inmates in fiscal year 2014, the Department projects that the costs of the federal prison system will continue to increase in the years ahead, consuming a large share of the Department's budget. Second, federal prisons remain significantly overcrowded and therefore face a number of important safety and security issues.

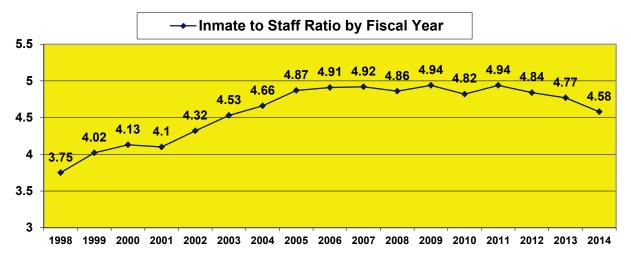
To address this material weakness, the BOP will activate three newly constructed or acquired prisons (USP Yazoo City, MS, FCI Hazelton, WV, and AUSP Thomson, IL) by 2015/2016. Currently, there are ongoing initiatives aimed at reducing the prison population over the long run. In August 2013, the Attorney General announced the DOJ's "Smart on Crime" initiative. It is possible that this initiative will slow the population growth over the long term. The recent changes to the BOP's compassionate release program are part of the Attorney General's "Smart on Crime" initiative. The BOP is also monitoring changes announced by the USSC. In addition, the Colson Commission will examine justice reinvestment initiatives as they apply to the federal criminal justice system.

Staffing

The BOP suffered tragic losses in FY 2013 with the murders of two staff members. Officer Eric Williams, a Correctional Officer at the United States Penitentiary in Canaan, Pennsylvania, was working in a housing unit when he was stabbed to death by an inmate. Lieutenant Osvaldo Albarati was shot and killed while driving home from the Metropolitan Detention Center in Guaynabo, Puerto Rico. These losses underscore the challenges the dedicated men and women working for the BOP face daily. While there are many facets to BOP's operations, the foundation for it all is the safe, secure, and orderly operation of its institutions, and each and every staff member in the BOP is critical to this mission.

As the inmate population and crowding have increased, the inmate-to-staff ratio has increased by over 22 percent since 1997. In FY 2009, the five states with the highest prison populations had an average inmate-to-staff ratio of 3.10 to 1. BOP's ratio for that year was 59 percent higher. BOP employees are considered "correctional workers first," regardless of the position to which they are assigned. Because all non-custody staff are correctional workers, they can perform programmatic functions (such as those of an educational instructor) without the added presence of a Correctional Officer. BOP's operational maxim also allows non-custody staff to assume the duties of Correctional Officers during inmate disturbances, or because of long-or-short-term custody staff shortages.

At the end of FY 2014, the BOP's inmate to staff ratio (ISR) was at 4.58 to 1. The chart below illustrates inmate-to-staff ratios over time.



Note: Figures include all S&E and PHS staff.

The number of inmates in BOP-operated prisons has grown from 125,560 in FY 2000 to 172,242 in FY 2014, while BOP operations staff (S&E) increased from 30,382 in FY 2000 to 37,641 in FY 2014. As a result, the BOP ISR increased from 4.13 to 1 in FY 2000 to 4.58 to 1 in FY 2014. This change in ISR causes negative impacts on BOP's ability to effectively supervise prisoners and provide inmate programs. When an insufficient number of Correctional Officers is available to cover an institution's mission critical custody posts on any given day, institution staff make up the difference by assigning non-custody officers (a practice termed "augmentation"), authorizing overtime, or, if no other alternative exists, leaving posts vacant. When BOP institution managers use augmentation, the normal duties performed by the augmenting staff may be curtailed or

delayed, thereby interfering with BOP's ability to provide some inmate programs. Also, rigorous research by the BOP's Office of Research and Evaluation¹ has confirmed that the greater the ISR the higher the levels of serious assaults by inmates.

Most criminal justice agencies have some discretion in controlling their workloads, typically through priority systems developed to ensure that the most important cases are handled first. However, the BOP must, by law, accept all inmates committed to its custody. The growing numbers of offenders sentenced to prison each year creates an increasingly heavy workload for staff. Sentence computation and security level designations, admission and orientation processes, intake screenings for medical and psychological problems, issuance of clothing and supplies, as well as work and programming assignments all have to be completed for each inmate sentenced.

National Security

Finally, with the ongoing threats and activity of terrorist organizations, the BOP's work has taken on significantly greater risks with the incarceration of high-profile terrorists inmates and suspects such as: Naser Abdo, Umar Abdulmutallab, Nazih al Raghie (Anas al-Libi), Waad Alwan, Mohanad Hammadi, Lawal Babafemi, Khalid al-Fawwaz, Adel Bary, Mostafa Mostafa (abu Hamza al Masri), Rezwan Ferdaus, Sulaiman Ghaith, Adis Medunjanin, Aaafia Siddiqui, and Dzhokhar Tsarnaev. The BOP has taken several steps to ensure that federal prisons are not being used to recruit terrorists or spread extremist ideologies within the U.S. prisons. Some of the steps include monitoring inmate communications, and implementing training for correctional workers to recognize signs of radicalization.

E. Best Practices

The Congress, in FY 2009, directed the Government Accountability Office (GAO) to report on BOP's methods for cost estimation, including the pricing of utilities and inmate medical care costs. The GAO released report GAO-10-94 in November 2009 and concluded that BOP's methods for cost estimation largely reflect best practices as outlined in GAO's *Cost Estimating and Assessment Guide*. GAO stated that "BOP followed a well-defined process for developing mostly comprehensive, well documented, accurate, and credible cost estimates." The full GAO report is available at: http://www.gao.gov/new.items/d1094.pdf.

The BOP has maintained an unqualified opinion on the Financial Statements Audit since 1999. The auditors have not identified any significant deficiencies or material weaknesses in internal control over financial reporting since 2009.

¹ The Effects of Changing Crowding on Inmate Violence and Administrative Remedies Granted (2010).

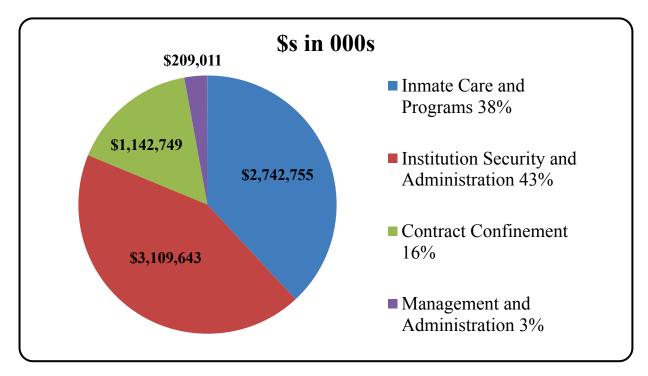
F. Full Program Costs

FY 2016 Total Bureau of Prisons Request by DOJ Strategic Goal

The BOP's mission plays a direct role in supporting DOJ, Strategic Goal 3: Ensure and Support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. In FY 2016, the BOP is requesting a total of \$7,204,158,000 with 43,280 positions and 37,927 FTEs for its S&E appropriation to support the DOJ goal to:

- Provide safe, secure, humane, and cost-effective confinement and transportation of federal detainees and inmates. (Strategic Objective 3.3)
- Reform and strengthen America's criminal justice system by targeting only the most serious offenses for federal prosecution, expanding the use of diversion programs, and aiding inmates in reentering society. (Strategic Objective 3.4)

The BOP's budget integrates both DOJ and BOP Strategic Goals and Objectives, and each performance objective is linked with the costs of critical strategic actions.



FY 2016 Budget Request by Decision Unit

Resources for each objective that the BOP supports are identified under each decision unit. The total costs include the following:

- The direct cost of all activities
- Indirect costs
- Common administrative systems costs

Both performance and resource tables within each decision unit justification define the total costs of achieving the strategies the BOP will continue in FY 2016.

Inmate Care and Programs: \$2,742,755,000

Program Increases

- 1) Conversion of FCI Fort Worth to Medical Referral Center (MRC)
- 2) Increase Mental Health Staff
- 3) Sex Offender Management Program
- 4) Increase Reentry Programs

Institution Security and Administration: \$3,109,643,000

Program Increases

- 1) Conversion of FCI Fort Worth to MRC
- 2) Increase Staffing

Contract Confinement: \$1,142,749,000

Program Increases

1) Residential Reentry Programs

Management and Administration: \$209,011,000

Decreases: The BOP has completed a number of management actions to streamline operations, improve program efficiencies, and reduce costs to ensure the lowest possible costs. Examples of these actions include co-locating facilities, centralizing prisoner sentence computation and inmate designation functions, consolidating the servicing of human resource and employee development functions, and transferring inmates with the most critical medical needs to dedicated BOP medical centers. The BOP conducted streamlining and other efficiency measures by de-layering and abolishing over 2,300 positions, and closing four outmoded and inefficient stand-alone prison camps. The FY 2016 President's Budget contains additional decreases of \$11 million for: Program and/or Administrative Savings.

G. Environmental Accountability

Energy Savings Performance Contracts



The BOP continues its progress of improving environmental and energy performance and is aggressively pursuing the Energy Savings Performance Contract (ESPC) finance mechanism permitted by Executive Order 13423 and Energy Policy Act. Forty ESPCs have been initiated over the last eight years, and the BOP has moved forward with ESPCs at thirty institutions. As part of these projects, the BOP is implementing green initiatives such as solar power, wind turbines, biomass boilers, geo-thermal systems, lighting upgrades, water conservation retrofits,

heating and cooling equipment replacement, and many other energy saving measures.

The BOP's ESPC Program has won the following national awards:

- DOE Small Team Award for the FCC Victorville Project
- Presidential Award for Leadership in Federal Energy Management
- GSA Award for the "Greening of Prisons"
- DOJ Energy and Environmental Awards to USP Hazelton and FCC Victorville

Since 2012, eleven institutions have been awarded energy performance contracts; the implemented Energy Conservation Measures (ECMs) are having a significant impact on the facilities consumption of water and energy. The eleven institutions include the Federal Correctional Institutions (FCI) Beckley, WV; Danbury, CT; Otisville, NY; Waseca, MN; El Reno, OK; Fort Worth, TX; Federal Prison Camp (FPC) Alderson, WV; Federal Medical Center (FMC) Rochester MN; Carswell, TX; Federal Correctional Complex (FCC) Coleman, FL; and Metropolitan Detention Center (MDC) Brooklyn, NY. The combined square footage for the eleven institutions is 6,298,194. These institutions have a total of 76 ECMs. The ECMs included water management, lighting enhancements, sub-metering integration, building automation upgrades, HVAC measures, refrigeration improvements, building envelope, and central plant improvements to include boilers, chillers, and cooling towers. The combined impact of the energy savings and emissions reductions generated by these ECMs is allowing the BOP to make a significant contribution to the reduction of federal greenhouse gas emissions. The consolidated projected savings for the eleven sites include 1,201,467 MMBtu/yr in energy savings and 487,428 KGal/yr of water reductions and a significant saving in operation and maintenance costs.

LEED Certification

The Leadership in Energy and Environmental Design (LEED) Green Building Rating System is the nationally accepted benchmark for design, construction and operation of high performance sustainable buildings. As part of this certification, these assets received points for a sustainable site, water efficiency, energy/atmosphere, materials/resources, indoor air quality and innovative designs. The BOP was one of the first to embrace sustainable design as early as 2002 under Executive Order 13123 working with FEMP of the DOE. The newer FCI in Butner, NC is one of the first prisons in the country to be LEED "Certified." The recently completed Aliceville, AL FCI for women achieved a Silver Rating under the LEED program, which was the first LEED Silver Rating earned for one of the BOP's new institutions. FCI Hazelton, WV received a LEED "Gold" Rating, which was also a first for the BOP. Most recently, USP Yazoo City, MS received a LEED "Silver." Future new prisons will be developed to reach a minimum level of "Silver."

As a leader in correctional design, and striving for compliance with mandates such as EO-13423, EO-13514, EPACT-2005, EISA-2007, and the Guiding Principles, BOP studied the process by which we could achieve self-sustaining facilities by the year 2030. To achieve this goal of Net-Zero Energy Buildings (Net-ZEB), BOP continues to incorporate sustainable technologies as they present themselves. Examples include Energy Recovery, Rain Water Harvesting, Geothermal Heat Exchange, and High Performance Systems. A new "Sustainable Prison Prototype" is also being developed.

In addition to ESPCs, the BOP is also pursuing energy conservation and greening projects via non-traditional methods. As an example, the BOP is researching waste to power purchasing

from a company that burns waste stream materials. After years of work at FCC Allenwood, the BOP signed a contract with Lycoming County to purchase electricity produced from landfill methane gas. The methane plant supplied FCC Allenwood with 25,656,072 kwh of renewable electric power, approximately 85% of the institution's electric consumption. This project has increased county revenue, reduced greenhouse gas emissions and provided affordable electricity to the federal prisons.

Energy Conservation

In an effort to conserve energy system-wide, the BOP implemented an Energy Conservation Initiative in 2006. This initiative employs integrated design principles, optimization of energy performance and operational changes. As part of this initiative, the BOP reduced the consumption of electricity, natural gas, fuel oil, gasoline and water. This resulted in a 2 percent reduction in energy consumption over the fiscal year.

Recycling

The BOP has a very ambitious recycling program. In FY 2014, the BOP diverted over thirty percent of its waste from landfills. The total landfill wastes poundage was 270,375,051. Recycled poundage was 82,308,902, including composted poundage. The BOP has implemented a strategic plan to achieve a fifty percent solid waste diversion by 2015 and strives to continue these efforts. Data is collected each quarter from all sites to monitor progress. BOP has also developed a standardized position description for a recycling technician and encourages all institutions to implement a full time individual to improve recycling programs.

Bio-Diesel Fuels

The BOP has several institutions with bio-diesel operations producing this renewable substitute for petroleum diesel. At these facilities, waste kitchen grease is converted into bio-diesel, and is used in vehicles and lawn equipment. In FY 2014 the agency's vehicle fleet consumed 20.5 thousand gallons of B20 blended biodiesel.

Water Conservation

Water reduction challenges for the BOP continue to be a high priority. The BOP implemented additional water conservation initiatives in 2009 and 2012 to reduce water consumption throughout the system. The current method of measuring for water reduction is gallons per square feet. It is difficult to achieve reductions in water usage due to inmate crowding in BOP facilities. In efforts to achieve current Executive Orders and Mandates concerning water conservation, the Agency's Director issued a "Water Conservation Initiative" memorandum on March 5, 2012. The memorandum outlined water conservation requirements; to include monthly monitoring of water use, and new reporting obligations. The BOP continues implementation of water reduction measures in ESPCs and the use of water efficient products where feasible. Together, these efforts reduced the BOP's water use by 52.8 million gallons of water from fiscal year 2013 to fiscal year 2014.

II. Summary of Program Changes

The requested increases for the BOP S&E appropriation are summarized in the table below:

Item Name	Description	Pos.	FTE	<u>Dollars</u> (\$000)	<u>Page</u>
Mission Change FCI Ft. Worth	Medical Referral Center – Increase Capacity	72	36	4,741	72
Increase Unit Officers	Staffing	0	357	32,003	75
Reentry and Recidivism Reducing Programs:					78
Increase Mental Health Staff	Mental Health	130	65	9,685	
RRC Increases	Increase Bed Space and Programming	0	0	98,900	
Increase Reentry Programs	Reentry Programs in BOP Facilities	0	0	20,000	
Increase Reentry Programs	To strengthen family bonds	0	0	5,000	
Expand Education and VT Programs	Increase Education and VT Programs	0	0	10,000	
Expand Medical Assisted Treatment Pilot	Treatment Pilot	0	0	1,000	
Sex Offender Management Program	Sex Offender Management	20	10	1,613	
Total, Reentry and Recidivism Reducing Programs	Smart on Crime Initiatives	150	75	146,198	
Program and/or Admin Savings	Program and/or Admin Savings	0	0	-11,000	86
TOTAL		222	468	\$171,942	

III. Appropriations Language and Analysis of Appropriations Language

Appropriation Language

The FY 2016 budget estimates include proposed changes in the appropriation language listed and explained below. *New language proposed for FY 2016 is italicized and underlined, and FY 2015 Requested language proposed for deletion is bracketed.*

Federal Prison System

Salaries and Expenses

For necessary expenses of the Federal Prison System for the administration, operation, and maintenance of Federal penal and correctional institutions, and for the provision of technical assistance and advice on corrections related issues to foreign governments, [\$6,815,000,000] \$7,204,158,000: Provided, That the Attorney General may transfer to the Department of Health [Resources] and *Human* Services [Administration] such amounts as may be necessary for direct expenditures by that [Administration] Department for medical relief for inmates of Federal penal and correctional institutions: *Provided further*. That the Director of the Federal Prison System, where necessary, may enter into contracts with a fiscal agent or fiscal intermediary claims processor to determine the amounts payable to persons who, on behalf of the Federal Prison System, furnish health services to individuals committed to the custody of the Federal Prison System: Provided further, That not to exceed \$5,400 shall be available for official reception and representation expenses: Provided further, That not to exceed \$50,000,000 shall remain available for necessary operations until September 30, [2016]2017: Provided further, That, of the amounts provided for contract confinement, not to exceed \$20,000,000 shall remain available until expended to make payments in advance for grants, contracts and reimbursable agreements, and other expenses: Provided further, That the Director of the Federal Prison System may accept donated property and services relating to the operation of the prison card program from a not-forprofit entity which has operated such program in the past, notwithstanding the fact that such notfor-profit entity furnishes services under contracts to the Federal Prison System relating to the operation of pre-release services, halfway houses, or other custodial facilities. *Provided further*, That, notwithstanding section 1345 of title 31, United States Code, or any other provision of law, funds made available under this heading in this or prior Acts may be used to pay expenses associated with reentry programs to assist inmates in preparation for successful return to the community, including prison institution and Residential Reentry Center programs that involve inmates' family members and significant others, community sponsors and volunteers. (Department of Justice Appropriations Act, 2015.)

Analysis of Appropriation Language

1) A clarification to existing transfer authority is proposed to accurately reflect the current administrative and financial structure at the Department of Health and Human Services (HHS) related to payment of U.S. Public Health Service commissioned officer salaries working in BOP institutions. Previously, the Health Resources and Services Administration (HRSA) managed the salaries account, but that function now resides with the HHS office of the Secretary. This change was coordinated with HHS.

2) Additionally, BOP proposes language that will ensure that purchases of items/services for reentry programs that may benefit children, spouses, and other family members of inmates in the Federal Prison System are appropriate and considered a necessary expense.

IV. Program Activity Justification

A. Inmate Care and Programs

Inmate Care and Programs	Direct	Estimate	Amount
	Pos.	FTE	
2014 Enacted	15,674	12,727	2,525,039
2015 Enacted	15,674	12,727	2,563,000
Adjustments to Base and Technical Adjustments	0	67	128,382
2016 Current Services	15,674	12,794	2,691,382
2016 Program Increases	211	105	51,373
2016 Request	15,885	12,899	2,742,755
Total Change 2015-2016	211	172	179,755

1. Program Description: Inmate Care and Programs

The BOP is committed to effectively using its resources to provide maximum benefit to society. Thus, the BOP relies upon empirical research to determine which programs are effective in accomplishing their objectives. The BOP's inmate programs and services are geared toward helping inmates prepare for their eventual release.

This activity covers the cost of inmate food, medical care, institutional and release clothing, welfare services, transportation, gratuities, staff salaries (including salaries of Public Health Service commissioned officers), and operational costs of functions directly related to providing inmate care. This decision unit also represents costs associated with inmate programs (Education and Vocational Training, Drug Treatment, Life Connections, Religious and Psychological Services).

The following chart provides estimated funding (dollars in thousands) amounts for key programs funded in Inmate Care and Programs decision unit:

Program Area	FY 2012	FY 2013	FY 2014
	Actuals	Actuals	Actuals
Food	\$412,516	\$417,457	\$423,108
Medical	\$990,998	\$1,061,875	\$1,096,838
Unit Management	\$469,029	\$472,850	\$483,817
Drug Treatment	\$95,452	\$103,890	\$108,189
Education	\$141,877	\$137,061	\$143,939
Psychology Services	\$58,810	\$60,334	\$64,006
Religious Programs	\$44,354	\$45,588	\$45,498

The purpose of inmate programs is to improve inmate self-control, provide educational opportunities and pre-release programs to facilitate reentry and transition, and establish healthy relationships between staff and inmates by dividing the large institution population into smaller, more manageable groups. A team of multi-disciplinary staff (i.e., Unit Manager, Case Manager, Correctional Counselor and a Unit Officer) who have administrative and supervisory authority are permanently assigned and located in housing units to work with the inmates. This places

services closer to the users, and permits decision-making by those who are most knowledgeable about inmates and their program needs. Regular and consistent interaction between inmates and staff provides better communication and understanding of inmate needs.

Medical Services (Inmate Health Care)

All BOP institutions operate outpatient ambulatory care clinics. These clinics provide a range of outpatient services to inmates similar to those provided by ambulatory clinics found in most communities, i.e., primary health care. The clinics serve as the first level of diagnostic and treatment services to sentenced and pre-sentenced inmates. New institutions are typically given two years after activation to obtain accreditation from the Joint Commission on Accreditation of Healthcare Organizations, which is an independent, not-for-profit organization that accredits and certifies more than 20,500 health care organizations and programs in the United States. Care Level I institutions are not required to achieve or maintain this accreditation because they predominantly house a healthy inmate population. All Health Services programs and operations are subject to internal review (Program Review) and must maintain accreditation by the American Correctional Association. Each institution is also required to provide data to the Health Services Division (HSD) in the form of outcome measures for a variety of clinical conditions (HIV, hypertension, diabetes, etc.). These evaluative and accreditation activities provide the HSD with valuable data regarding the quality and appropriateness of health care in the BOP. The majority of BOP medical staff are civil service clinical and support professionals, and the remaining staff are U.S. Public Health Service (USPHS) Commissions Corps Officers serving in a wide variety of clinical and specialty professions. The USPHS provides these clinicians and administrators via an interagency agreement.

Initial Medical Screening

All inmates undergo a comprehensive intake screening when admitted to BOP facilities. The screening includes:

- Physical examination.
- Screening for tuberculosis and other contagious diseases.
- Suicide risk and mental health assessment.
- History of current and prior medical conditions.
- Screening for physical and sexual abuse and assessment of need for related services.
- Dental screening.
- Dispensing of appropriate and necessary medications.
- Ordering of appropriate tests.
- Collection of DNA for the FBI database.
- Development of a medical treatment plan when indicated.

Acute Care

Episodic medical care is available through "sick call triage" on weekdays, and at all times when urgent care is needed. Medical personnel are either on-site or on-call to respond to inmate medical needs. Inmates experiencing medical emergencies that cannot be managed in a prison clinic are transported immediately to the nearest community hospital emergency department.

Chronic Care

Chronic medical conditions are managed using evidence-based clinical practices to achieve the goals of slowing disease progression, reducing complications, promotion self-management, and

maintaining inmates at a high level of functioning. Adequate control over these conditions prevents or limits acute exacerbations of illness requiring specialist intervention or hospitalization. Preventive health services are provided for identification of conditions which may be effectively managed with early detection and treatment. Services specific to female health care, including necessary obstetric and gynecological care, are provided.

To update BOP providers on the continually evolving medical practices and management of high volume or high risk diseases such as diabetes, HIV, hepatitis, hypertension, etc., the BOP Medical Director issues Clinical Practice Guidelines. These guidelines are based on current, published recommendations from recognized authoritative organizations such as the Centers for Disease Control and Prevention (CDC), the National Institutes of Health, and the American Diabetes Association.

Management of certain conditions requires periodic consultation with community specialists, such as psychiatrists, surgeons, cardiologists, and infectious disease specialists. To obtain these and other facility and physician services, each institution solicits comprehensive medical contracts, which include facility and physician services, based on the 1) prevailing Operating Federal Medicare rate for the applicable geographic area for inpatient facility services, and 2) prevailing Medicare fee schedule amounts for the geographic area for outpatient services and physician services. Vendors are allowed to propose a discount from, or a premium to, those Medicare benchmarks that are then negotiated by the BOP. Where comprehensive medical contracts are not available, institutions use blanket purchase agreements for a negotiated rate, but the rate may not be benchmarked to prevailing Medicare rates.

Medical Referral Centers

The BOP currently has six Medical Referral Centers (MRCs) to supplement its health care delivery system. Each MRC provides specialized care to inmates with a variety of chronic and subacute medical and psychiatric conditions. The United States Medical Center for Federal Prisoners (USMCFP) Springfield, MO; the Federal Medical Center (FMC) Butner, NC; FMC Rochester, MN; FMC Lexington, KY; and FMC Devens, MA, treat male inmates, while FMC Carswell, TX, handles the MRC needs for female inmates. Each MRC is required to maintain the appropriate level of accreditation through the Joint Commission. The MRCs provide services such as:

- Dialysis services to those inmates in chronic renal failure.
- Oncology (cancer) treatment services to include chemotherapy and radiation therapy.
- Inpatient and forensic mental health services.
- Ambulatory care services for work cadre inmates.
- Surgical services.
- Prosthetics and orthotics.
- Management of long-term ventilator dependent patients.
- Care for long-term chronically ill and medically "fragile" inmates.
- End-of-life care.

Care provided at the MRCs is highly complex and requires the use of numerous medical specialists and advanced equipment. This capital equipment has life-cycle limitations which require replacement in a planned and timely manner. For example, a dialysis machine has a life-cycle limitation of about five years, while a standard x-ray machine has a life cycle of 12-15

years. Maintenance costs and repairs on this essential equipment are also very expensive. Capital equipment maintenance and replacement is also a concern at the non-MRC institutions. Each is equipped with an x-ray machine, along with various pieces of medical/dental equipment to support the designated medical mission. Items such as dental radiography equipment, dental chairs and support infrastructure, defibrillators, medication dispensing cabinets, and laboratory equipment, must be maintained in perfect working order to prevent medical errors and harm to patient and equipment operators.

Increasing numbers of federal inmates require medical care, primarily as a result of the aging inmate population. Inmates suffer from the same constellation of medical conditions as the population at large, with significantly higher rates of disease associated with pre-incarceration lifestyle and a lack of access to medical resources. Conditions such as diabetes, hypertension, and infectious diseases have a slightly higher rate of incidence in the incarcerated population. Conditions related to abuse (e.g., kidney failure, liver failure), mental illness (e.g., schizophrenia and personality disorder), and a variety of respiratory conditions secondary to smoking are also prevalent.

HIV/AIDS Strategy

In July 2010, the Obama Administration released the National HIV/AIDS Strategy for the United States, the nation's first comprehensive plan for responding to the domestic HIV epidemic. The President designated the DOJ as one of six executive agencies responsible for implementing the Strategy at the federal level. DOJ and the BOP have produced an operational plan and responsibility for taking steps to achieve the goals of the Strategy. The plan has been dispersed across the Department with responsibility for implementing BOP's requirements delegated to the Director of the BOP. The Strategy focuses on three overarching goals: reducing the number of new HIV infections, increasing access to care for people living with HIV, and reducing HIV-related health disparities.

HIV infection has remained stable at approximately one percent of the inmate population and these individuals are living longer both in prison and in the community due to the availability of expensive, medication regimens.

Chronic Hepatitis C Rates and Treatment Costs

For the past several years, the incidence of chronic hepatitis C (HCV) has remained stable at approximately seven percent of the population. However, infectious disease experts are predicting HCV drug treatment options will grow exponentially in the coming years. If this happens, more patients will be candidates for treatment and drug regimens will become more and more expensive. As treatment indications broaden in the future and multidrug regimens become the standard of care, the drug costs for managing HCV have and will continue to grow significantly. Currently, the BOP has over 11,000 inmates with HCV, most of which have not been treated. Previously it cost approximately \$6,600 for a standard 48-week treatment regimen. In May 2011, the FDA approved two new medications in a new class of HCV drugs called HCV protease inhibitors. The new treatment regimen was indicated for the most common HCV genotype in America, genotype 1, and involved triple therapy with one of these new drugs plus the standard combination of pegylated interferon and ribavirin. These newer agents were very expensive and added \$20,000 to \$40,000 to the cost of treating one patient. Additionally, the BOP spends approximately \$4 million annually for HCV testing alone. In 2012, HSD revised its HCV Clinical Practice Guideline to include guidance on the use of those newer medications,

which were then considered the standard treatment regimen. Extensive education was given to clinical providers in the BOP and a group of Clinical Pharmacy Consultants with expertise in the management of hepatitis was convened. These consultants support the treating clinicians in their efforts to use these newer agents, and also monitor treatment to optimize patient outcomes.

The FDA approved two new agents at the end of 2013. HSD actively developed a strategy for implementation of this new approach to treatment following the American Association for the Study of Liver Diseases (AASLD) guidelines. In May 2014, HSD released the revised HCV Clinical Practice Guideline that replaced the previous newer medications with the two newest medications. The medication cost for these newest treatments currently cost \$45,000 to \$90,000 per inmate treated. In the rapidly developing pharmaceutical arsenal for the treatment of HCV, it is likely that at least two additional medications will become available in early 2015, potentially adding even more to the cost and complexity, as well as the efficacy of HCV treatment. New HCV meds were again approved in November 2014. The average treatment cost per inmate is expected to be approximately \$100,000. The BOP has historically treated approximately 250 HCV patients per year. Continuing this treatment rate would increase HCV treatment costs to \$25 million per year. These costs have been between \$4 and \$5 million over the last several years.

Medication Assisted Therapy

Medication Assisted Therapy (MAT) for opioid dependent offenders within the reentry environment has been a focus of BOP in partnership with the White House Office of National Drug Control Policy (ONDCP). The BOP embarked on a field trial that provides the medication VivitrolTM for identified at risk offenders entering a Residential Reentry Center (RRC). It is estimated that this program would cost almost \$8 million if it were to be expanded nationally.

Long-Term Care

The demand and need for long-term care (LTC) beds is increasing. Options to accommodate this increased need are being explored. In addition, the demand and need for subacute care requiring 24-hour medical staffing is also increasing. Options to develop an additional short-stay unit similar to those at FCI Terminal Island, CA, and FCI Fort Worth, TX, are being explored.

Compassionate Release

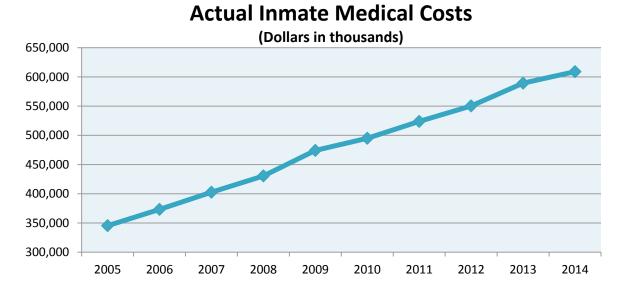
While incarcerated in the federal prison system, some inmates develop terminal or severely debilitating conditions that are chronic or progressive. The medical criteria for Reduction In Sentence (RIS; AKA compassionate release) consideration was revised this year to include a life expectancy less than 18 months rather than the previous criteria of 12 months, a new category for elderly with medical conditions, and the process was modified to increase efficiency of processing these requests. Educational sessions were conducted to train staff on RIS criteria and procedures.

Medication Distribution and Costs

Inmates released from secure facilities or camps to residential reentry centers (RRCs) are provided with 30-90 days of medications based on their medical condition. In addition, the BOP incurs the costs for on-going medical care for these inmates until they are released from the RRC. BOP is reviewing the potential for establishing preferred provider networks and pharmacy benefits management programs in areas where RRCs are located in an attempt to obtain cost-efficiencies where they exist.

Pharmaceutical costs in the United States rise yearly. The BOP operates with a limited pharmaceutical formulary, and purchases medications at a prime vendor contract rate. There has been a recent trend observed regarding soaring prices of previously inexpensive generic medications. This observation prompted a recent Senate subcommittee hearing regarding the soaring prices of generic medications. Additionally, expensive biologic medications continue to enter the market for a number of different diseases (e.g., cancer, skin, GI, etc.), which will continue to change the landscape of treatment regimens and future costs.

In spite of these measures, the cost of providing adequate care to inmates with chronic medical conditions continues to rise annually. The following graph illustrates the increasing obligations for actual non-salary medical costs incurred thru FY 2014.



The Health Services Division, Central Office, in Washington, DC, is focused on several major initiatives to provide quality health care in institutions while trying to reduce health care costs:

1. Telehealth. Telehealth utilizes the BOP's videoconferencing capabilities through the Wide Area Network (WAN) to exchange health information and provide health care services. All institutions have been provided funding for telehealth capabilities through WAN. Newly activating facilities are equipped with the technology and devices necessary to conduct telehealth. This equipment has a limited life cycle. Institutions are responsible for maintenance, repair, or replacement as units expire. Telehealth provides access to clinical and consultative services predominately in psychiatry. Although telehealth represents a significant opportunity to improve the quality of care and services, limitations on bandwidth, equipment, and availability of providers with appropriate licensure often limit individual initiatives. Telehealth is also being tested as a means of providing chronic care clinical encounters at institutions where there are shortages of staff physicians.

A teledermatology program involves a full time BOP/PHS board certified dermatologist providing asynchronous consultations on BOP inmates housed at various BOP facilities

- across the nation. This service reduces outside trips and medical costs associated with dermatologic services.
- 2. *Teleradiology*. Since 2004, the BOP has been actively involved in using teleradiology interpretation services through agreements with federally affiliated radiologists. There are 99 facilities participating in this initiative to date. Many older institutions require expensive infrastructure upgrades to accommodate this equipment, and a priority listing has been established. Old equipment is also becoming unserviceable and will be replaced with digital equipment in support of this initiative. This allows the BOP to obtain cost-effective pricing for interpretation services, reduce turnaround times previously experienced when films were mailed to providers for interpretation, and allows providers to initiate treatment timely. Maintenance costs for this equipment are very high (as much as \$100,000 per year) and efforts to negotiate lower rates with vendors have been unsuccessful. Radiation safety standards require frequent monitoring and maintenance of this equipment, and repairs can represent as much as one third of the total value of the equipment if not properly maintained. Each institution must maintain at least one active and functioning x-ray machine.
- 3. Health Information Technologies. The BOP is committed to the ongoing development and deployment of health information technology systems in compliance with standards issued by the Office of the National Coordinator (ONC) for Health Information Technology. Ongoing funding is required annually for the health informatics development. BOP-wide deployment of a base electronic medical record (EMR) was completed in FY 2008. The EMR includes the components of the traditional health record, plus a closed loop medication order entry, administration, and distribution system. The EMR utilizes secure wireless technology to bring healthcare documentation to the patient's bedside on nursing care units and any other area in our facilities where care is provided (i.e., special housing units). The BOP will integrate a Laboratory Information System with the EMR, continue to refine processes, and add ancillary documentation components in compliance with ONC standards. The BOP will work to utilize health information exchange opportunities to both make provision of healthcare for the incarcerated more efficient and assist offenders with transition back to society. The BOP has a goal to use the data to evaluate the efficacy of our Clinical Practice Guidelines, the compliance with the National Formulary, and provide enhanced ability to identify trends in morbidity and mortality to be used for out-year budgeting requests. By quantifying the underlying disease states present in the population, we can effectively target treatments and programs to meet those needs and reduce risk for the patient and the BOP.
- **4.** *Levels of Care*. The purpose of the inmate Medical Classification System is to identify inmate health care needs (medical and mental health) and assign inmates to facilities with appropriate health care capabilities, particularly, community health care resources. Similar to the Security Designation and Custody Classification System, a score is created for each inmate based on their need for health care at the time of their initial designation. Two SENTRY assignments are made, one based on the inmate's medical needs and one based on the inmate's mental health needs. Utilizing these assignments, the inmate is designated to an institution with the appropriate health care resources. Health Services and Psychology Services staff will update these assignments whenever an inmate's medical or mental health condition changes. Currently, HSD is able to effectively

manage the designations of inmates with specific medical conditions. At this time, the BOP is working with staff from other federal agencies to develop an electronic data exchange of medical information collected during the pre-sentence period to effectively identify inmates with significant medical needs and plan for placement.

- 5. *Medical Claims Adjudication*. In August 2008, a contract was awarded for the provision of medical claims adjudication services for certain BOP locations. This function was previously performed by staff with little training or expertise in this complex process. It was not feasible for BOP to keep its staff trained as experts due to continuous changes in the medical regulatory environment to perform accurate adjudication of the medical claims. The contract was awarded for a two-year base period with three-option year periods to be exercised at the government's discretion. Currently, the medical claim adjudication service is implemented at 30 BOP facilities. The initial contract for these services expired July 31, 2014; an interim contract was awarded through January 31, 2015. The BOP is currently pursuing solicitation of another five-year contract. The service is anticipated to increase the accuracy of payments for medical services provided via contractual agreements along with the goal of implementing at all BOP facilities before the expiration of the new contract.
- **6.** Utilization Review (UR). It is the BOP's policy that every institution has an established Utilization Review Committee (URC) chaired by the institution clinical director. The URC's responsibilities include reviewing all medically necessary non-emergent cases and authorizing treatment; reviewing outside medical, surgical, and dental procedures; reviewing requests for specialist evaluations; monitoring lengths of stay and interventions associated with inpatient admissions at community-based health care facilities; and making decisions (approve, refer, defer, or deny) for each case presented. The clinical director is the final authority for all URC decisions. Since FY 2010, 12 regional reviewers provide primary review of consults using software-based clinical decision criteria system. The goal is to provide standardized review and approval or denial of requested services. Three Utilization Review nurse consultants support the MRCs in their specialized mission, assist with optimal utilization of resources, and mentor and train institution Utilization Review staff. A medical and mental health bed management and review tool is being developed to optimize use of Care 4 beds that are staffed by nurses 24 hours each day and to project future medical and mental health bed needs. In addition, plans are underway to establish a national BOP Utilization Review and Scope of Services committee that will identify the appropriate use of new technologies and treatments in the BOP inmate population.
- 7. Catastrophic Case Management. The BOP developed a process to monitor and track the length of hospital stay and associated costs of an inmate in catastrophic cases. A single catastrophic case can easily account for 20 to 30 percent of a typical institution's annual outside medical budget. This strategy will allow the BOP to better understand the impact of catastrophic health care events on the health care budget and decision making. The clinical-fiscal case management strategy has been adopted by all regions.
- **8.** *Airborne/Communicable Disease Management.* It is the policy of the BOP that each institution have at least one Airborne Infection Isolation Room (AII Room), formally called a Negative Pressure Isolation Room (NPIR), which complies with the Center for

Disease Control and Prevention (CDC) criteria outlined in the guidance posted on the BOP Sallyport. AII rooms provide the BOP with the ability to effectively contain airborne and communicable diseases such as tuberculosis, varicella (chicken pox), measles, and potential pandemic illnesses (e.g., Avian flu), in the correctional setting. Since 1999, all new facilities are designed and built to meet these guidelines. HSD continues to survey institutions on an annual basis to determine the status of AII room capabilities in the BOP, and track costs associated with community-based isolations which are necessary due to the inability of institutions without AII room capabilities to manage these cases inside the institution. In addition, HSD has developed standardized templates for managing pandemic events, which are to be modified for local implementation. HSD also participates with the Office of Emergency Preparedness to develop mock exercises to test readiness and response levels to such events.

9. *Medical Contracting Initiatives*. The Business Practices Subcommittee of the HSD National Governing Board is working on the feasibility of national or regional contracting options for medical services for inmates at Residential Reentry Centers. If the committee determines this initiative benefits the agency as a cost-avoidance practice, procurement action will be initiated.

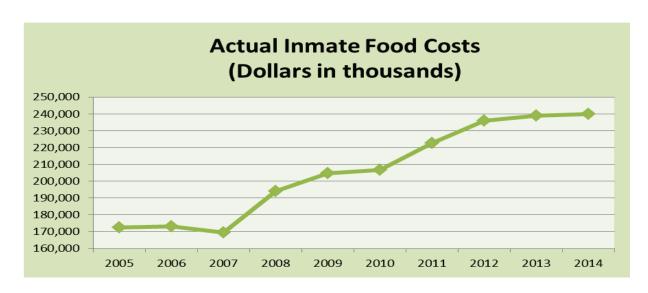
Food Service



The BOP provides daily meals with consideration to the Dietary Reference Intakes (DRIs) for groups published by the Food and Nutrition Board of the National Academy of Sciences, for identified macro and micronutrients. Meal preparation is accomplished primarily by inmate workers (about 12 percent of the population) under the supervision of staff. Food preparation and recipe and menu management are maintained by the use of a standardized national menu and a computerized Food Service management software system. USP Lompoc, CA, and

FCI El Reno, OK, utilizes available land resources in limited production of beef and milk. Farm products are consumed at the producing institutions and are also shipped to nearby institutions to offset their need to purchase some products on the open market. The Federal Prison Industries will operate these farms as of FY 2014.

During FY 2016, the BOP estimates it will serve approximately 170 million meals, which is nearly 466,560 meals per day and nearly 3.3 million meals per week. Despite cost-containment measures, the annual costs have risen due to the growing inmate population and inflationary factors. The following graph illustrates the increasing obligations for actual non-salary food cost.



Education and Occupational Training

Inmate education programs include literacy, English-as-a-Second Language (ESL), occupational education, advanced occupational education (AOE), parenting, release preparation courses, and a wide-range of adult continuing, wellness, and structured and unstructured leisure time activities. Education programming provides inmates with an opportunity to learn the functional skills that support their reintegration into the community. At the end of the FY 2014, 34 percent of the designated inmate population was enrolled in one of more education/recreation program. BOP's Office of Research² has found that participation in education programs leads to a 16 percent reduction in recidivism by inmates who participate in these programs.





With few exceptions (i.e., pretrial inmates and sentenced deportable aliens), the BOP requires inmates without a high school diploma or General Educational Development (GED) credential to enroll in a literacy program. This requirement affects approximately 35 to 40 percent of the total inmate population. Curriculums are designed to teach the knowledge and skills needed for inmates to progress from basic literacy through attainment of the GED credential. The

implementation of the Violent Crime Control and Law Enforcement Act (VCCLEA) and the Prison Litigation Reform Act (PLRA), mandates that inmates with needs must participate and make satisfactory progress in the literacy program to vest their good conduct time (VCCLEA), or be eligible to earn the full amount of good conduct time. Since the implementation of these acts in November 1997, the demand for literacy program instruction has increased. In FY 2014,

² Prison Education Program Participation and Recidivism: A Test of the Normalization Hypothesis (1995).

6,598 inmates attained the GED credential. The Crime Control Act of 1990 requires that non-English speaking federal prisoners participate in ESL until they function at the equivalence of the eighth grade level. Occupational and Advanced Occupational Education (AOE) programs serve to enhance inmates' post-GED skills during incarceration and increase the employment opportunities of offenders upon release, particularly those who either lack solid employment history or a marketable skill.

Parenting programs promote positive relationships and family values. Effective July 2014, all institutions are required to conduct a Children's Day event(s) each fiscal year. Release preparation courses familiarize inmates with current employer recruitment procedures and the expectations of potential employers. Offerings include pre-employment training for successful job interviews, resume preparation, filling out job applications, and mock job fairs.



Adult Continuing Education courses are designed for inmates who have a desire to "brush up" in a special area or enroll in a special programs addressing skill deficits (computer skills, English, mathematics, financial literacy, etc.). Wellness (nutrition, weight-loss, health fairs, etc.) and leisure programs reduce inmate idleness, promote healthy life styles, and encourage the development of positive leisure time skills.

In FY 2014, mock job fairs with representatives from local communities were conducted by education and institution staff at 112 institutions.



The BOP's Post Release Employment Study demonstrates that occupational training programs decrease recidivism. Studies show that inmates who participate in these programs are 33 percent less likely to recidivate³. Federal inmates can choose a vocation, through instruction, work experiences, and career orientation; acquire or improve productive work skills and habits; and gain practical knowledge essential to working and functioning in a complex industrial technical world of work.

Psychology Services

Psychology Services staff are an integral part of correctional treatment as they administer programs of group and individual psychotherapy, crisis intervention, pro-social skill building, and staff consultation and training. BOP policy requires that every inmate admitted to a BOP facility be given an initial psychological screening, which consists of a psychological interview, social history review, and behavioral observations. The purposes of the screening are to identify special treatment or referral needs; provide information useful in future crisis counseling

³ The Differential Effect of Industries and Vocational Training on Postrelease Outcomes for Ethnic and Racial Groups: Research Note. Corrections Management Quarterly, 5(4), 17-24. W. Saylor and G. Gaes (2001).

situations; identify strengths as well as potential adjustment problems to imprisonment; and discuss possible program needs with the inmates and provide information about these programs. In addition, BOP psychologists have traditionally provided the courts, parole officials, and prison administrators with comprehensive psychological evaluations of offenders.

Inmates with mental health needs are offered a range of evidence-based services, including crisis counseling, individual and group psychotherapy, clinical case management, psychiatric treatment, and specialized residential treatment programs. Acutely mentally ill inmates may receive these services within the BOP's Psychiatric Referral Centers. However, most mental health treatment is provided in regular institutions. In addition to the treatment of mental illnesses, Psychology Services provides specialized drug abuse treatment and sex offender treatment programs. BOP psychologists also offer treatment services designed to develop inmates' life skills, such as anger management, problem solving, and social skills training.

Drug Abuse Treatment

In response to the rapid growth of federal inmates with a diagnoses of a drug use disorder (40 percent of inmates entering the BOP), the BOP continues to develop evidence-based treatment practices to manage and treat drug-using offenders. The BOP's strategy includes early identification through a psychology screening, drug education, non-residential drug abuse treatment, intensive residential drug abuse treatment and community transition treatment.

The Violent Crime Control and Law Enforcement Act (VCCLEA) of 1994 requires the BOP, subject to the availability of appropriations, to provide appropriate substance abuse treatment for 100 percent of inmates who have a diagnosis for substance abuse or dependence and who volunteer for treatment. In FY 2014 the BOP was able to provide appropriate substance abuse treatment for 100 percent of eligible inmates (18,102).

Drug Program Screening and Assessment. Upon entry into a BOP facility, an inmate's records are assessed to determine if there is a history of drug use, a judicial recommendation for drug abuse treatment, a violation due to drug use, or if the instant offense is related to drug use. If so, the inmate is required to participate in the Drug Abuse Education course.

Drug Abuse Education. Participants in the Drug Abuse Education course receive factual information on the relationship between drug use and crime -- the impact the substance abuse has on the inmate psychologically, biologically and socially, while also motivating inmates to volunteer for the appropriate drug abuse treatment programs. In FY 2014 over 26,000 inmates participated in Drug Abuse Education.

Nonresidential Drug Abuse Treatment. Unlike residential programs, inmates are not housed together in a separate unit; they are housed with the general inmate population. Nonresidential treatment was designed to provide maximum flexibility to meet the needs of the offenders, particularly those individuals who have relatively minor or low-level substance abuse problems. These offenders do not require the intensive level of treatment needed by individuals with moderate to severe (substance abuse or dependence) diagnoses and behavioral problems.

A second purpose of the program is to provide those offenders who have a moderate to severe drug abuse problem with supportive program opportunities during the time they are waiting to

enter the RDAP, or for those who have little time remaining on their sentence and are preparing to return to the community. In FY 2014 more than 21,000 inmates participated in Nonresidential Drug Abuse Treatment.

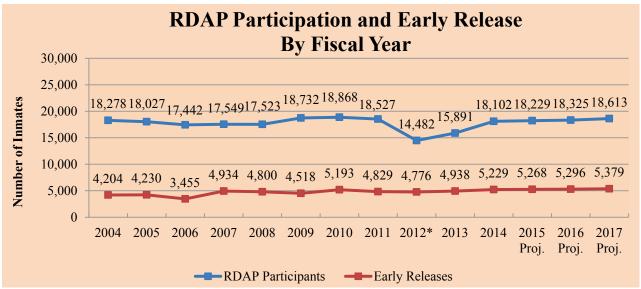
Residential Drug Abuse Treatment. More than half of the BOP's facilities operate the Residential Drug Abuse Program (RDAP). RDAP programs are located in a separate unit, away from the general population. The RDAP is based on Cognitive Behavioral Therapy (CBT), wrapped into a modified therapeutic community model of treatment. CBT and therapeutic communities are proven-effective treatment models with inmate populations. In FY 2014, over 18,000 inmates participated in Residential Drug Abuse Treatment.

In coordination with the National Institute on Drug Abuse, the BOP conducted a rigorous three year outcome study of the residential drug abuse treatment program beginning in 1991. The results indicated that male participants are 16 percent less likely to recidivate and 15 percent less likely to relapse than similarly situated inmates who did not participate in RDAP. Female inmates are found to be 18 percent less likely to recidivate than inmates who did not participate in treatment. In addition, female inmates had higher rates of success than male inmates in maintaining work, acquiring educational degrees, and caring for children.

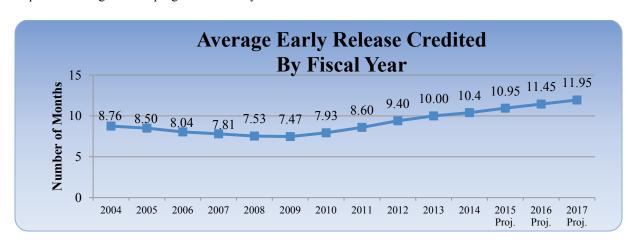
Nonresidential Follow-up Treatment If an inmate has time to serve in the institution after completing the RDAP, he or she must participate in "follow-up" treatment in the institution. Follow-up treatment ensures the inmate remains engaged in the recovery process and is held to the same level of behavior as when he or she was living in the treatment unit. This program reviews all the key concepts of the RDAP and lasts a minimum of one year.

Community Treatment Services (formerly Community Follow-up Treatment) The Community Treatment Services Program (CTS) is the premier reentry effort of the Psychology Services Branch. CTS was formerly known as Transitional Drug Abuse Treatment (TDAT). CTS provides a comprehensive network of over 250 contracted community-based treatment providers serving an average of over 12,000 inmates annually. This network of professionals consists of licensed individuals (e.g. certified addictions counselors, psychologists, psychiatrists, social workers, professional counselors, medical doctors, certified sex offender therapists, etc.) and specialized agencies resulting in a variety of services available in the community. In addition to providing drug treatment to Residential Drug Abuse Program participants, services expanded to include treatment for inmates with mental illness and sex offenders. Moreover, crisis intervention counseling for situational anxiety, depression, grief/loss, and adjustment issues is also available to inmates placed in Residential Reentry Centers (RRCs) or on home confinement.

The following charts show participation and early release information:



*Note: Residential Drug treatment – In FY 2012 the methodology used to calculate RDAP participants was recalculated, with significantly less potential for duplication. Thus, while this change resulted in the number of participants during FY 2012 being less than the target number, it is a preferred method to report inmate participation in RDAP. Additionally, in the last half of FY 2013, we phased in several new programs and expanded others. The impact of adding the new programs was fully realized in FY 2014.



Residential Drug Abuse Treatment Programs and Locations (89):

NORTHEAST REGION	FPC Lewisburg (PA)	USP Big Sandy (KY)
FCI Allenwood –L (PA)	FPC McKean (PA)	FCI Butner 1 (NC)
FCI Allenwood – M (PA)	FCI Schuylkill (PA)	FCI Butner 2 (NC)
FCI Berlin (NH)		FCI Cumberland (MD)
USP Canaan (PA)	MID-ATLANTIC	FPC Cumberland (MD)
FCI Danbury (CT)	<u>REGION</u>	SFF Hazelton (WV)
FCI Elkton (OH)	FPC Alderson 1 (WV)	FMC Lexington 1 (KY)
FCI Fairton (NJ)	FPC Alderson 2 (WV)	FMC Lexington 2 (KY)
FCI Fort Dix 1 (NJ)	FPC Beckley (WV)	FCI Memphis (TN)
FCI Fort Dix 2 (NJ)	FCI Beckley (WV)	FCI Morgantown 1 (WV)

FCI Morgantown 2 (WV) FCI Petersburg - M (VA) FCI Petersburg - L (VA)

SOUTHEAST REGION

FCI Coleman –L (FL)
USP Coleman II (FL)
FPC Edgefield (SC)
FSL Jesup (GA)
FCI Marianna (FL)
FCI Miami (FL)
FPC Miami (FL)
FPC Montgomery 1 (AL)
FPC Pensacola (FL)
FPC Talladega (AL)
FCI Tallahassee (FL)

NORTH CENTRAL REGION

FCI Yazoo City (MS)

FPC Duluth (MN) FCI Englewood (CO) FPC Florence (CO) FCI Florence (CO) FPC Greenville (IL) FCI Leavenworth (KS)
FPC Leavenworth (KS)
USP Marion (IL)
FCI Milan (MI)
FCI Oxford (WI)
FPC Pekin (IL)
FCI Sandstone (MN)
MCFP Springfield (MO)

FCI Terre Haute (IN) FCI Waseca (MN) FPC Yankton 1 (SD) FPC Yankton 2 (SD)

SOUTH CENTRAL REGION

FCI Bastrop (TX)
FPC Beaumont (TX)
FCI Beaumont – L (TX)
FCI Beaumont – M (TX)
USP Beaumont (TX)
FPC Bryan (TX)
FMC Carswell 1 (TX)
FMC Carswell 2 (TX)
FCI El Reno (OK)

FCI Fort Worth 1 (TX)

FCI Fort Worth 2 (TX)

FCI Forrest City (AR) FPC Forrest City (AR) FCI La Tuna (TX) FCI Seagoville 1 (TX) FCI Seagoville 2 (TX) FPC Texarkana (TX)

WESTERN REGION

FCI Dublin (CA)
FPC Dublin (CA)
FCI Herlong, (CA)
FPC Lompoc (CA)
FCI Phoenix (AZ)
FPC Phoenix (AZ)
FCI Safford (AZ)
FCI Sheridan (OR)
FPC Sheridan 1 (OR)
FPC Sheridan 2 (OR)
FCI Terminal Island 1
(CA)
FCI Terminal Island 2
(CA)

Contract Facility
Rivers CI (NC)

Additional Residential Psychology Treatment Programs

All residential psychology treatment programs utilize empirically supported interventions, including cognitive-behavioral techniques delivered in a modified therapeutic community environment. These programs have been demonstrated to significantly reduce misconduct among program participants.

The BRAVE Program. The BOP Rehabilitation and Values Enhancement (BRAVE) Program,

a program for young offenders serving lengthy sentences, addresses institutional adjustment, antisocial attitudes and behaviors, and motivation to change.

Currently BRAVE programs are located at FCI Beckley and FCI Victorville - Medium.

The Challenge Program. The Challenge Program is a residential cognitive-behavioral treatment program for high security inmates with a history of substance abuse and/or mental illness. Inmates may participate in the program at

CHALLENGE PROGRAM LOCATIONS

- USP ALLENWOOD, PA
- USP ATWATER, CA
- USP BEAUMONT, TX
- USP BIG SANDY, KY
- USP CANAAN, PA
- USP COLEMAN I, FL
- USP COLEMAN II, FL
- USP HAZELTON, WV
- USP LEE, VA
- USP MCCREARY, KY
- USP POLLOCK, LA
- USP TERRE HAUTE, IN
- USP TUCSON, AZ

any point during their sentence; however, they must have at least 18 months remaining on their sentence. The duration of the program varies based on inmate need, with a minimum duration of nine months. Challenge Programs are located at 13 BOP penitentiaries.

Mental Health Treatment Programs. The BOP offers a series of specialized mental health treatment programs dedicated to the management and treatment of inmates with serious mental illnesses. Specifically, these programs are designed to reduce psychological symptoms, improve functioning, facilitate institutional adjustment, reduce incidents of misconduct, reduce the need for psychiatric hospitalization, and increase reentry success. These programs provide intensive, evidence-based mental health services utilizing a cognitive-behavioral treatment model.

- **Mental Health Step Down Units**. Mental Health Step Down Units provide intensive treatment for inmates releasing from psychiatric hospitalization and may also function to intervene before an inmate requires hospitalization. These residential programs are located at FCI Butner (males) and USP Atlanta (males).
- **The Skills Program**. The Skills Program is designed for inmates with significant cognitive limitations and psychological difficulties that create adaptive problems in prison and in the community. These residential programs are located at FCI Coleman (males) and FCI Danbury (males).
- The STAGES Program. The Steps Toward Awareness, Growth, and Emotional Strength Program is designed to treat male inmates who have a diagnosis of Borderline Personality Disorder and have a history of behavioral problems and/or self-harm. These residential programs are located at FCI Terre Haute (males) and USP Florence (males).
- The Resolve Program. The Resolve Program is a non-residential trauma treatment program for inmates. The program was originally developed to address the needs of female inmates with trauma-related mental illnesses, e.g., post-traumatic stress disorder. The program was expanded this year to serve male inmates as well. This program is located in 14 of the BOP's female institutions and in 2 male institutions FCI Danbury and ADX Florence.

Sex Offender Management Program. The BOP's psychology staff also provide Sex Offender Management Programs (SOMPs) for sex offenders during confinement. SOMP is a multi-component program that includes the Sex Offender Treatment Program (SOTP), assessment, specialized correctional management, and population management.

The BOP's sex offender treatment programs are stratified into two program levels: the high-intensity Residential (SOTP-R) and the moderate intensity Non-Residential Sex Offender Treatment Programs (SOTP-NR).

- The **Residential Sex Offender Treatment Program** (SOTP-R) is a high intensity program designed for high risk sexual offenders (ordinarily, inmates with multiple sex offenses, or a history of contact sexual offenses). The SOTP-R is offered FMC Devens and USP Marion.
- The **Non-residential Sex Offender Treatment Program** (SOTP-NR) is a moderate intensity program designed for low to moderate risk sexual offenders. Many of the inmates in the SOTP-NR are first-time offenders serving a sentence for an internet sex

crime. All SOMP institutions offer the SOTP-NR. SOTP-NR is available at 8 male institutions and 1 female institution.

• **Community Treatment Services** Inmates completing the SOTP-NR and the SOTP-R are expected to participate in community treatment services (if they receive community placement).

To date, 790 inmates have completed a Sex Offender Treatment Program. 509 are currently participating in treatment, and 2,302 are awaiting placement in treatment.

Commitment and Treatment Program (CTP): The Adam Walsh Child Protection and Safety Act requires the BOP, Sex Offender Certification Review Branch, to review releasing sex offenders for possible certification as sexually dangerous persons. The BOP has designated FCI Butner as the facility where certified, post-sentence persons and civilly committed sex offenders will be transferred for treatment. Presently, there are 35 civilly committed sex offenders in the CTP, of these 23 are participating in the treatment program.

Religious Services

Chaplains

The BOP employs full-time Chaplains in all institutions to accommodate the constitutional right to the free exercise of religion, manage religious programs, and provide pastoral care to inmates and staff. Chaplains routinely evaluate the needs of inmates in the institution and facilitate programs which address those needs. Religious Services departments offer programs directly related to spiritual development, community reentry, family relationships, personal responsibility, and basic religious instruction. Chaplains provide spiritual programs across the spectrum of faiths represented in the inmate population. Chaplains also train and familiarize staff regarding diverse religious beliefs and practices of inmates, while providing guidance for institution compliance with the First Amendment and legal standard established by the Religious Freedom Restoration Act, and the Second Chance Act of 2007. The passage of the Second Chance Act of 2007 ushered in the opportunity to utilize mentors to assist in the reentry efforts of ex-offenders back to the community. Currently, 23 Mentor Coordinator positions have been allocated at Life Connections and Threshold Program sites to develop and expand the mentoring components of the programs.

Religious Volunteers and Contractors

Volunteers and contractors participate with Chaplains in providing support to the many faith-based programs authorized to meet. Prior to any service rendered, religious volunteers and contractors have credentials verified and are screened through a national volunteer/contractor database to enhance institutional security. All religious volunteers and contractors are monitored consistent with their security clearance.

Religious Diet

A religious diet program is available in the BOP. The religious diet program offers religiously certified foods for those whose religious dietary needs necessitate a certification, or a no-flesh component, which allows inmates to self-select from foods to meet their religious dietary needs.

Life Connections and Threshold Programs

The Life Connections and Threshold Programs offer inmate participants the opportunity to improve critical areas of their life within the context of their personal faith or value system. Both programs are open to inmates of all faith persuasions, including those who do not claim a religious preference, and who meet the participation criteria. Currently, under the review process, policy has been developed to provide guidance on the programs, including the utilization of mentors.

Life Connections

In response to the President's government-wide Faith Based and Community Initiative, the BOP established the Life Connections Program (LCP), a multi-faith residential reentry program, in FY 2002. As of November 24, 2014, there were 2,217 inmates who have successfully completed the program and 444 inmates actively participating in the program. The LCP provides opportunities for the development of the participating inmates' faith commitment, with a goal of providing the necessary life skills and tools for successful reentry. The LCP consists of a multi-phase program which instills values and character through a curriculum of personal, social and moral development. Two phases of mentoring--incarceration and post-incarceration--are also provided to the LCP inmates.

In support of the Second Chance Act and as of November 24, 2014, the LCP has integrated 2,845 community/faith-based mentors and organizations into mentoring relationships with inmates in the program to assist and empower successful reentry into the community. The program has been implemented in institutions of various security levels and regions throughout the BOP. The program is being carried out in partnership with a broad spectrum of faith-based contractors, volunteers and community organizations.

Threshold

Reentry preparation for inmates not eligible for the residential LCP is offered through the Threshold program. Threshold is a non-residential spiritual and values-based program taught by Chaplains and volunteers over a six to nine month time period. This program is designed to strengthen inmate's institutional adjustment and community reentry efforts. Currently, eighty institutions are offering Threshold in FY 2014. The Life Connections and Threshold Reentry training course at the National Corrections Academy is held on an annual basis for Chaplains, Religious Services staff and Mentor Coordinators.

Volunteer Services

The National Reentry Affairs Branch in the Reentry Services Division has oversight for the BOP's volunteer program. Reentry Affairs Coordinators manage volunteer services at their local institution, including: local recruitment, clearance and security compliance, training, file management, and recognition of volunteers. Volunteers provide an array of services – from one-on-one intensive mentoring and structured program and service delivery to transition support in the institutions, RRC's, and into the post-release phase. During FY 2014, over 11,696 volunteers provided services at BOP facilities.

2. Performance and Resource Tables

				PERI	ORMAN	ICE AND RE	SOURCES	S TABLE				
Decision Unit	: Inmate Care a	and Programs										
RESOURCES				Target	Α	ctual	Pro	jected	Cha	anges	Requested (Tota	
			F	Y 2014	FY	2014	FY	2015	Current Services Adjustments and FY 2016 Program Changes		FY 2016 Request	
Total Costs an	nd FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
			37,172	6,769,000	36,500	6,769,000	37,172	6,815,000	755	389,158	37,927	7,204,158
TYPE	STRATEGIC OBJECTIVE	PERFORMANCE	F	Y 2014	FY	′ 2014	FY	⁷ 2015	Current Services Adjustments and FY 2016 Program Changes		FY 2016 Request	
Program Activity	3.3	Inmate Care and Programs	FTE 12,727	\$000 2,525,039	FTE 12,516	\$000 2,525,039	FTE 12,727	\$000 2,563,000	FTE 172	\$000 179,755	FTE 12,899	\$000 2,742,755
Performance Measure	3.3	# of Inmates Completing Literacy Program		6,580	6	5,598	6	,712	131		6,843	
Performance Measure	3.4	# of Inmates Participating in the Residential Drug Abuse Treatment Program	,	16,812	1	8,102	18,229 96		96	18,325		

Data Definition: Currently, the Literacy Program measure identifies the number of inmates receiving a certificate for completing the General Educational Development (GED) program. The GED Tests measure high school level skills and knowledge. The GED credential is the most widely accepted high school equivalency credential. The Residential Drug Abuse Program (RDAP) measure is the projected number of BOP inmates who participated in the RDAP within the Fiscal Year.

Data Collection and Storage: Institution education staffs verify and record inmates' high school or General Educational Development (GED) attainment in the SENTRY Education Data System when inmates enter BOP custody, or when they pass the GED Tests and obtain a high school equivalency credential. GED completion data is provided by the GED Testing Service, American Council on Education. GED completion information is posted in the BOP's internal Website (intranet) monthly and all agency personnel have access to the information. Data is collected/entered into the BOP's SENTRY data system and the Bureau Electronic Medical Record (BEMR). Data is collected/entered primarily by Case Managers, Drug Abuse Treatment Specialists and Drug Abuse Treatment Coordinators in the institutions. SENTRY data tracks the inmate's status in RDAP. BEMR tracks the inmate's clinical progress, including: treatment plans; 60 day treatment reviews; group contacts; individual contacts; treatment summaries, etc. Current and historical data uploads from SENTRY are provided monthly. (Although weekly data is available for current participants, it is necessary to use the monthly files to match the historical data). A Statistical Analysis Software (SAS) program was written to identify the number of offenders in BOP custody who were identified in SENTRY as DAP PART (Drug Abuse Program Participation) or DAP PART D (Drug Abuse Program Participation Dually Diagnosed – Mental Illness and Drug Abuse) or DAP PART S (Drug Abuse Program Participation Spanish – Non-English speaking US Citizens) assignments for the current Fiscal Year. Both SENTRY and BEMR are stored electronically. Signed documents are inserted in the inmate's Central File.

Data Validation and Verification: Completion numbers are monitored by field education staff via monthly GED statistical reports posted on the agency's intranet. Validation is conducted by the Drug Abuse Program Coordinator through regular treatment meetings, supervision and inmate file and data reviews. Data Verification is conducted through SENTRY data which are monitored by Central Office and the Regional Offices no less than monthly. Also verification is done through routine review of BEMR records in the course of daily activities of inmate documentation related to the RDAP. Examples of reviews conducted include, but are not limited to: programs are operating as intended; participant status and progress are documented appropriately; BEMR documentation meets the clinical standard as outlined by policy and training; inmates are interviewed for RDAP appropriately; and to ensure all inmates qualified for the RDAP are receiving the RDAP before their release from BOP custody.

Data Limitations: Due to the unpredictable environment in prisons, uncertain funding, and other external factors, there may be discrepancies between projected and actual numbers. Most plans are developed based on historical data, past experience and joint agency efforts to project for the future.

			PERFORMA	NCE MEAS	SURE TABL	.E				
	Decision Unit: Inma	ate Care and Programs								
Otwata wia	Perfor	FY 2010	FY 2010 FY 2011 FY 2012 F		FY 2013	FY 2013 FY 2		FY 2015	FY 2016	
Strategic Objective	i renomiance rian raideis		Actual	Actual	Actual	Actual	Target	Actual	Target	Target
3.3	Performance Measure	Increase the # of Inmates Completing Literacy Program	6,014	6,580	5,902	6,991	6,580	6,598	6,712	6,843
3.4	Performance Measure	# of Inmates Participating in the Residential Drug Abuse Program	18,868	18,527	14,482	15,891	16,812	18,102	18,229	18,325

3. Performance, Resources, and Strategies

The Inmate Care and Programs decision unit contributes directly to the Department's Strategic Goal 3: Ensure and Support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Within this Goal, the decision unit's resources specifically address the Department's Strategic Objectives 3.3: Provide safe, secure, humane, and cost effective confinement and transportation of federal detainees and inmates; and 3.4: Reform and strengthen America's criminal justice system by targeting the most serious offenses for federal prosecution, expanding the use of diversion programs, and aiding inmates in reentering society.

a. Performance Plan and Report for Outcomes

Number of Inmates Completing Literacy Program: Currently, this measure identifies the number of inmates receiving a certificate for completing the General Educational Development (GED) program. The GED tests measure high school level skills and knowledge. The GED credential is the most widely accepted high school equivalency credential. It offers adults, who did not complete traditional high school, an improved opportunity to pursue education and career opportunities before released to the community.

Alternative literacy programs, aimed at better serving inmates with unique educational needs, will be implemented in the future. Completions for these alternative programs will be incorporated into the literacy performance measure. BOP exceeded its target in FY 2014 with 6,598 GED completions. For FY 2015 and FY 2016, targets are 6,712 and 6,843 respectively. In January 2014, a new version of the GED tests was released. The 2014 version of the GED tests has modified content, and the delivery method changed from paper-based to computer-based. The BOP is currently in Phase II of the conversion project. The BOP will convert GED testing to the computer-based testing at the next 20 sites. Until the entire agency is able to convert all institutions from paper-based to computer-based, the BOP will continue to use the 2002 series (paper-based) GED Tests in calendar year 2015. Training (for staff and inmates) on the content changes and the computer-based delivery method will continue in FY 2015.

As part of converting paper-based GED testing to computer-based testing, each BOP institution will be provided with a variety of resource materials. A national contract for a standardized digital GED/literacy curriculum was awarded in FY 2014. Central Office Computer Services and Education Staff are working with the vendor to test the software in the "i-Connect" system. The tentative target date for agency-wide deployment of the curriculum software is April 2015.

In November 2014, each Education Department received an initial shipment of student workbooks/handbooks that mirror the digital GED/literacy curriculum. The vendor also provided training on the new GED 2014 tests in November 2014. Six more training events (4 related to GED competencies and instruction - 2 related to utilizing the digital course software) will be offered by the vendor in 2015.

In September 2013, the BOP awarded a contract and developed training titled, "2014 GED Teacher Development Training." This training focuses on the content changes of the GED tests, computer-based testing environment, and the four subtests of the new GED tests. All Supervisors of Education and literacy instructors will be provided with a DVD version of the above referenced training so they can have an individualized training piece at their workstations.

Number of Inmates Participating in the Residential Drug Abuse Treatment Program (RDAP): In FY 2014, the number of inmates participating in RDAP was 18,102. The fiscal year results were 1,290 more than projected. The RDAP target was exceeded due to the full implementation of the FY 2013/2014 program expansion. The expansion consisted of 18 additional RDAPs, including an additional dual diagnosis program, four high security RDAPs, and two Spanish speaking RDAPs. The new RDAPs were "phased in" over a nine month period and for this reason, the full impact of the program expansion was not realized until June 2014, when the new programs reached full capacity. The resources received in the previous budgets were essential to the expansion of drug treatment capacity. These expansions have provided critical support to reach BOP's goal of providing 12 months sentence credits to all eligible inmates. The target for FY 2015 is 18,229 and for FY 2016, BOP is projecting 18,325 inmates will participate in the RDAP.

b. Strategies to Accomplish Outcomes

The BOP continues to develop innovative reentry programs through the consolidated leadership and oversight provided by the Reentry Services Division (RSD). These programs focus efforts on evidence based programs that use cost-efficient treatment plans, and are proven to increase individuals' likelihood of making a successful transition back to the community.

Reentry programs will continue to emphasize the following key elements:

- triaging inmate programming based on identified risk factors;
- displaying relevant information for staff to easily understand and use in managing and treating inmates;
- ensuring we have sufficient, appropriate, and effective programs; and
- sharing inmates' progress and final risk assessments to ensure successful transition to the community.

The BOP will continue to provide productive work, education, occupational training, and recreational activities that have a clear correctional management purpose to minimize inmate idleness, while preparing inmates for employment opportunities and a successful reintegration upon release. The BOP will develop and provide programs to address inmates' identified needs and target inmates with the highest risk of recidivating.

The agency's strategy includes a strong component of partnership building with community organizations, state, local, and other federal agencies. The partnerships provide inmates with an increased level of continuity of care, as well as access to resources to assist with housing, employment, and medical and mental health care.

Drug Abuse Treatment

The Violent Crime Control and Law Enforcement Act (VCCLEA) of 1994 requires the BOP, subject to the availability of appropriations, to provide appropriate substance abuse treatment for 100 percent of inmates who have a diagnosis for substance abuse or dependence and who volunteer for treatment.

In response to the rapid growth of federal inmates with a diagnoses of a drug use disorder (40 percent of inmates entering the BOP), the BOP continues to develop evidence based treatment

practices to manage and treat drug-using offenders. The BOP's strategy includes early identification through a psychology screening, drug education, non-residential drug abuse treatment, intensive residential drug abuse treatment and community transition treatment, as discussed earlier.

c. Priority Goals

N/A

B. Institution Security and Administration

Institution Security and Administration	Direct	Estimate	Amount
	Pos.	FTE	
2014 Enacted	25,738	23,191	2,966,364
2015 Enacted	25,738	23,191	2,993,000
Adjustments to Base and Technical Adjustments	0	220	83,998
2016 Current Services	25,738	23,411	3,076,998
2016 Program Increases	11	363	32,645
2016 Request	25,749	23,774	3,109,643
Total Change 2015-2016	11	583	116,643

1. PROGRAM DESCRIPTION: Institution Security and Administration

This budget activity covers costs associated with Institution Security and Administration, Institution

Maintenance, and Institution Staff Training. All institutions are assigned a security classification level based in part on the physical design of each facility. There are four security levels: minimum, low, medium, and high. Additionally, there is an administrative category for institutions that house a variety of specialized populations such as pretrial, medical, mental health, and sex offenders. Based on BOP research, female offenders generally do not require the same degree of security as male offenders. Therefore, a modified classification system is used for female inmates. Females may also be placed in state and local facilities.



Each inmate is tracked through BOP's SENTRY Information System. Offenders are assigned a security and custody status, which relates to the degree of supervision needed and ensures that offenders are placed in the least restrictive and least costly correctional environment appropriate to their custody and security level needs. The result is a grouping of offenders with similar custodial needs in an institution, and a relative reduction in the mixing of aggressive and non-aggressive offenders.

Within each institution, Correctional Officers are assigned to security posts that are primarily established on the basis of structural/visual considerations. The two basic categories of security are external security and internal security. External security consists of a walled or fenced perimeter supplemented by staffed security towers and/or armed mobile perimeter patrols. There is also razor wire strung between a double fence with high mast lighting to illuminate the perimeter, and highly technical equipment such as alarm systems, and video surveillance. Entrances through the perimeter are controlled by a series of gates, electrical and manual, supplemented by metal detection systems and search procedures for weapon and contraband control. BOP has fully incorporated Closed Circuit Television technology in its higher security facilities, which has enhanced supervision and provides valuable intelligence in the management of federal inmates. For practical purposes, all other security measures, processes, and activities can be called internal security, commencing when an inmate is admitted and terminating upon his or her release.

Staff supervise inmates in living units, work areas, visiting areas, dining halls, and any other area where inmates may be located or have access. Regularly scheduled counts are conducted several

times a day (five on weekdays, six on weekends) in all institutions to monitor the whereabouts of inmates. Work supervisors and program personnel are held strictly accountable for all inmates under their supervision.

Violations of institution regulations are dealt with through the Inmate Disciplinary Process. Correctional staff members conduct investigations of the alleged misconduct and forward the findings to the Unit Discipline Committee. Depending on the seriousness of the charge, the Unit Discipline Committee will make a finding, or refer the report to the Discipline Hearing Officer for disposition. When practical, inmates are afforded the opportunity to participate in, and present evidence at a due process hearing before findings are made. Inmates may appeal these decisions utilizing the administrative remedy process.

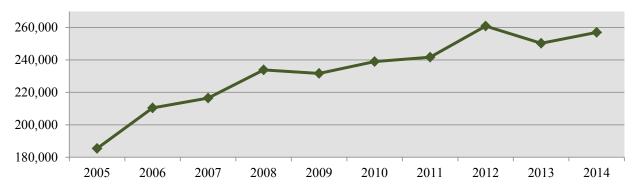
Investigative staff members continue to gather and share a wide variety of intelligence information and products with other law enforcement entities. Staff members are routinely forwarding counter terrorism intelligence data and referrals to the National Joint Terrorism Task Force; local Joint Terrorism Task Force(s); Federal Bureau of Investigation (FBI) Counterterrorism Division; and Central Intelligence Agency liaison personnel. Additionally, a significant amount of data regarding inmate financial transactions, telephone calls, and correspondence is being made available to law enforcement entities through the Department of Justice's Law Enforcement Information Sharing Program (LEISP).

The Administrative Segregation program provides for the separation of inmates who require closer supervision and monitoring from those in the general population. Such cases include, but are not limited to, protective custody, serious escape risks, threats to the security and orderly running of the institution. The Disciplinary Segregation program provides for segregation of offenders who have been found guilty of violations of rules through the Inmate Disciplinary Process.

The Facility Maintenance program is designed to adequately maintain and continue to safely operate the physical plants of BOP institutions. Facilities vary in age from those recently constructed to those 100 or more years old. Thirty-six of the BOP facilities are over 50 years old. As of January, 2015, BOP facilities are situated on 46 thousand acres of land and contain approximately 59 million square feet of floor area, all of which must be maintained and furnished with utility services. Each institution maintains communication systems including complete private automatic branch exchange telephone systems, radio systems including base station and mobile units, and several electronic detection and control systems.

Complex heating and air conditioning systems, high pressure steam power plants, sophisticated hospital equipment, emergency electrical power systems and fire protection, and life safety systems all require regular maintenance. The following graph illustrates the obligations for actual non-salary utility costs, with about \$257 million incurred in FY 2014.

Actual Utility Costs (Dollars in thousands)



Physical plant requirements are identified through regular inspections conducted in the on-going preventive maintenance program, formal semi-annual inspections, and requests for specific needs identified by institution staff members. This program finances maintenance and minor improvement projects which normally cost \$10,000 or less. However, there are policy guidelines that allow funding of maintenance projects (work requests) costing more than \$10,000 in certain circumstances. Some exceptions would include emergencies or security threats such as hurricanes or disturbances. Maintenance and repair requirements in excess of \$10,000 are normally included in the "Modernization and Repair" program of the Buildings and Facilities budget.

The work within the maintenance program is accomplished almost entirely by inmate crews under staff supervision. Each work crew consists of a staff foreman and 10 to 20 inmates. Each institution must have highly skilled staff with experience and training in every phase of construction and maintenance work including steam fitting, air conditioning, mechanics and/or electronics repair. A few specific jobs are contracted out because special skills or equipment items are required, or because the work may be extremely dangerous. Examples of these jobs include elevator inspection and repair, radio frequency alignment, and water tower painting.

The Staff Training Academy (STA) at the Federal Law Enforcement Training Center (FLETC) Glynco, Georgia, provides introductory and advanced correctional training for BOP law enforcement staff. The Introduction to Correctional Techniques (ICT) program is a five-week program for a total of 184 hours of instruction that is taught in two phases. Phase I consists of two-weeks of training at the institution and Phase II consists of a three-week training program at the STA.

The STA oversees the curriculum development and administration of the three week (104 hours) ICT Phase II course. ICT, Phase II consists of 76 hours of program instruction that covers correctional supervision principles, national policy guidelines, interpersonal communication skills, offender characteristics, principles of diversity and inclusion, legal issues, self-defense techniques, hostage situations, ethics, special offenders, inmate discipline, practical exercises, physical abilities testing, and 28 hours of firearms training and certification with three different weapons. Successful completion of this program (academics, firearms, and the Physical Abilities Test) is required for continued employment of newly hired staff entering into law enforcement positions. In FY 2014, 2,450 new employees participated in 48 classes of the ICT program.

The STA provides advanced correctional skills training for trainers in disturbance control, firearms, bus operations, self-defense, lead baton-marksman/observer, tactical leadership, and witness security escort. The STA also provides training for trainers in CPR/AED.

The Management and Specialty Training Center (MSTC) in Aurora, Colorado, provides senior level training courses, Distance Learning programs and audio visual support for the BOP. The training offered at the MSTC is competency-based, providing participants the opportunity to progressively develop leadership skills and specialty competencies. A wide range of courses are available for institution Executive Staff, Department Heads, Supervisors, and Technical Support Staff. These courses include training for Correctional Services, Correctional Programs, Food Service, Finance, Human Resources, Education, Drug Treatment, Psychology, Religious Services, Trust Fund, and many other training specialties. In addition to preparing staff for position specific responsibilities, the MSTC also provides training in collateral responsibilities such as: Hostage Negotiations, Discipline Hearing Officer, and EEO Counselor among others. All classes are evaluated for effectiveness, and an analytical review of participant performance is conducted through a critique of pre/post test scores or performance-based evaluations.

The MSTC (part of the National Corrections Academy along with the National Institute of Corrections) serves as host to large scale training events for most BOP disciplines as well as a focal point for collaboration in training development and delivery with other DOJ agencies. In late FY 2013, the BOP's Museum was moved to the National Corrections Academy, under the direction of the MSTC, to increase its availability to approximately 10,000 state, local, and federal correctional professionals that come to the NCA/MSTC annually.

To maximize the use of training funds, the MSTC provides several alternatives to residential courses that include staff assist visits, off-site instruction, Distance Learning programs via web-based courses on BOP-Learn, Centra sessions, videoconferencing, and satellite broadcasts. eZ.exam, a computer based testing system, is used to administer testing, Institution Character Profiles, staff surveys, and custom reporting which provides regional and institutional staff with efficiencies to evaluate instruction, analyze detail reports, and obtain real-time data that can be used to improve processes and training. With the addition of various new technologies, the MSTC has improved capabilities in audiovisual services, video on demand, versatile classroom configurations, high-definition videoconferencing, and state-of-the-art classroom technologies.

The Human Resource Service Center (HRSC) located in Grand Prairie, Texas, is comprised of four components: Consolidated Processing Unit (CPU), Consolidated Benefits Unit (CBU), the Consolidated Staffing Unit (CSU) and the Security Background Investigation Section (SBIS).

- The Consolidated Benefits Unit (CBU) is responsible for processing applications for retirements (voluntary, mandatory, and disability); Federal service career deposits/redeposits; military deposits; projected annuity calculations for retirement planning; and verifying each employee's creditable service date. The CBU also provides advice on a wide variety of benefits to include health insurance, life insurance, long term health care, flexible spending accounts, and the Thrift Savings Plan.
- The Consolidated Processing Unit (CPU) processes payroll and personnel transactions; sets pay; receives and processes court orders; maintains electronic Official Personnel Files (eOPF), performance, and payroll files; responds to inquiries from Human Resources

Offices, staff, and third parties regarding payroll/personnel transactions, personnel documents, and files; and is the BOP's primary liaison with the Department of Justice, National Finance Center, and auditors on matters related payroll/personnel processing and time and attendance. The CPU oversees and provides guidance for the time and attendance program. Time and attendance for the BOP is complicated due to institutions employing both general schedule and wage schedule employees and having various shifts providing 24 hour coverage. Many of the shifts include pay for night differential and Sunday premium pay. In addition, the CPU maintains approximately 40,000 eOPFs as a result of the Office of Personnel Management (OPM) e-Government initiative Enterprise Human Resource Integration (EHRI).

- The Consolidated Staffing Unit (CSU) develops and operates a nationwide staffing program for processing job applications; manages a nationwide Delegated Examining certification program to assist field locations in staffing their positions by providing timely services to job applicants and all BOP facilities; and maintains responsibility for processing and announcing all merit promotion vacancy announcements. An Internet-based application processing and referral system (BOP-Careers) has been implemented which allows applicants to apply for positions online under merit promotion or Delegated Examining competitive examinations. The CSU is operating a nationwide staffing program (BOP-Hires) for processing job applications for the following professions: Correctional Officer, Clinical Psychologist, Registered Nurse, Nurse Practitioner, Physician Assistant, Medical Officer, and Dental Officer.
- The Security Background Investigation Section (SBIS) serves as the BOP's Personnel Security office receiving background investigations from OPM. Background investigations are initiated on all new staff at the hiring location, conducted by OPM, and then sent to SBIS for adjudication. In addition to receipt of investigations, SBIS initiates all required five year re-investigations for current employees. The SBIS is also responsible for policy requirements in pre-employment procedures and contractor security.

2. Performance and Resource Tables

PERFORMANCE AND RESOUCES TABLE

RESOURCES			Т	arget	,	Actual	P	rojected	Ch	anges	Request	ted (Total)	
			FY	2014	F	Y 2014	ı	FY 2015	Adjustmen	t Services ts and FY 2016 n Changes	FY 2016	Request	
Total Costs an	d FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	
			37,172	6,769,000	36,500	6,769,000	37,172	6,815,000	755	389,158	37,927	7,204,158	
TYPE	STRATEGIC OBJECTIVE	PERFORMANCE	F	′ 2014	F	Y 2014	'	Adjustments and FY		Current Services Adjustments and FY 2016 Program Changes		FY 2016 Request	
Program Activity	3.3	Institution Security and Administration	FTE 23,191	\$000 2,966,364	FTE 22,682	\$000 2,966,364	FTE 23,191	\$000 2,993,000	FTE 583	\$000 116,643	FTE 23,774	\$000 3,109,643	
Performance Measure	3.3	Rate of serious assaults in Federal Prisons (Rate/5,000)*		13	,	7		12		0		12	
Performance Measure	3.3	% of staff on-board at BOP Inst.		90		90		90		0	Ç	90	
Performance Measure	3.3	Medium & high security crowding		d = 40% n = 43%		ed = 39% gh = 52%		ed = 36% gh = 45%		d = 0% i = -14%		= 36% = 31%	
Outcome	3.3	Escapes from Secure Institutions		0		0		0 0			0		
Outcome	3.3	System-wide Crowding		33%		30%		24%	,	-9%	1	5%	

^{*}Due to the time required to adjudicate allegations of assaults, there is a lag between the occurrence and reporting guilty findings. Therefore, the figures reported represent incidents that were reported for the preceding twelve months ending several months before the end of the FY. Beginning with the FY 2007 data, data focused on the rate of serious assaults (inmate on inmate per 5,000), which is a more meaningful safety indicator for BOP facilities.

Data Definition: Reported assault rate is based on guilty findings of serious assaults. Serious assaults involve serious physical injury being attempted or carried out by an inmate, as well as armed assaults on the institution's secure perimeter. The crowding levels are based on a mathematical ratio of the number of inmates divided by the rated capacity of the institutions at each of the specific security levels. The percent of crowding represents the rate of crowding that is over rated capacity. For example, if an institution had a number of inmates that equaled the rated capacity, this would represent 100% occupancy, which equals 0% crowding. Any occupancy above 100% represents a percentage of crowding. System-wide: represents all inmates in BOP facilities and all rated capacity, including secure and non-secure facilities, low, medium, and high security levels, as well as administrative maximum, detention, medical, holdover, and other special housing unit categories. Medium security facilities: strengthened perimeters, mostly cell-type housing, work and treatment programs and a lower inmate-to-staff ratio than low security facilities. High security facilities: also known as U.S. Penitentiaries, highly secure perimeters, multiple and single cell housing, lowest inmate-to-staff ratio, close control of inmate movement. All BOP institutions are assigned a security classification level based in part on the physical design of each facility. Additionally, there is an administrative category for institutions that house a variety of specialized populations such as pre-trial, medical, mental health, and sex offenders. Low, medium, and high security levels and administrative institutions are defined as "secure," based on increased security features and type of offenders designated.

Data Collection and Storage: Data for the rate of serious assaults is collected from the BOP's operational computer system (SENTRY), specifically the Chronological Disciplinary Record (CDR) module, which records all disciplinary measures taken with respect to individual inmates. This data is maintained and stored in the BOP's management information system (Key Indicators and the Institution Management Dashboard), which permits retrieval of data in an aggregated manner. The data represents guilty findings of serious assaults on inmates. Data for the escape measure are taken from the Significant Incident Reports submitted by the institution where the incident occurred. This has become an automated process, which went nationwide in August of 2009, known as the TruIntel system. The data is captured in data sets and made available to the Office of Research and Evaluation, which analyzes the data and makes the escape information available through the Management Analysis Portal, specifically the Institution Management Dashboard. Data are gathered from several computer systems. Inmate data are collected on the BOP on-line system (SENTRY). The BOP also utilizes a population forecast model to plan for future contracting and construction requirements to meet capacity needs.

Data Validation and Verification: The most senior managers in the agency conduct annual reviews of institution performance including assaults and other misconduct. Additionally, during Program Reviews (which are conducted at least every three years), annual operational reviews, and Institution Character Profiles (which are conducted every three years), reviews of assaults and other misconduct patterns are accomplished. The SENTRY system is the BOP's operational data system, whereas Key Indicators aggregates the SENTRY data and provides an historical perspective. Subject matter experts review and analyze population and capacity levels daily, both overall and by security level. BOP institutions print a SENTRY report, which provides the count of inmates within every institution cell house. The report further subdivides the cell houses into counting groups, based on the layout of the institution. Using this report, institution staff conduct an official inmate count five times per day to confirm the inmate count within SENTRY. The BOP Capacity Planning Committee (CPC), comprised of top BOP officials, meets quarterly to review, verify, and update population projections and capacity needs for the BOP. Offender data are collected regularly from the Administrative Office of the U.S. Courts by the BOP Office of Research and Evaluation in order to project population trends. The CPC reconciles bed space needs and crowding trends to ensure that all available prison space is fully utilized, both in federal prison and in contract care. The most senior managers in the agency conduct annual reviews of institution performance including escapes. Additionally, during Program Reviews (which are conducted at least every three years), annual operational reviews, and Institution Character Profiles (which are conducted every three years), reviews of escapes (including attempts) are conducted, along with other inmate misconduct.

Data Limitations: The data represents the number of guilty findings for assaults over a twelve-month period per 5,000 inmates. Due to the time required to adjudicate allegations of assault, there is a lag between the occurrence of the assault and reporting of guilty findings. Due to accelerated reporting requirements (within 15 days of quarter and fiscal year end) and to provide a more accurate assault rate, the BOP is using 12 months of completed/adjudicated CDR data for each quarter and end of fiscal year reporting, showing 12 month periods ending the last month of the previous quarter. Due to the unpredictable environment in prisons and other external factors, there may be discrepancies between projected and actual numbers contained in the performance tables. Most plans are developed based on historical data, past experience and joint agency efforts to project for the future. In addition, budget delays and shortfalls also affect performance results.

		PE	RFORMAN	CE MEASU	RE TABLE					
	Decision Unit: Institu	tion Security and Administration	1		1					
		ormance Report and ormance Plan Targets	FY 2010	FY 2011	FY 2012	FY 2013	FY 2	2014	FY 2015	FY 2016
Strategic Objective	renc	milance rian raigets	Actual	Actual	Actual	Actual	Target	Actual	Target	Target
3.3	Performance Measure	Rate of serious assaults in Federal Prisons (Rate /5,000)	13/5,000	10/5,000	12/5,000	9/5,000	13/5,000	7/5,000	12/5,000	12/5,000
3.3		Increase the % of staff on-board at BOP institutions to facilitate programming and maintain safety and security	90%	89.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
3.3	Performance Measure	Manage medium & high security crowding to assess needs for additional staff and beds		M=51% / H=55%	M=47% / H = 51%					M= 36% / H= 31%
3.3	OUTCOME Measure	Escapes from Secure Institutions	0	0	0	2	0	0	0	0
3.3	OUTCOME Measure	System-wide Crowding	37%	39%	38%	36%	33%	30%	24%	15%

3. Performance, Resources, and Strategies

The Institution Security and Administration decision unit contributes directly to the Department's Strategic Goal 3: Ensure and Support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Within this Goal, the decision unit's resources specifically address the Department's Strategic Objectives 3.3: Provide safe, secure, humane, and cost effective confinement and transportation of federal detainees and inmates.

a. Performance Plan and Report for Outcomes

<u>Escapes from Secure Institutions:</u> As illustrated in the preceding Performance and Resource Table, the outcome measure for the Institution Security and Administration decision unit is "Escapes from Secure Institutions." In FY 2014, the BOP had zero escapes and the performance targets for FY 2015 and FY 2016 will remain at zero.

Rate of Serious Assaults in Federal Prisons: Every reasonable precaution is taken to ensure that inmates are provided with a safe and secure environment in facilities according to their needs. While it is the objective of the Department and BOP to eliminate all serious assaults, the target reflects projections based on historical data and observed trends. These data represent the number of serious assaults over a 12-month period per 5,000 inmates. Due to the time required to adjudicate allegations of assault, there is a lag between the occurrence and reporting guilty findings. Accordingly, the figure reported represents incidents that were reported for the preceding 12 months ending several months before the end of the fiscal year. BOP exceeded its target for FY 2014 with 7/5,000 serious assaults. Targets will decrease to 12/5,000 for FY 2015 and FY 2016.

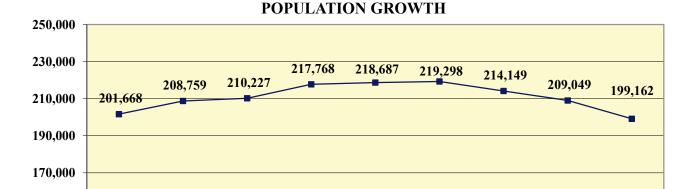
Percentage of Staff On-board at BOP Institutions: This measure provides the percentage of staff on-board compared to the number of positions at BOP facilities. Managing the crowded federal prison population is particularly challenging at the high security level as more than half of the inmates in this population have sentences in excess of 12 years. Moreover, 85 percent of high security inmates have been sanctioned for violating prison rules, and 89 percent of high security inmates have a history of violence. One out of every four inmates at high security institutions is affiliated with a gang. Targets reflect funding available for staffing to operate prisons and do not represent optimal staffing levels. For FY 2014, BOP's actual percentage of staff on-board at BOP's facilities was 90 percent. BOP's targets for FY 2015 and FY 2016 will remain at 90 percent.

Medium and High Security Crowding Conditions: BOP facilities remain overcrowded, which research demonstrates leads to increase serious assaults. The focus with this measure is to manage overcrowding in prisons and ensure inmate care and safety, as well as the safety of BOP staff and surrounding communities. System-wide crowding is a percentage derived from dividing the number of inmates by the rated capacity (beds) of BOP facilities. Targets reflect planned beds associated with anticipated base funding levels and don't represent BOP goals.

BOP's medium and high security crowding level targets for FY 2015 and FY 2016 are:

Medium Security Targets	High Security Targets
FY 2014 – 39 percent (Actual) FY 2015 – 36 percent	FY 2014 – 52 percent (Actual) FY 2015 – 45 percent
FY 2016 – 36 percent	FY 2016 – 31 percent

Prison Crowding has been identified as a Federal Managers Financial Integrity Act (FMFIA) material weakness, and is reported as such in the DOJ's FY 2014 Agency Financial Report (AFR). The OIG Report on Top Management and Performance Challenges Facing the Department of Justice – 2014, lists "Addressing the Persisting Crisis in the Federal Prison System" as one of the top challenges facing the Department of Justice.



Notes on Population Data:

2008

150,000

The chart above includes actual population for FY 2008 through FY 2014 and projected population numbers for FY 2015 and FY 2016. The population projections are based on data and information from a variety of sources including the Administrative Office of the U.S. Courts, the U.S. Sentencing Commission, other DOJ components, and the BOP's own information system (SENTRY).

2012

2013

2014

2015

2016

2011

b. Strategies to Accomplish Outcomes

2009

2010

The BOP will continue to explore opportunities to add capacity efficiently and cost-effectively through expansions of existing facilities, the acquisition and conversion of military and other properties to prison use, utilization of contract facilities, as funding permits. Through the ongoing maintenance program (Modernization and Repair), the BOP maintains the infrastructure of federal prisons and protect taxpayer dollars. The BOP will continue to monitor staffing ratios, inmate misconduct, and schedule regular American Correctional Association accreditation/reaccreditation for its facilities. The BOP will strive to increase staffing to maintain safety as funding permits.

As a strategy to try to effectively manage the inmate population, the BOP continues to identify cost effective approaches to alleviate overcrowding, as explained above and through possible changes in legislation.

c. Priority Goals

N/A

C. Contract Confinement

Contract Confinement	Direct	Estimate	Amount
	Pos.	FTE	
2014 Enacted	413	247	1,074,808
2015 Enacted	413	247	1,054,000
Adjustments to Base and Technical Adjustments	0	0	825
2016 Current Services	413	247	1,054,825
2016 Program Increases	0	0	98,924
2016 Program Decreases	0	0	-11,000
2016 Request	413	247	1,142,749
Total Change 2015-2016	0	0	88,749

1. PROGRAM DESCRIPTION: Contract Confinement

This budget activity covers costs associated with BOP inmates in contract care, costs associated with management, and oversight of contract confinement functions (and for the National Institute of Corrections). Currently 19.4 percent of the BOP inmate population is housed outside of BOP facilities in alternative confinement. This includes private prisons, Residential Reentry Centers (RRCs or halfway houses), state and local facilities, and home confinement. In 2013, the Residential Reentry Management (RRM) Branch implemented a management consolidation from six regions to three sectors. The RRM Branch now provides management oversight to all sector management teams that in turn provide oversight to the 25 RRM field office locations throughout the nation.

The following chart provides estimated funding (dollars in thousands) amounts for key programs funded in Contract Confinement decision unit:

Program Area	FY 2012	FY 2013	FY 2014
	Actual	Actual	Actual
Private Prisons	\$640,121	\$634,838	\$639,222
Residential Reentry Centers	\$309,838	\$320,867	\$368,493

RRM staff oversee contracted community-based confinement facilities nationwide, as well as provide case management services for inmates and perform liaison activities with the U.S. Marshals Service (USMS), U.S. Probation Office, U.S. Parole Commission (USPC), Federal Courts, other federal agencies, state and local government agencies.

Since January 1982, the number of inmates managed in contract RRCs has increased from a daily population of 1,425 to a daily population of over 9,879 as of November 17, 2014. Approximately 246 RRCs throughout the nation provide services to federal offenders, all of whom are preparing for their release to the community. These inmates are transferred from federal institutions to RRCs near the end of their sentence for transitional programming. Life skills, gainful employment, the reestablishment of family ties, and drug treatment are major aspects of transitional programs. Home confinement is the last phase of incarceration for offenders who have demonstrated personal responsibility and positive programming while in BOP custody. Strict accountability procedures are required for inmates on home confinement to continue the sanction of the sentence.

Since the mid-1980s, the BOP has contracted for the confinement of sentenced offenders in secure facilities. This gives the BOP the needed flexibility to manage a rapidly growing inmate population

and to help control crowding. Growth is particularly significant among the BOP's low security level populations. The BOP has found that contract confinement is particularly suited to low and minimum security offenders. The majority of inmates in BOP contract facilities are low security, sentenced criminal aliens. The BOP has committed to contracting out these inmates, and continues to increase its use of secure contract facilities as a means of handling inmate crowding.

As the number of contract beds increases, the BOP remains vigilant and continues to monitor, evaluate, and make appropriate changes to the management and oversight of contracts. The oversight and administration of these facilities are centralized, which ensures consistent, cost effective contract administration procedures across various regions and for different types of contracts.

Through the Privatization Management Branch (PMB), the BOP oversees the operation of secure contract facilities. Contracts are with private companies for facility operations. Staff from the PMB ensure that contractors adhere to established performance standards and facilitate communications between contract facilities and the BOP. The BOP is the largest user of secure contract confinement among all correctional jurisdictions in the country, with more than 26,800 inmates in 14 privately managed secure facilities. Additionally, over 14,000 inmates are in RRCs, home detention, short-term detention, juvenile facilities, or long-term boarders that are also privately operated.

Several categories of federal offenders (including inmates who are under probation or supervised release but need more intensive services and/or programs than can be provided under probation) are confined in smaller numbers in state, local, and private facilities. There are approximately 67 juveniles who must be separated from adult offenders and are placed as close to their respective residence as possible in state, local, and privately run community-based and secure facilities. Adult offenders whose lives might be endangered in federal facilities (protection cases) are placed in state correctional facilities. Offenders whose short sentences preclude transfer to a federal facility are placed in local jails to serve their sentences.

Approximately 25 percent of the BOP inmate population are non-U.S. citizens. The BOP, ICE, and the Executive Office for Immigration Review (EOIR) work together to facilitate the Enhanced Institution Removal Programs (IRPs), first implemented in 1997. Eighteen institutions and contract facilities provide either TeleVideo capabilities or courtroom and office space for ICE and EOIR staff to process and complete deportation decisions. The expansion of TeleVideo is progressing within the privatized contract facilities. The goal of the IRP is to complete removal proceedings for non-U.S. citizen inmates while serving their sentence, thus allowing ICE to remove them from the U.S. immediately upon release from BOP custody. As a result, ICE can minimize the number of non-U.S. citizen inmates detained after expiration of their sentence, and the BOP can manage its inmate population more efficiently by anticipating the needs of inmates who have a current order of deportation.

Following are Central Office functions for: Residential Reentry Management Branch; Privatization Management Branch; and the National Institute of Corrections.

The Residential Reentry Management Branch (RRM) is responsible for the general program and policy development for the BOP's network of approximately 246 contract residential reentry centers, as well as monitoring of the contractual requirements. RRM field office staff also review approximately 50,000 referrals for RRC placement each year and monitor each placement until the offender is released from BOP custody. RRM also work with the contracting branch to offer

technical assistance in the acquisition process for RRC services. The three branch sector management teams provide technical assistance to the BOP's 25 RRM offices in the areas of contract oversight, case management and inmate systems management. Responsibility for the BOP's network of contract confinement facilities for federal juvenile offenders also rests with the RRM.

In addition, RRM maintains the Memorandum of Understanding (MOU) with the U.S. Marshals Service and the Administrative Office of the U.S. Courts; and administers the MOU with the DC Department of Corrections regarding DC code violations.

The Privatization Management Branch (PMB) has overall responsibility for the administration of privately-operated secure adult correctional facility contracts. The BOP has been contracting with the private sector to help manage its inmate population throughout its more than 75 year history. Contracting with the private sector provides the BOP with much needed flexibility in managing its inmate population. Contract facilities can be activated relatively quickly or contracts can be cancelled in response to shifting population pressures.

The PMB coordinates the BOP's efforts in managing a growing population of more than 28,000 inmates located in contractor operated secure correctional facilities. Staff from this branch oversee the management and operation of facilities, develop new requirements; establish policy and procedures; develop and manage contract budgets; and serve as liaisons between the contractors and the BOP and other members of the federal family.

National Institute of Corrections (NIC)

Also included in this decision unit is the National Institute of Corrections, a federal entity that is authorized by statute 18 USC 4351, to provide training, technical assistance, and information services to federal, state, and local correctional agencies-including the BOP. NIC provides technical assistance either by sending a technical resource provider and/or staff to the requesting agency, or an individual or team of individuals from the requesting system visits another agency to gain expertise and experience in the specific area of concern. In FY 2014, NIC delivered 113 technical assistance training events for 761 participants from federal, state, and local justice agencies.

The NIC is also responsible for the National Corrections Academy (NCA), which serves as the training division that provides training and related services for federal, state, and local correctional practitioners. By developing and delivering training to prisons, jails and community corrections practitioners, the Academy enhances interaction among correctional agencies, other components of the criminal justice system, public policymakers, and public and private stakeholder organizations, thus improving correctional programming throughout the country. In FY 2014, the NIC:

- provided distance, traditional classroom and virtual instructor-led training to more than 6,000 corrections professionals:
- held four (4) satellite broadcasts and satellite training programs, with over 17,500 participants nationwide; and
- had 30,000 corrections professionals complete e-Learning courses through the NIC Learning Center.

The NIC also provides corrections leaders and staff with information to improve and support their operations. The NIC Information Center is the dedicated information science and collections arm of

the agency. It includes the Robert J. Kutak Memorial Library located at the NCA and the NIC website at www.nicic.gov. The Center manages nearly 18,000 corrections and relevant management resources. These resources were accessed by corrections practitioners over 800,000 times in FY 2014.

Further, the NIC was directed by Congress to conduct studies on subjects such as sexual abuse of inmates, state prison health care, location of alien detention facilities (i.e., Southwest Border), and Prison Rape Prevention under the Prison Rape Elimination Act. The NIC receives some reimbursement from other agencies for training and technical assistance, and works with the Office of Justice Programs, the Department of Health and Human Services, the National Institute of Justice, the Bureau of Justice Assistance, the Bureau of Justice Statistics and the Office of Juvenile Justice and Delinquency Prevention and other agencies to ensure that federal monies are maximized in state and local corrections settings.

2. Performance and Resource Tables

				PERFORM	ANCE A	ND RESOUF	RCES TA	ABLE								
Decision Ur	nit: Contract Co	nfinement														
RESOURCE	ES .		Т	arget	Actual		Actual Projected		Projected Changes		Changes		Changes		Requested (
			FY 2014		F	Adjustments and		Adjustments and FY 2016				6 Request				
Total Costs	and FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000				
			37,172	6,769,000	36,500	6,769,000	37,172	6,815,000	755	389,158	37,927	7,204,158				
TYPE	STRATEGIC OBJECTIVE	PERFORMANCE	F	Y 2014	FY 2014		FY 2014 FY 2015 Current Services Adjustments and FY 20 Program Changes		and FY 2016	FY 201	6 Request					
Program Activity	3.3	Contract Confinement	FTE 247	\$000 1.074.808	FTE 304	\$000 1.074.808	FTE 247	\$000 1,054,000	FTE	\$000 88 740	FTE 247	\$000 1,142,749				
Workload Measure	3.3	#/% of Contract Beds		00 / 19%		07 / 19%		37 / 20%	0 88,749 1,205/2%		43,642 / 22%					

Data Definition: The BOP utilizes privately operated facilities, bed space secured through Intergovernmental Agreements with state and local entities, and community based housing such as Residential Reentry Centers (RRCs or halfway houses) and home confinement.

Data Collection and Storage: Data are gathered from several computer systems. Inmate data are collected on the BOP on-line system (SENTRY). The BOP also utilizes a population forecast model to plan for future contracting and construction requirements to meet capacity needs.

Data Validation and Verification: Subject matter experts review and analyze population and capacity levels daily, both overall and by security level. BOP institutions print a SENTRY report, which provides the count of inmates within every institution cell house. The report further subdivides the cell houses into counting groups, based on the layout of the institution. Using this report, institution staff conduct an official inmate count five times per day to confirm the inmate count within SENTRY. The BOP Capacity Planning Committee (CPC), comprised of top BOP officials, meets quarterly to review, verify and update population projections and capacity needs for the BOP. Offender data are collected regularly from the Administrative Office of the U.S. Courts by the BOP Office of Research and Evaluation in order to project population trends. The CPC reconciles bed space needs and crowding trends to ensure that all available prison space is fully utilized, both in federal prisons and in contract care.

Data Limitations: None known at this time.

		PE	RFORMAN	CE MEASU	RE TABLE							
	Decision Unit: Contra	Decision Unit: Contract Confinement										
	Performance Repo	ort and Performance Plan Targets	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014		FY 2015	FY 2016		
Strategic Objective		Actual	Actual	Actual	Actual	Target	Actual	Target	Target			
3.3	Workload Measure	#/% of Contract Beds	36,938 / 18%	39,834/ 18%	41,131 / 19%	42,449/ 19%	42,000/ 19%	41,907/ 19%	· '	43,642/ 22%		

3. Performance, Resources, and Strategies

The Contract Confinement decision unit contributes directly to the Department's Strategic Goal 3: Ensure and Support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Within this Goal, the decision unit's resources specifically address the Department's Strategic Objectives 3.3: Provide safe, secure, humane, and cost effective confinement and transportation of federal detainees and inmates.

a. Performance Plan and Report for Outcomes

BOP ended FY 2014 with 41,907 beds for contract capacity, which is 19.6 percent. BOP's most recent capacity plan projects 42,437 for FY 2015 and 43,642 for FY 2016.

b. Strategies to Accomplish Outcomes

Since the current federal inmate population continues to exceed the rated capacity of BOP facilities and current contracts, every possible action is being taken to manage institutional crowding and to ensure that federal inmates continue to serve their sentences in a safe and humane environment.

As a strategy to manage the inmate population, the BOP continues to identify cost effective approaches to alleviate overcrowding, such as acquiring and renovating existing institutions, changes through legislation, and to add bed space via contracts and activations of new prisons, as funding permits, and working towards reducing recidivism through reentry efforts. In addition, the BOP will continue to work toward reducing crowding at all security levels.

c. Priority Goals

N/A

D. Management and Administration

Management and Administration	Direct	Estimate	Amount
	Pos.	FTE	
2014 Enacted	1,233	1,007	202,789
2015 Enacted	1,233	1,007	205,000
Adjustments to Base and Technical Adjustments	0	0	4,011
2016 Current Services	1,233	1,007	209,011
2016 Program Increases	0	0	0
2016 Request	1,233	1,007	209,011
Total Change 2015-2016	0	0	4,011

1. PROGRAM DESCRIPTION: Management and Administration

This budget activity covers costs associated with general administration and provides funding including oversight functions of the executive staff and regional and central office program managers in the areas of: budget development and execution; financial management; procurement and property management; human resource management; inmate systems management; safety; legal counsel; research and evaluation and systems support.

The BOP is managed from a Central Office in Washington, D.C., where the Director, Deputy Director, Assistant Directors, and Assistant Director/General Counsel guide the agency's headquarters functions, and the six regional offices, each of which is led by a Regional Director. The Executive Staff, which includes the Director, Deputy Director, Assistant Directors, and Regional Directors, meet once per quarter to review all major issues and determine policy for the BOP. The management staff at each institution, including Wardens, Associate Wardens, Executive Assistants, Camp Administrators, and Jail Administrators, provide overall direction and implement policies. Staff training is provided on site at each institution, central office, regional offices, and training centers; and through external training provided by the Office of Personnel Management, National Institute of Corrections, other federal agencies, colleges/universities, and private agencies. The BOP sets and enforces high standards of training for personal and professional conduct in its workforce.

Central Office and Other Functions:

The Executive Staff is comprised of the Director, Deputy Director, six Regional Directors, and nine Program Assistant Directors and the Director of NIC in the central office and serve as the policy and decision makers for the BOP, with a span of control across the entire agency. They meet regularly in person and via videoconference and teleconference to establish and update strategic plans, goals and objectives, and to assess achievement and redirect strategies as appropriate and consistent with the President's Management Agenda and the DOJ Strategic Plan. The Executive Staff oversees BOP's resources; guides BOP's staffing, training and management development program; sets inmate and capacity standards; and develops and approves budget initiatives and operating plans.



^{*}Not funded by Management and Administration Program Activity Budget

Administration Division

The Administration Division provides the resources and support necessary for the BOP to perform in an effective and efficient manner. This includes the development of budget requests, the stewardship of financial resources, and procurement and property management; the coordination and analysis of information related to capacity planning which covers such varied areas as female offenders, detention needs, and the need for medical facilities; the selection of sites for new prison construction; the design and construction of new correctional facilities; the renovation and maintenance of existing facilities; the development and maintenance of a system of financial systems/services to ensure accountability of inmate commissary funds and the management of merchandise/services to inmates; and other administrative support services required by the organization.

Branches in the Administration Division include:

- > Budget Development
- ➤ Budget Execution
- Capacity Planning and Construction
- > Facilities Management
- > Finance
- > Procurement Executive
- > Trust Fund

Correctional Programs Division

The Correctional Programs Division (CPD) develops activities and programs designed to appropriately classify inmates, eliminate inmate idleness, and promote the skills necessary to facilitate the successful reintegration of inmates into their communities upon release. Staff are responsible for planning, documenting, monitoring, and providing the delivery of services to inmates such as case management, the agency's Victim and Witness Notification Program and the collection of court-ordered obligations through the Inmate Financial Responsibility Program. The CPD also provides national policy direction and daily operational oversight of institution correctional services; intelligence gathering; the management of inmates placed in the Federal Witness Security Program; inmate transportation; receiving and discharge, inmate sentence computations, and the processing of inmate mail; emergency preparedness; inmate discipline; and the coordination of the treaty transfer of inmates to other countries. The Division also has responsibilities for a variety of functions in the areas liaison activities with Immigration Customs Enforcement and the U.S. Marshals Service, and secure privatized prisons. CPD staff are responsible for direct oversight of field staff who monitor contract compliance and coordinate the BOP's privatization management efforts.

Branches in the Correctional Programs Division include:

- Correctional Services
- ➤ Intelligence and Counter Terrorism
- Correctional Programs
- > Designation and Sentence Computation
- > Sex Offender Certification Review
- > Privatization Management

Health Services Division

The Health Services Division has three primary missions relating to its concerns and responsibilities in medical care, safety and environmental health, and food services:

The health care mission of the BOP is to deliver medically necessary health care to inmates effectively in accordance with proven standards of care without compromising public safety concerns inherent to the BOP's overall mission.

The occupational safety and environmental health mission of the BOP is to provide a safe and healthful environment in which staff and inmates can work and live.

The food service mission of the BOP is to provide healthy, nutritionally-sound, and appetizing meals that meet the needs of the general population and those at nutritional risk.

Branches in the Health Services Division Include:

- Chief Dentist
- Chief Nurse
- Chief Pharmacist
- Chief Psychiatrist
- Chief Social Worker
- ➤ Chief Therapist
- Drug-Free Workplace
- Financial Management

- ➤ Food Service
- > Health Informatics
- ➤ Health Programs
- ➤ Health Services
- > Infectious Disease
- ➤ MAST
- Medical Designations &
 - Transportation Transportation
- ➤ MSP Advisory Board

- Occupational & Employee Health
- Quality Management
- Safety & Environmental Compliance
- > Staffing & Recruitment

Human Resource Management Division

The Human Resource Management Division oversees and administers personnel policy and programs developed to address the needs of BOP employees covering all areas of personnel management. The Human Resource Management Division is a valued essential component of our organizational success, meeting the human resource and developmental needs of the BOP and all its employees. The BOP embraces the human element of our business and invests in the developmental needs of all employees.

Branches in the Human Resource Management Division include:

- ➤ Human Resources Office for Central Office Employees
- ➤ Human Resource Services Center
- ➤ Labor Relations Office
- ➤ Learning and Career Development
- > Personnel and Staff Development

Information, Policy and Public Affairs Division

The Information, Policy and Public Affairs Division is committed to furthering the mission of the BOP by collecting, developing, and disseminating useful, accurate, and timely information to BOP staff, DOJ, Congress, other government agencies, and the public.

Branches in the Information, Policy and Public Affairs Division include:

- ➤ Advanced Systems
- Computer Services Administration and User Support
- > IT Planning and Development
- ➤ Legislative Affairs
- ➤ National Network Communications
- National Policy and Information Management
- > Network Management
- > Office of Public Affairs
- > Office of Research and Evaluation
- > Security Technology
- > Systems Development

Office of General Counsel

The Office of General Counsel provides legal advice, assistance, and representation to BOP officials in the areas of Correctional Law, Commercial Law, Real Estate and Environmental Law, Inmate Civil and Criminal Litigation, Inmate Remedies, Administrative Claims, Employment Law and Ethics, Freedom of Information and Privacy Acts, Administrative Rulemaking, and legislation affecting the BOP.

Branches in the Office of General Counsel include:

- > Commercial Law
- > Employment Law
- > Ethics
- ➤ Legal Administrative
- ➤ Legislative Correctional Issues Litigation
- > Real Estate & Environmental Law

Program Review Division

The Program Review Division is responsible for analyzing BOP programs and guiding BOP managers in the assessment of their operations. The division assists management in the strategic planning process, coordinates and monitors oversight activities of audit and regulatory authorities, and ensures effective management and operational procedures exist throughout the BOP. Additionally, the division's chief executive officer serves as the BOP's Affirmative Employment Programs Director and EEO Director.

Branches in the Program Review Division include:

- ➤ Affirmative Employment Programs Branch
- ➤ EEO Office
- > External Auditing Branch
- > Planning and Analysis Branch
- Program Review

2. Performance and Resource Tables

PERFORMANCE AND RESOURCE TABLE

Decision Unit: Management and Administration												
RESOURCES	Target		Actual		Projected		Changes		Requested (Total)			
			FY 2014		FY 2014		FY 2015		Current Services Adjustments and FY 2016 Program Changes		FY 2016 Request	
Total Costs and FTE			FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
			37,172	6,769,000	36,500	6,769,000	37,172	6,815,000	755	389,158	37,927	7,204,158
TYPE	STRATEGIC OBJECTIVE	PERFORMANCE	FY	2014	FÝ 2014		FY 2015		Current Services Adjustments and FY 2016 Program Changes		FY 2016 Request	
Program Activity	3.3	Management and Administration	FTE 1,007	\$000 202,789	FTE 998	\$000 202,789	FTE 1,007	\$000 205,000	FTE 0	\$000 4,011	FTE 1,007	\$000 209,011
Performance Measure	3.3	Facilities accredited: ACA	99%		99%		99%		Ó		99%	

Data Definition: Initial American Correctional Association (ACA) is awarded when an institution demonstrates 100% compliance with mandatory ACA standards, and substantial compliance with non-mandatory ACA standards. The BOP's policy requires all institutions, except for newly activated institutions, to maintain ACA Accreditation.

Data Collection and Storage: Once an audit is completed, an electronic report is received from ACA. These reports are maintained in GroupWise shared folders by institutions, and in WordPerfect files.

Data Validation and Verification: On an annual basis, Program Review personnel develop a schedule for initial accreditation and re-accreditation of all eligible BOP facilities to ensure reviews are conducted on a regular and consistent basis. BOP policy requires institutions to initially be ACA accredited within two years of activation. Therefore, non-accredited institutions that have been activated for less than two years are excluded from calculations regarding this performance measure.

Subject matter experts review report findings to verify accuracy and develop any necessary corrective measures. The ACA accreditation meeting minutes, identifying the institutions receiving accreditation and reaccreditation, are now on file and maintained by the BOP Accreditation Manager.

Data Limitations: None known at this time.

	PERFORMANCE MEASURE TABLE												
	Decision Unit: Mana	agement and Administration											
Performance Report and				FY 2011	FY 2012	FY 2013	FY 2	2014	FY 2015	FY 201			
Strategic Objective	Performance Plan Targets		Actual	Actual	Actual	Actual	Target	Actual	Target	Target			
3.3	Performance Measure	Facilities accredited: ACA	99%	100%	99%	98%	99%	99%	99%	99			

3. Performance, Resources, and Strategies

The Management and Administration decision unit contributes directly to the Department's Strategic Goal 3: Ensure and Support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Within this Goal, the decision unit's resources specifically address the Department's Strategic Objectives 3.3: Provide safe, secure, humane, and cost effective confinement and transportation of federal detainees and inmates.

a. Performance Plan and Report for Outcomes

For FY 2015 and FY 2016 the targets will remain 99 percent for ACA accreditation.

b. Strategies to Accomplish Outcomes

The BOP will continue to monitor staffing ratios, inmate crowding, inmate misconduct, schedule regular accreditation/re-accreditation for its facilities, and strive to increase staffing and bedspace to maintain safety and security, consistent with funding.

c. Priority Goals

N/A

V. Program Increases by Item

Item Name: Convert FCI Fort Worth to Medical Referral Center

(MRC)

Strategic Goal: Goal 3
Strategic Objective: 3.3

Budget Decision Unit(s): Inmate Care & Programs and Institution Security &

Administration

Organizational Program: Inmate Care and Institution Security

Program Increase: Positions 72 Correctional Officers 10 FTEs 36 Dollars \$4,741,000

Description of Item

The BOP is requesting funds to convert FCI Fort Worth to a Medical Referral Center (MRC) that houses and treats severely ill inmates who require inpatient management and/or intensive monitoring. Specifically, the proposal converts 36 beds for chronic inpatient and end-of-life care inmates; 51 beds for the level 3 mental health step down unit inmates, and 36 beds for inpatient forensic inmates. The remainder of the population will normally be inmates who require at least quarterly clinician evaluations, but generally require frequent clinical contacts (daily to monthly).

Support of the Department's Strategic Goals

This enhancement is in direct support of the following DOJ Strategic Goal and Objective: Goal 3, Ensure and support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Strategic Objective 3.3, Provide safe, secure, humane, and cost-effective confinement and transportation of federal detainees and inmates.

<u>Justification</u>

The BOP's need for inpatient treatment beds has grown by 67% since 2003. As of March 29, 2014, 3,424 inmates were designated to six existing Medical Referral Centers (MCFP Springfield, FMC Butner, FMC Rochester, FMC Lexington, FMC Devens and FMC Carswell) for management of medical and/or mental health needs. Currently, there is not enough MRC bed space to meet the needs of all inmates who require such care. Inmates awaiting transfer to MRCs present significant challenges for the BOP: institution staff struggle to manage severely ill inmates and the delay often results in costly community hospitalizations as inmates' medical or mental health conditions deteriorate.

The pronounced need for inpatient beds is based on several factors. Population growth and lengthy sentence terms have resulted in an aging inmate population. As a result, the BOP must increasingly care for inmates with serious diseases such as cancer and diabetes etc. The proposal

for conversion of FCI Fort Worth to a medical center comes at an opportune time to meet the growing demand for inpatient bed capacity, especially given the suitability of the Fort Worth infrastructure (e.g., existing nurse call system and supplemental oxygen delivery system).

Step Down Unit

Step Down Programs operate as modified therapeutic communities and utilize cognitive behavioral treatments, cognitive rehabilitation, and skills training. They offer an intermediate level of care for inmates with serious mental illness who do not require inpatient treatment, but lack the skills to function in a general population prison. The programs work closely with psychiatrists to ensure participants receive appropriate medication and have the opportunity to build a positive relationship with the psychiatrist. The goal of Step Down Programs is to provide evidence based treatment to inmates with mental illness in order to maximize their ability to function and minimize relapse and the need for inpatient hospitalization.

Formalized mental health Step Down programs have demonstrated efficacy in providing modified therapeutic communities that utilize cognitive behavioral treatments, cognitive rehabilitation, and skills training. These programs have reduced the use of SHU for alternative housing and the need for putting inmates on suicide watch. The value of Step Down programs is more evident as the number of inmates with mental health assignments increases.

Inpatient Forensic Unit

The demand for inpatient forensic beds (beds for determining mental competency of an inmate) has reached a critical level as the wait time for admission to an inpatient forensic bed, currently averages six to nine weeks. Special Housing has increasingly become the primary housing choice for these inmates pending transfer to a MRC because these inmates frequently become mentally unstable and unsuitable for general population housing.

Converting FCI Fort Worth to a MRC, expanding MRC's medical mission, since it already has some medical beds and creating a Mental Health Step Down Unit and an Inpatient Forensic Unit is timely and necessary to manage inmates having severe medical and mental health needs.

Impact on Performance

BOP will internally track the following metrics:

- ➤ Increase opportunities for mental health inmates to create a community that supports prosocial attitudes and behaviors in an environment where they are less likely to be victimized by other inmates.
- > Reduce the amount of time inmates spend in the Special Housing Unit (SHU) and on suicide watch.
- ➤ Increase the collaboration between psychology services and psychiatric services in the care of inmates.
- ➤ Reduce the number of incident reports involving inmates.

Funding

Base Funding

FY 2014	4 Enacted	d		FY 2015 Enacted				FY 2016 Current Services				
Pos	COs	FTE	\$(000)	Pos	Pos COs FTE \$(000)			Pos	COs	FTE	\$(000)	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

Personnel Increase Cost Summary

Type of Position/Series	Modular Cost per Position (\$000)	Number of Positions Requested	FY 2016 Request (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Corr Institution Administration (006)	184	1	92	92
Correctional Officers (007)	83.6	10	418	418
Other Misc. Occupations (001-099)	132	1	66	66
Soc. Science, Econ. and Kindred (100-199)	130.8	8	523	523
General Admin clerical and office services (300-399)	76	1	38	38
Medical, Dental & Public Health (600-799)	107	50	2,676	2,676
Ungraded (culinary, farm, mechanical & construction)	132	1	66	66
Total Personnel		72	3,879	3,879

Non-Personnel Increase/Reduction Cost Summary

Non-Personnel Item	Unit Cost	Quantity	FY 2016 Request (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Training	4,058	72	292	(219)
Background/pay.svcs	3,415	72	246	(184)
Supplies and Materials	500	72	36	0
Equipment	4,000	72	288	(230)
Total Non-Personnel			862	(633)

Total Request for this Item

	Pos	COs	FTE	Personnel (\$000)	Non- Personnel (\$000)	Total (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Current Services	0	0	0	0	0	0	0
Increases	72	10	36	3,879	862	4,741	3,246
Grand Total	72	10	36	3,879	862	4,741	3,246

Item Name: <u>Increase Unit Officer Staff at High Security Institutions</u>

Strategic Goal: Goal 3
Strategic Objective: 3.3

Budget Decision Unit(s): <u>Institution Security & Administration</u>

Organizational Program: Institution Security

Program Increase: Positions <u>0</u> Correctional Officers <u>0</u> FTEs <u>357</u> Dollars <u>\$32,003,000</u>

Description of Item

The BOP is requesting funding to increase staffing levels in FY 2016 at existing high security institutions. Prior to FY 2013, there was only one correctional officer assigned to each housing unit on all three shifts at high security facilities. This program initiative would fund one additional correctional officer per each high security housing unit for all three shifts.

Support of the Department's Strategic Goals

This enhancement is in direct support of the following DOJ Strategic Goal and Objective: Goal 3, Ensure and support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Strategic Objective 3.3, Provide safe, secure, humane, and cost-effective confinement and transportation of federal detainees and inmates.

Justification

In FY 2013, the BOP suffered a tragic loss of a staff member. On February 25, 2013, Officer Eric Williams, a Correctional Officer at the United States Penitentiary in Canaan, Pennsylvania, was working alone with 130 high security inmates when he was stabbed to death by an inmate. The death of Officer Williams is a reminder of the risks BOP staff take every day on behalf of the American people. BOP staff willingly put their lives on the line to protect society, one another, and inmates in their care. The mission of the BOP is challenging. While there are many facets to its operations, the foundation for it all is the safe, secure, and orderly operation of institutions, and each and every staff member in the BOP is critical to this mission.

Unfortunately, the high inmate to staff ratio is a typical pattern of staffing in BOP facilities around the country. Adding an additional officer to each shift at high security inmates would minimize the risk of repeating this tragedy in the BOP. Also, rigorous research by the BOP's Office of Research and Evaluation has confirmed that the greater the ISR, the higher the levels of serious assaults by inmates. ⁴

⁴ The Effects of Changing Crowding on Inmate Violence and Administrative Remedies Granted (2010).

Impact on Performance

BOP will internally track the following metrics:

- Enhances the BOP's road to reentry;
 Help meet the PREA guidelines;
 Reduction in staff assaults;

- > Increase in contraband control and inmate supervision.

Funding

Base Funding

	FY 2014	Enacted		FY 2015 Enacted				FY 2016 Current Services				
Pos	COs	FTE	\$(00	Pos	COs	FTE	\$(00	Pos	Co	FTE	\$BL	
			0)				0)					
20,911	20,911	18,050	\$1.9	20,911	20,911	18,050	\$1.9	20,911			\$1.9	

Personnel Increase Cost Summary

Type of Position/Series	Modular Cost per Position (\$000)	Number of Positions Requested	FY 2016 Request (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Correctional Officer (007)		0	25,100	25,100
Total Personnel		0	\$25,100	\$25,100

Non-Personnel Increase/Reduction Cost Summary

Non-Personnel Item	Unit Cost	Quantity	FY 2016 Request (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Glynco Training	\$4,058	714	2,898	(2,173)
Background Investigations	\$3,189	714	2,277	(1,822)
Payroll Svcs.	\$226	714	161	0
Urinalysis	\$535	714	382	0
Supplies and Materials	\$500	714	357	0
Uniform Allowances	\$1,160	714	828	0
Total Non-Personnel			\$6,903	(3,995)

Total Request for this Item

	Pos	COs	FTE	Personnel (\$000)	Non- Personn el (\$000)	Total (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Current Services	20,911	20,911	18,918	1,993,200	0	1,993,200	0
Increases	0	0	357	25,100	6,903	32,003	21,105
Grand Total	20,911	20,911	19,275	2,018,300	6,903	2,025,203	21,105

Item Name: Reentry and Recidivism Reducing Programs

Strategic Goal: Goal 3
Strategic Objective: 3.3 and 3.4

Budget Decision Unit(s): Inmate Care & Programs and Contract Confinement

Organizational Program: Inmate Care and Programming

Program Increase: Positions 150 Correctional Officers 0 FTEs 75 Dollars \$146,198,000

Description of Item:

This program increase is eight fold:

- 1) Increase mental health staff (+\$9.7 million and +130 positions)
- 2) Provide cognitive behavioral treatment at Residential Reentry Centers (RRCs) (+\$42.6 million)
- 3) Increase Residential Reentry beds by 1,870 (+\$56.3 million)
- 4) Sex Offender Management Program (+\$1.6 million and +20 positions)
- 5) Increase Reentry Programs in BOP Facilities (+\$20 million)
- 6) Increase Reentry programs to strengthen family bonds (+\$5 million)
- 7) Expand VT and Employer Bonding Program (+\$10.0 million)
- 8) Expand Medical Assisted Treatment Pilot (+1.0 million)

1. Increase Mental Health Staff

The provision of mental health treatment is one of the core responsibilities of BOP psychologists. This program initiative increases mental health staff in the BOP by 130 positions to ensure all institutions maintain a complement of mental health staff consistent with mental health staffing guidelines, which have been widely supported, but not fully implemented.

Specifically, this initiative increases the number of social worker, treatment specialist, psychologist, and coordinator positions by 130 positions to ensure adequate staff are available to address the mental health treatment needs of inmates. This initiative supports current American Correctional Association (ACA) standards, which states, "An adequate number of qualified staff members should be available to deal directly with inmates who have severe mental health problems and to advise other correctional staff about their contacts with such individuals."

2. RRCs Per Capita Cost Increase:

This request provides for the increased cost of incarcerating higher needs population in the RRCs in an effort to ease their transition back into a community. As the number of higher risk, higher need inmates, grows in RRC's, so will be the cost. Contractors are expected to provide additional services for these inmates, with increase case management needs and more cognitive based treatment programs it is expected that the per capita cost for RRC's will increase accordingly.

3. Increase Residential Reentry Beds

In order to meet the requirements of Second Chance Act, the BOP needs to increase resources to support additional RRCs. This will allow the BOP to place 1,870 more inmates in RRC facilities instead of BOP secure facilities.

4. Sex Offender Management and Treatment

Inmate sexual misconduct presents one of the most challenging disciplinary problems encountered in correctional settings. The Sex Offender Management Program (SOMP) is currently offered at nine BOP institutions. SOMP is a multi-component program, comprised of 1) treatment programming (either residential or non-residential), 2) risk assessments, and 3) specialized correctional management services. All SOMP institutions offer sex offender treatment services. The BOP's sex offender treatment programs are stratified into two program levels:

- The **Residential Sex Offender Treatment Program** (SOTP-R) is a high intensity program designed for high risk sexual offenders (ordinarily, inmates with multiple sex offenses, or a history of contact sexual offenses). The SOTP-R is a unit-based program with a cognitive-behavioral emphasis. The cohousing of SOTP-R participants permits the implementation of a modified therapeutic community. The SOTP-R is offered at the Federal Medical Center (FMC) in Devens, Massachusetts and the United States Penitentiary (USP) in Marion, Illinois. The program is typically 12 to 18 months in duration.
- The Non-Residential Sex Offender Treatment Program (SOTP-NR) is a moderate intensity program designed for low to moderate risk sexual offenders. Most of the inmates in the SOTP-NR are first-time offenders serving a sentence for an internet sex crime. The SOTP-NR shares the SOTP-R's treatment philosophy and program materials, but lacks the frequency of treatment groups and the program duration of the SOTP-R. In addition, because SOTP-NR participants reside in the general population, there is no modified therapeutic community. All SOMP institutions offer the SOTP-NR. The typical duration of the SOTP-NR is 9-12 months.

This program initiative increases the capacity of treatment and management of sexual offenders in the BOP's population. There are currently 20,743 sexual offenders in BOP custody. This class of offenses is among the fastest growing categories in the Federal criminal caseload. Over the past decade, Federal adjudications for child sexual offenses nearly quadrupled.

5. Increase Reentry Programs in BOP Facilities

This request is to award innovative reentry programs in BOP facilities.

6. Increase Reentry programs to strengthen family bonds

This request is to support a new reentry program that reaches out to offenders' children and families to strengthen familial bonds.

7. Expand the Vocational Training and Employer Bonding Program

This request is to expand capacity for the education and vocational training program. Currently, almost 27,000 inmates are enrolled in education programs, this request will increase the capacity by 7 percent.

8. Expand Medical Assisted Treatment Pilot

This request is to expand the number of inmates in BOP facilities participating in the medical assisted treatment pilot program from 10 to 200.

Support of the Department's Strategic Goals

This enhancement is in direct support of the following DOJ Strategic Goal and Objective: Goal 3, Ensure and support the Fair, Impartial, Efficient, and Transparent Administration of Justice at the Federal, State, Local, Tribal, and International Levels. Strategic Objective 3.3, Provide safe, secure, humane, and cost-effective confinement and transportation of federal detainees and inmates. Strategic Objective 3.4, Reform and strengthen America's criminal justice system by targeting the most serious offenses for federal prosecution, expanding the use of diversion programs and aiding inmates in reentering society.

Justification

The BOP has a responsibility to provide inmates with opportunities to participate in programs that can provide them with the skills they need to lead crime-free lives after release. The BOP's philosophy is that release preparation begins the first day of imprisonment. Accordingly, federal prisons offer a variety of inmate programs to address reentry needs, including work, education, vocational training, substance abuse treatment, observance of faith and religion, psychological services and counseling, release preparation, and other programs that impart essential life skills. The BOP also provides other structured activities designed to teach inmates productive ways to use their time.

1. Increase Mental Health Staff:

A significant number of institutions do not meet the guidelines in terms of the number of psychologists on staff; many institutions maintain inmate to psychologist staff ratios in excess of 1:500. This program increases mental health staff to ensure the appropriate identification, management, and treatment of mentally ill inmates. It also expands specialty programs within the BOP to target the highest need inmates.

Unfortunately, the need is widespread as data from the BOP's Mental Health Prevalence Project suggest that approximately 19% of inmates have a history of mental illness. Data from the Mental Health Prevalence Project suggests higher rates of mental illness in medium and high security and among female inmates. However, medium and high security institutions also place a greater demand on psychologists to assist with the management of disruptive inmate behaviors. Naturally, rates of mental illness are dramatically higher in Medical Referral Centers, as these sites specialize in the treatment of the BOP's most severely disturbed inmates. Additionally, a more conservative

approach to inmates' mental health care is required in Detention Centers due to pre-trial inmates' greater risk of suicide and the limited availability of mental health history information.

The BOP's Medical Referral Centers house a portion of these seriously mentally ill inmates; however, only the acutely mentally ill require this level of care. The majority of seriously mentally ill inmates are housed in regular institutions.

Core mental health treatment services have suffered as staffing levels have not kept pace with the increasing inmate population and psychologists' time is increasingly devoted to screening and crisis intervention services (i.e., "triage") rather than the provision of basic mental health treatment services (i.e., individual and group psychotherapies). As a result, the availability of brief counseling and individual therapy services has decreased dramatically in the last ten years.

With the implementation of this initiative, inmate services in the following areas will be enhanced:

- Proactive management and treatment of inmates in Special Housing Units;
- Delivery of evidence-based cognitive-behavioral treatment addressing mental illness and co-occurring criminality;
- Clinical intervention with inmates who have history of engaging in self-harm and/or suicide attempts;
- More comprehensive intake screening services; and
- Increased involvement in reentry planning.

2. RRC Per Capita Increase

In a new step to fight recidivism, the Attorney General is requiring federal halfway houses to boost treatment services for inmates prior to release. The most significant change is the requirement for standardized Cognitive Behavioral Programming to be offered. These programs would provide specialized treatment to prisoners, including those with mental health and substance abuse issues. Additional services provided will be increased staffing, transportation assistance, and cell phone access to help inmates seek employment opportunities. These, combined with the new Prison Rape Elimination Act requirements, are estimated to increase the per diem rate by 10%.

3. Increase RRC Beds

This initiative is consistent with the BOP's strategic planning goal to maximize the use of RRC bed space by placing inmates of all security level from secure facilities and the use of evidence-based practices in BOP's RRC utilization strategy. Placing more inmates generally housed in secure facilities will free up beds at low-, medium-, and high-security facilities.

With additional RRC beds, the BOP can consider higher-risk inmates for longer RRC placements. This allows BOP to take advantage of its new authority under the Second Chance Act to place inmates in RRCs for up to 12 months for pre-release purposes. Additionally, this will help the BOP to manage crowding at its most crowded facilities. In the near future, the use of home detention will reach its contractual maximum. Existing RRC beds will be occupied with higherneed, higher-risk inmates for longer periods of time and will not be released from the BOP's

custody at the current rate. The requested beds are therefore critical to absorb inmates from the BOP's overall population.

Last year, more than 30,000 federal inmates passed through halfway houses. With increased bed space and additional funds, the BOP will enhance and provide programs to more inmates in to help them overcome their past struggles and become productive, law-abiding members of their communities.

4. <u>Sex Offender Management and Treatment</u>

Prior to the implementation of the current treatment model for sexual offenders, the BOP had the capacity to provide services for 60 sexual offenders per year at a single residential program, FCI Butner. Currently, the BOP has 432 inmates participating in residential and non-residential treatment services across nine SOMPs. An additional 2,158 inmates are on the waiting list for these treatment programs, an increase of 786 inmates over three years. The BOP anticipates that the number of sexual offenders volunteering for treatment will continue to increase in the future.

5. Reentry Programs in BOP Facilities

This funding will allow the BOP to expand innovative institution specific reentry programs that are proven to reduce recidivism and improve employment outcomes to other BOP institutions. BOP's 121 prison facilities offer numerous locally developed reentry programs for inmates. BOP encourages inmates to participate in programs that reduce recidivism and improve reentry outcomes. However, these programs vary across prison institutions. For example, some prisons have partnered with their local communities to provide training for inmates to receive their CDL certifications while incarcerated. This training program provides inmates the tools they need to obtain employment in a high demand field and increases the likelihood of successful reentry into their communities. In contrast, other facilities may not provide training programs that lead to positive employment outcomes. This funding request will allow BOP to replicate successful programs throughout the system.

6. Reentry Programs for Families

This request will support a new, broader reentry program that reaches out to offenders' children and families to strengthens familial bonds, which are critical for helping inmates transitioning back home. The recommendation supports the request for new appropriations language to ensure that BOP can expend reentry programming funds on inmates' family members in order to strengthen relationships during incarceration. BOP is currently pursuing activities within base resources that broaden its reentry efforts in order to reconnect inmates with their children and families. On November 4, 2014, BOP held its first ever Daddy-Daughter Dance for offenders in the Federal Detention Center (FDC) in Miami, Florida. This event is an example of the BOP's latest reentry efforts to reach out to the children and families of offenders in their care, renew relationships, and strengthen bonds. The BOP's mission to help offenders return to their communities as productive, law-abiding citizens does not end at the prison walls; connections to families and children are critical aspects of reentry, along with employment, housing and medical care. The program

increase supports the Director's commitment to holding more events like this and to implement even more innovative programs for parents to improve relationships with their children.

7. Expand Vocational Training and the Employer Bonding Program

This request is to expand capacity for the education and vocational training program. Each year, about 45,000 Federal inmates return to our communities. Research has shown that inmates who participate in vocational or education training are 16 percent less likely to recidivate. BOP's vocational training program helps inmates acquire marketable skills in a wide variety of trades. Upon completion of the vocational training program, inmates may earn an industry recognized certification. Many institutions also provide registered apprenticeships through the United States Department of Labor's Office of Apprenticeship.

In addition, the Federal employer bonding program indemnifies employers against potential losses associated with hiring an eligible ex-offender. It has a loss record of 1% – that is, 99% of all bonds did not require payment. Despite its success, BOP participation in the program has been limited. Employer participation could likely be increased by linking the program to broader efforts to promote employment opportunities and focusing on target skills that are desired by employers.

8. Expand the BOP Medical Assistance Treatment Pilot

Currently, BOP is piloting a medication-assisted drug treatment program in three facilities to provide medication to 10 inmates with an opioid use disorder within two months of release and continues medications for 6 months while the inmates reside in residential reentry centers/ halfway houses. Medication is the standard of care for opioid and other substance abuse disorders in the private sector and is an important part of effective treatment for individuals in the justice system who are dependent on opioids.

The recommendation provides an additional \$1 million to expand the number of inmates and BOP facilities participating in the medical assisted treatment pilot from 10 to about 200 inmates. If the pilot proves successful, the BOP could change its policy to provide medically assisted treatments to eligible inmates as appropriate. This is a voluntary program that consists of participants who were notified of their eligibility based on a risk assessment conducted by BOP health services. Participants in the pilot are monitored by health professionals via tele health (telecommunication technologies) and linked to health services in the community.

Impact on Performance

BOP will internally track the following metrics:

- Early identification and treatment of mentally ill inmates;
- Reduction of symptoms of mental illness;
- Reduction in suicide attempts and completed suicides;
- Reduction in the need for Medical Referral Center transfers;
- Reduction in recidivism rates:

- Increase in structured reentry programming for inmates;
 Increased participation in SOTP;
 Reduction of time in the Special Housing Unit; and
 Reduction in recidivism by sex offenders.

Funding

Base Funding

	FY 2014	Enacte	d	FY 2015 Enacted			FY 2016 Current Services				
Pos	COs	FTE	\$(000)	Pos COs FTE \$(000)				Pos	COs	FTE	\$(000)
3,188	0	2396	666712	3,188	0	2396	660449	3402	0	2668	702037

Personnel Increase Cost Summary

Type of Position/Series	Modular Cost per Position (\$000)	Number of Positions Requested	FY 2016 Request (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Correctional Inst. Admin (006)	156	4	312	312
Soc. Science, Econ. And Kindred (100-199)	126	146	9,166	9,166
Total Personnel		150	9,478	9,478

Non-Personnel Increase/Reduction Cost Summary

Non-Personnel Item	Unit Cost	Quantity	FY 2016 Request (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Training	4,058	20	609	(457)
Background/payroll	3,415	20	483	(382)
Supplies, Other Services and Materials	500	20	135,028	0
Equipment	4,000	20	600	(480)
Total Non-Personnel			136,720	(1,319)

Total Request for this Item

	Pos	COs	FTE	Personnel (\$000)	Non- Personnel (\$000)	Total (\$000)	FY 2017 Net Annualization (change from 2016) (\$000)
Current Services	3,402	0	2,668	305,000	397,037	702,037	0
Increases	150	0	75	9,478	136,720	146,198	8,159
Grand Total	3,552	0	2,743	314,478	533,757	848,235	8,159

VI. Program Decrease by Item

Item Name: <u>Program and/or Administrative Savings</u>

Strategic Goal: Goal 3
Strategic Objective: 3.4

Budget Decision Unit(s): Contract Confinement
Organizational Program: Contract Programs

Program Decrease: Positions <u>0</u> Correctional Officers <u>0</u> FTEs <u>0</u> Dollars <u>\$-11,000,000</u>

Description of Item

Decrease is for program and/or administrative savings.

Justification

Reductions to existing operations and services necessary to pay for increases in existing costs, including pay raises, FERS contributions, and GSA rent, among others. Program and administrative savings, such as those achieved through reducing the physical footprint, bulk purchases, and/or bundling it investments, will be realized in FY 2016.