

February 19, 2008

PRISON OVERCROWDING—AN OVERVIEW ON CONSTRUCTION AND REHABILITATION

LEGISLATIVE ANALYST'S OFFICE

Presented to:
Senate Public Safety Committee
Hon. Gloria Romero, Chair

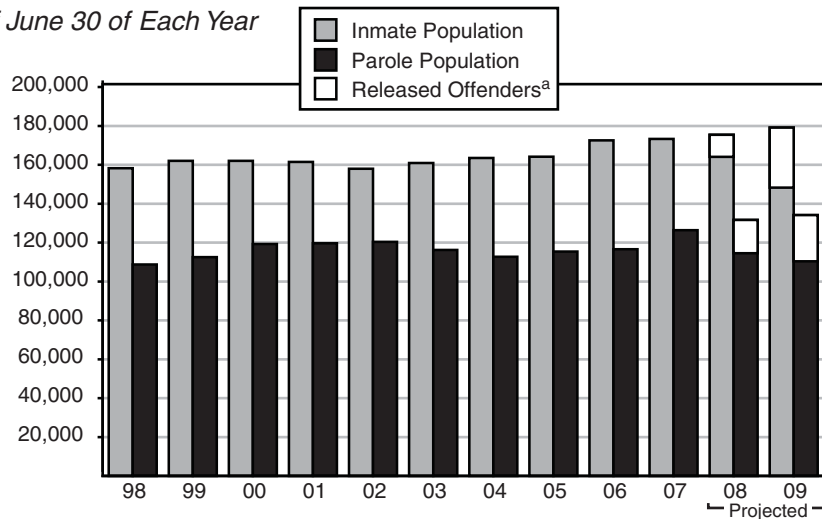




Inmate Population Projected to Grow

Inmate and Parole Population 1998 Through 2009

As of June 30 of Each Year



^a Reflects number of offenders who would no longer be in prison or active parole supervision under Governor's early release and summary parole proposals.

- As of June 30, 2007, the California Department of Corrections and Rehabilitation (CDCR) housed 173,312 inmates.
- The CDCR projects this number will increase to 179,105 by June 30, 2009.
- The CDCR estimates that the Governor's policy proposals (20-month early release and summary parole) will reduce the average inmate population by about 28,000 inmates in the budget year.



State Prisons Overcrowded

Population Compared to Permanent Capacity			
<i>(As Projected for June 30, 2008)</i>			
Security Housing Type	Inmates^a	Permanent Capacity^b	Surplus/Deficit(-)
Level I	30,919	23,357	-7,562
Level II	41,842	38,412	-3,430
Level III	33,970	41,653	7,683
Level IV	27,545	20,971	-6,574
Reception Center	28,345	23,480	-4,865
Special ^c	3,270	3,905	635
Totals, Men	(165,891)	(151,778)	(-14,113)
Women	12,345	9,966	-2,379
Totals, All Housing	178,236	161,744	-16,492

^a Based on department's fall 2007 population projections. Does not include adjustments for Governor's population reduction proposals.

^b Includes prison and contracted capacity.

^c Includes Security Housing Unit and Protection Housing Unit.

- The CDCR projects approximately 16,500 inmates—accounting for about 9 percent of the total inmate population—will be housed in gyms and dayrooms by June 30, 2008.
- The most significant bed shortfalls are for Level I, II, and IV inmates, as well as at reception centers.
- The CDCR projects that the inmate population will grow by another 11,000 inmates by 2012, an average annual growth rate of less than 2 percent.



State Plans to Spend \$7.4 Billion For Prison and Jail Beds

Construction Spending Plan						
<i>(Dollars in Millions)</i>						
	Phase I		Phase II		Totals	
	Funding	Beds	Funding	Beds	Funding	Beds
State						
Infill	\$1,800	12,000	\$600	4,000	\$2,400	16,000
Reentry	975	6,000	1,625	10,000	2,600	16,000
Medical	857	6,000	286	2,000	1,143	8,000
Subtotal	(\$3,632)	24,000	(\$2,511)	16,000	(\$6,143)	40,000
Local^a	\$750	—	\$470	—	\$1,220	—
Totals	\$4,382	—	\$2,981	—	\$7,363	—

^a Number of jail beds to be constructed not specified in AB 900.

- The Legislature provided a total of \$7.4 billion in lease-revenue funding for prison and jail construction over two phases.
- This includes \$2.4 billion for 16,000 infill beds at existing institutions; \$2.6 billion for 16,000 reentry facility beds; and \$1.1 billion for 8,000 medical, mental, and dental health beds and treatment space.
- This includes over \$1.2 billion for local jail facilities.

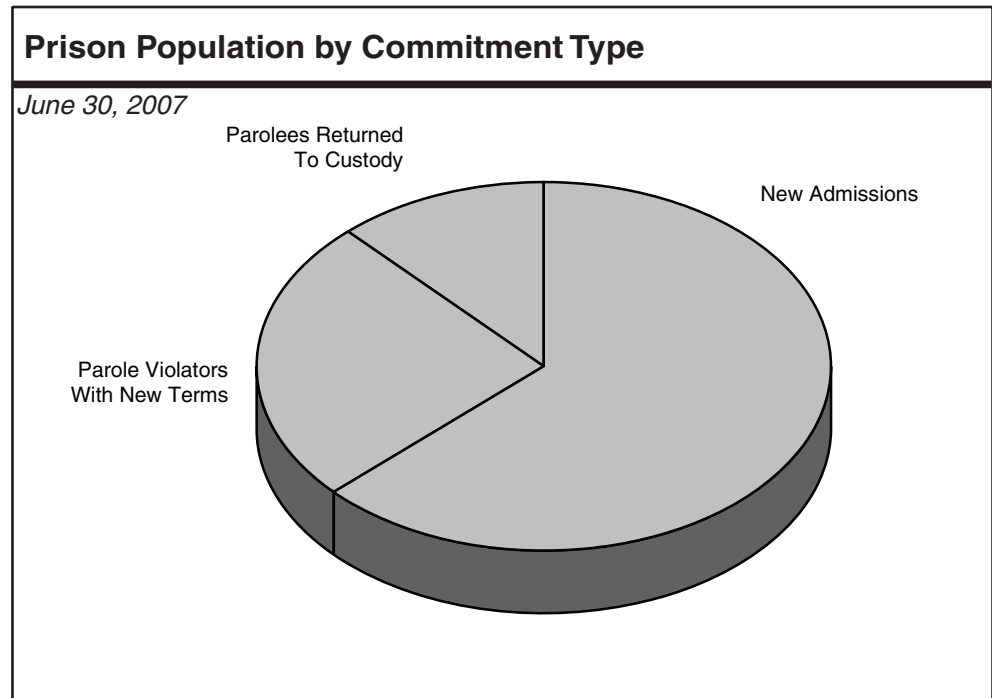


Key Issues in Prison Construction Efforts

- ***Population Reduction Proposals May Make Some Construction Unnecessary.*** The administration's proposals (20-month early release and summary parole) would result in a large reduction in the inmate population and reduce the number of parole violators returning to prison (total of 28,000 in 2008-09). We expect that this reduction of inmates will disproportionately impact dormitory housing where lower-security level offenders are housed, as well as reduce the need for reception center beds for parole violators. However, most of the beds planned for the first several infill construction projects are reception center and dormitory beds. Thus, it may not make sense to build these types of facilities first.
- ***Construction Cost Estimates Should Be Assessed by Independent Expert.*** Our analysis finds that the estimated construction costs for infill housing appear high. For example, we found that the estimated average cost per bed is almost three-times higher than the per bed cost at the last prison built in California, activated in 2005. These construction estimates need to be reassessed by an independent expert in order to ensure that the state does not overpay for its infill beds and decision makers have accurate cost data to make good decisions.



Parolee Recidivism Contributes to Prison Overcrowding



- About 37 percent of the inmate population is made up of parole violators.
- It costs an average of approximately \$44,000 to incarcerate an inmate for one year.
- Over 130,000 inmates were released from prison in 2006. Historically, 56 percent of offenders return to prison within three years, though many offenders return to prison multiple times in a year.



Department's Plan to Expand Rehabilitation

Administration's Plan to Implement \$50 Million for Rehabilitation				
<i>(Dollars in Millions)</i>				
	2007-08	2008-09	2009-10	2010-11
Substance abuse treatment	\$0.3	\$8.1	\$33.2	\$41.2
Risk and needs assessments	1.9	10.6	14.3	14.6
Services for mentally ill parolees	—	6.0	6.0	6.0
Proof Project ^a	—	5.0	5.0	5.0
EdFIRST ^b	—	1.0	5.8	4.6
Administrative and research staff	—	4.0	3.8	3.8
Prison-to-employment	0.3	0.7	0.7	0.7
Totals	\$2.5	\$35.4	\$68.7	\$75.9
Funding source				
One-time 2007 appropriation	\$2.5	\$31.4	\$16.1	—
Additional General Fund appropriations	—	\$4.0	\$52.6	\$75.9
^a Demonstration project incorporating programmatic changes from reception center to parole. ^b Education for Inmates/Wards Reporting and Statewide Tracking, a case management database for inmate education. Detail may not total due to rounding.				

- The Legislature provided a one-time appropriation of \$50 million for CDCR programs designed to reduce recidivism.
- The department recently released a spending plan for this funding. The one-time appropriation would be exhausted in 2009-10. The plan would require an ongoing General Fund commitment of \$76 million.
- The Legislature also set specific programmatic benchmarks for the department to achieve before it could begin the second phase of construction. For example, the department must establish an additional 2,000 substance abuse treatment beds, implement risk-needs assessments at reception centers, serve at least 300 parolees in community mental health programs, and increase participation in education programs by at least 10 percent.



Key Issues in Rehabilitation Expansion

- **Significant Future Fiscal Impacts.** The administration's spending plan exhausts the one-time appropriation by 2009-10 and would result in a \$76 million annual General Fund cost thereafter. While efforts to reduce recidivism can yield long-term savings through reduced reincarceration, the Legislature may have to prioritize which programs it wants to fund, particularly if the state's tough fiscal times continue in coming years.
- **Structural Barriers to Effective Programs.** As identified in our recent report *From Cellblocks to Classrooms: Reforming Inmate Education to Improve Public Safety*, the department faces structural barriers to implementing effective programs. For example, high instructor vacancy rates, frequent and lengthy lockdowns, and poor case management impede program performance. Ultimately, this means that the state's significant investment in programs is not returning the full benefits possible in the form of lower state costs and improved public safety. The department is taking steps to address some of these problems—for example, by implementing risk and needs assessments at intake—but the Legislature may want to ensure that the department has instituted changes to address all of these structural barriers before providing significant new funding for program expansions.
- **Program Quality and Evaluation.** Historically, the department has not evaluated most of its programs to determine which programs are most effective at achieving specific outcomes, such as reduced recidivism. The Legislature should require CDCR to evaluate its programs on an ongoing basis and provide the outcomes to the Legislature. This will allow the Legislature to make future funding decisions based on what programs work and should be continued or even expanded, and which programs are less effective and should be improved or eliminated.