

Travis County

Adult Correctional System Needs Analysis & Master Plan

Acknowledgments

The CGL team would like to acknowledge the following departments and agencies who participated in the development of the Needs Analysis. Representatives participated in meetings, interviews, and/or workshops; responded to our numerous requests for information and data; and provided their invaluable input and experience regarding correctional operations and criminal justice system functioning.

Travis County Commissioners Court

Office of Planning and Budget

Criminal Justice Planning

Sheriff's Office – Corrections Bureau

Judiciary

Court Administration

Pre-Trial Services

County Attorney

Adult Probation

Austin Police Department

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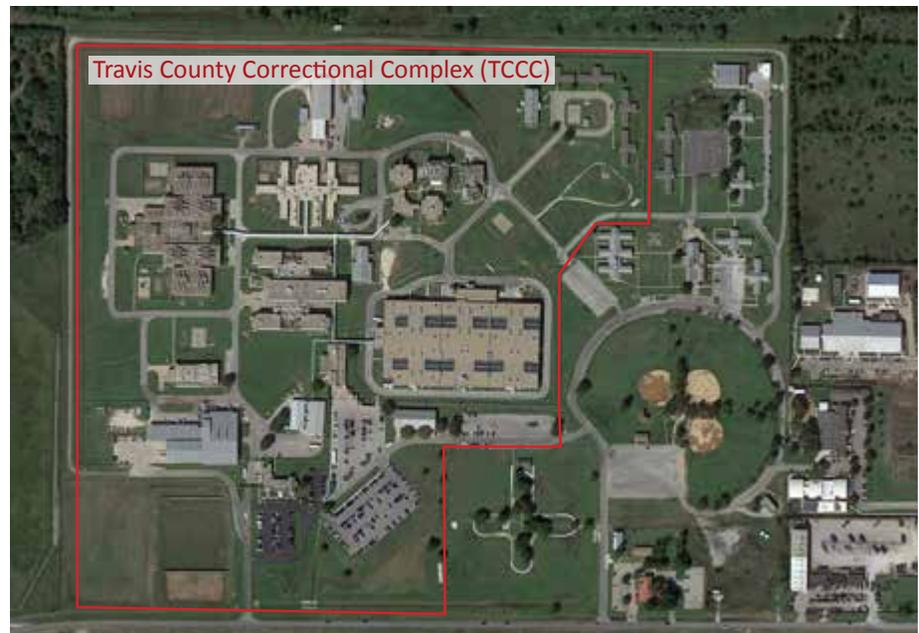
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Executive Summary

Executive Summary

Background and Introduction

The Travis County Sheriff's Office (TCSO) Corrections Bureau is responsible for the safe and secure holding of detainees being processed into the system and for the housing of inmates remanded or sentenced by judicial order. The TCSO Corrections Bureau currently operates two facilities – the Travis County Jail (TCJ) located in downtown Austin, and the Travis County Correctional Complex (TCCC), located in Del Valle, about 10 miles from the downtown jail.

TCJ is the location for the County's Central Booking Facility (CBF), where newly arrested individuals are processed into the system. TCJ also provides short-term housing for detainees awaiting classification and transfer to TCCC. The facility has a design capacity of 359 beds, most of which will need to be replaced at TCCC when the building is demolished for the eventual construction of a new Criminal Court facility.

TCCC houses the majority of the County's inmate population. Comprised of 12 housing buildings, the complex has a design capacity of more than 2,800 beds in a combination of general population, special risk, and special need beds for male and female inmates. While the inmate population has not grown in recent years, an increasing number of inmates are presenting medical and mental health conditions, and with greater acuity levels than in the past. With a declining inmate population, the challenge is no longer about having a sufficient number of beds- it's about having the right type of beds to address a changing, high need inmate population.

A related challenge is the rising cost of corrections operations, despite a parallel decline in jail admissions and daily population census.

In 2014, Travis County retained the firm CGL Ricci Greene, in association with Broaddus and Associates, to undertake an Adult Correctional System Master Plan to review the operations and facilities used to house pre-adjudicated and adjudicated adult offenders under County jurisdiction.

This is the second Master Plan commissioned by Travis County to address the long term functional and physical plant needs of its justice and civic facilities. In 2009, the County hired the team of Broaddus and Associates, in association with CGL Ricci Greene and Wiginton Hooker Jeffrys Architects to develop a Central Campus Master focused on County agencies and the Courts located in central Austin. That study, completed in 2011, identified the need to expand criminal court facilities in the central business district in the near future, necessitating the construction of a new central booking facility and the demolition of the Travis County Jail located in the central business district. The current Adult Correctional System study included a review of the Central Campus Master Plan, with a focus on updating those elements that impact jail bedspace and other factors pertinent to correctional system planning.

The Adult Correctional System Master Plan project has two phases. Phase 1: Needs Analysis- the focus of this report, included a detailed assessment of criminal court activity, jail operations, and correctional bedspace requirements to determine the best approach to satisfy future need as the population of Travis County continues to grow. The consultant team analyzed TCSO Corrections Bureau staffing, health care, inmate services, program delivery, classification, and bed utilization, and made recommendations for optimizing operational efficiencies. The report is organized by chapter for each area of analysis.

Another major component of the Needs Assessment was the development of inmate population projections and bedspace forecasts. These forecasts determined the number and the type of correctional beds required by TCSO over the next twenty years. The bedspace capacity requirements form the foundation for future facility development in Phase 2 of the Master Plan. A second report will integrate Phase 1 findings and recommendations into a physical master plan for correctional facilities downtown and at the corrections complex located in Del Valle.

Project Methodology

The Needs Analysis was a comprehensive and inclusive process occurring over a six month period. The consultant team worked closely with the Corrections Bureau and other project stakeholders such as Planning and Budget, Criminal Courts, and Criminal Justice Planning. The team toured all facilities, reviewed existing materials, analyzed data, and interviewed numerous TCSO staff across a variety of topics. Several meetings and workshops were held with the Planning Committee to present findings, solicit input and shape recommendations.

The CGL Ricci Greene team included specialty consultants in the areas of Correctional Health Services and Inmate Population Forecasting.

Summary Findings and Recommendations

The analysis culminated in a series of findings and recommendations aimed at optimizing operational efficiencies and establishing future jail bedspace needs. A summary findings and recommendations for each major area of analyses is presented below.

Chapter 1: Criminal Courts Analysis

Building off of the findings of the Central Campus Master Plan, the analysis focused on analyzing criminal court trends and metrics that impact jail usage, as well as other factors pertinent to correctional operations such as court transport activity.

The Criminal Court analysis focused on three main areas of investigation that inform the Adult Correctional System Needs Assessment:

- A review of Criminal Courts data to identify any trends in filings or processes that could influence jail usage
- An evaluation of Specialty Courts and Dockets aimed at reducing jail populations through expedited case processing or targeted diversion.
- An analysis of court activity in general and for specialized dockets to determine the impact on secure court transports and related TCSO workload.

In addition, the Consultant team was asked to look at the potential impacts on inmate transportation if a courtroom were located at TCCC.

FINDING 1.1

- **Criminal Court case filings are down but time to disposition is increasing.** This may be impacting jail bedspace, as in-custody defendants wait longer for their cases to be disposed. Jail average length of stay has increased slightly over the last few years.

RECOMMENDATIONS

- Proactively monitor in-custody cases with the goal of decreasing time to disposition.
- Continue collaborative efforts aimed at prioritizing in-custody cases and shortening disposition times.

FINDING 1.2

- **Travis County has a variety of successful Specialized Dockets that expedite court processing and help to reduce jail bedspace demand.** In particular, these include the Special Reduction Mental Health Docket, the felony Magistrate Special Reduction Docket, the misdemeanor Jail Reduction Docket and the Probation Sanctions Docket.
- **While the Magistrate’s Docket has reduced overall jail bed days since its inception, the “time to disposition” has increased 50% over the last 5 years, from 10 days in 2009 to 15 days in 2013.** Reasons cited for the increase in disposition time include servicing a larger number of clients, greater complexity of the cases, and a general backlog at the crime lab for blood test results.

RECOMMENDATIONS

- Continue the use of Specialized Dockets and Specialty Courts. These best practice initiatives, which have become standard for the courts, improve services and have helped to manage jail bedspace demand.
- Explore ways for shortening time to disposition for the Magistrate’s Docket without compromising program integrity. A shorter disposition time would reduce jail beddays.

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FINDING 1.3

A large percentage of court transport volume is associated with Specialized Dockets and Specialty Courts, impacting TCSO workload.

- Approximately one third of all inmate visits to the courthouse are associated with the Magistrate’s Docket and the Jail Call Docket. This represented 10, 172 in-custody court visits in FY 2013, each requiring at least one round trip transport from TCCC and back. There are 47 TCSO FTE staff currently assigned to court transport; a significant portion of their overall “per capita” workload is associated with these two dockets.
- While the Mental Health docket is addressing a critical need population, it has the potential for increased operational efficiencies. The two day a week docket is not sufficient for the number of cases serviced. This results in large dockets that require TCSO to transport 30-40 individuals from TCCC and back. The mental health and behavioral condition of participants creates added challenges.
- An on-site or video courtroom at TCCC would reduce the number of inmates transported to these dockets. This would lessen TCSO transport workload, reducing FTE requirements.

RECOMMENDATIONS

- Continue discussions with the Criminal Courts about an on-site or video courtroom at TCCC to accommodate the majority of defendants for the Magistrate’s and Jail Call Dockets.
- Consider expanding the Mental Health Docket to more than two days a week. Continue discussions with the Criminal Courts about the feasibility of an on-site or video courtroom for this docket.
- Establish design considerations and space requirements for a courtroom at TCCC in Phase 2 of the Master Plan. Discussions should include TCSO, Criminal Courts and supporting departments who will need on-site staffing and space.

Chapter 2: Custody Staffing Analysis

The staffing of correctional facilities accounts for the majority of long term facility costs for maintaining a correctional system. The Consultant team looked at key indicators to assess the adequacy of staffing levels for the current population and distribution of beds across multiple facilities at both the TCCC and TCJ. An evaluation of the basis of the current shift relief factors was completed, as this can often

have the biggest impact in translating staffing post requirements to actual payroll costs. Other factors, such as use of overtime were examined. Hard data, as well as interviews with supervisors and line staff were all considered to obtain a clear and comprehensive picture of procedures, issues, and gaps.

FINDING 2.1

The relief factors being used by TCSO are several years old and do not incorporate the actual “net annual work hours” (NAWH) associated with each job classification.

RECOMMENDATION

The Net Annual Work Hours and relief factors for each job classification should be updated annually using the three most recent years of data. This will ensure the relief factors used are up-to-date and reflective of actual time off data.

FINDING 2.2

Training of staff during scheduled shift hours impacts FTE requirements. While that officer is in training, his post must be filled by another officer on overtime, and the scheduled training time must be calculated into the NAWH, subsequently increasing the relief factor.

RECOMMENDATION

Conduct staff training during off-duty time. This can result in savings of as much as 18 FTEs that can be reallocated to other areas in need of additional staffing.

FINDING 2.3

The command rank structure at TCCC is not consistent with the remainder of the correctional system - particularly in Building 12, where a Captain is in command of the building and Lieutenants are in charge of each shift.

RECOMMENDATION

Reorganize the command rank structure at TCCC. One Captain should be in command of the overall TCCC, and a Lieutenant should be in overall command of each shift. All buildings (including Building 12) should have a Sergeant supervising operations for each shift.

FINDING 2.4

An overall comparison of current vs. proposed staffing FTEs by staffing area indicated that some areas seemed to be currently overstaffed while others did not have the required staffing to support current operations and overall post coverage.

RECOMMENDATION

Assess the areas that are currently overstaffed as well as understaffed. Take the necessary steps to reallocate existing staff to areas with the greatest need for additional personnel.

FINDING 2.5

The restricted duty policy is resulting in additional overtime costs. Officers on restricted duty status are given a light duty assignment. The original post is covered by overtime resulting in the equivalent of paying 2 ½ times the salary for the regular duty post.

RECOMMENDATION

Eliminate restricted duty posts and require staff to return to work only when they can report to full duty status. This would eliminate the practice of paying full compensation to the restricted duty officer as well as time and a half compensation to the relief officer working the vacated post on overtime.

FINDING 2.6

There is no limit to the amount of vacation time that can be carried over annually, and many officers have significant time accrued. While typical vacation coverage is considered in the relief factor, extensive coverage requirements for high usage for extended periods of time can result in overtime.

RECOMMENDATION

Travis County should re-evaluate the current accrued vacation time policy and consider placing a limit on the number of accumulated leave hours that can be carried over to subsequent years. Staff currently having a lead balance in excess of this amount should be allowed to use these excess hours until they return to the maximum number of hours allowed. However, the staff should not be accruing additional hours of leave until they return to the maximum number of hours allowed.

Chapter 3. Health Services Analysis

A review of current medical and mental health services provided to the incarcerated population was conducted with the aim of looking at the current level of services provided in relation to national best practices, and included consultations with correctional medical and mental health staff. The analysis looked at health services delivery practices, staffing levels, cost factors, quality of technology and facilities, and availability of beds. Findings and recommendations reflect the increase in the demand for, and complexity of, health services that are needed to meet today's needs at large county-owned correctional facilities.

FINDING 3.1

- **There are nursing vacancies at both facilities:** 5 Registered Nurse (RN) positions at TCJ; and 1 Licensed Vocation Nurse (LVN) position and 2 Mid-Level Service providers at TCCC. This results in reliance on per diem agency personnel to cover gaps in shift coverage.
- **Recruitment of nursing and mid-level personnel is challenging.** This is due to a shortage of RN candidates in the community; the salary differential with the private sector; and the time it takes to bring a new hire on board.
- **There is no designated RN on staff to provide continuing education of medical personnel and quality assurance of medical services.** This is important to ensure professional development, staff satisfaction, and continuous quality improvement.

RECOMMENDATIONS

- Adjust the salary schedule to more accurately reflect traditional nursing career progressions (e.g. credit for full career/licensing, not just time as RN).
- Adjust the starting salary for mid-level professionals (PAs and NPs) to better align with community pay scales for comparable positions.
- Increase the budget for recruiting and internships to assist in filling health service vacancies, and continue working to close the time gap between identifying a viable nurse candidate and bringing them on board full time.
- Hire an Education/Quality Assurance Supervisor to provide on-site Continuing Education Units for professional staff and organize the continuous quality improvement (CQI) effort and chairing the CQI committees.

Implementing these recommendations will improve recruitment and retention of medical personnel, resulting in fewer FTE vacancies, less reliance on agency staff, and a more stable, invested workforce.

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FINDING 3.2

Travis County correctional facilities do not currently have national health care accreditation status. Accreditation signifies the importance and quality of detention health care, enhances delivery of health care services, improves recognition and morale for detention staff, and it helps protect against adverse events, reducing liability.

RECOMMENDATION

Pursue National Commission on Correctional Health Care accreditation. The recommendation benefiting all of health services is eventual accreditation status. The costs and benefits should be assessed to establish a timeframe for achieving this goal.

FINDING 3.3

Outmoded equipment and technology impacts staff efficiency and health care service delivery.

RECOMMENDATIONS

- Install an automated medication dispensing cabinet in TCCC clinic. Automating helps to control inventory, avoids distribution of out-of-date medications, and saves nurse time.
- Install an adjustable examination table in physical therapy/wound care room in TCCC clinic. A modern examination table, height adjustable and movable, will improve treatment and reduce the chance of injury to provider and patient.
- Install hand washing stations in all exam rooms to improve sanitation and minimize possible cross-contamination.

FINDING 3.4

Visits to off-site community clinics, emergency room, and hospitalizations are up, despite a decline in the inmate population. This impacts TCSO workload and costs because correctional officers must provide transport and custody supervision for these visits.

RECOMMENDATIONS

- Expand on-site clinic services at TCCC. High volume conditions to consider include Ob/Gyn, and chronic conditions such as diabetes, cardiology, and hypertension.
- Explore the cost effective use of telemedicine to reduce utilization of some off-site specialty clinics. Telemedicine would not replace situations that require the patient be physically examined or the use of diagnostic equipment, but may be appropriate for dermatology or radiology. Most of the infrastructure for telemedicine already exists in the HSB.
- Continue cost containment practices and initiatives associated with the use of off-site clinics, ER runs, and hospitalizations.
- Explore with local hospitals the viability of establishing a secure ward for inmates who are hospitalized. Consolidating inmates in one secure area of the hospital has the potential to reduce the costs of TCSO supervision of hospitalized inmates.

The need for off-site clinic visits, emergency room runs, and hospitalizations will always exist. However, any reduction in off-site usage will also reduce TCSO transport activity, workload, and costs.

FINDING 3.5

There are gaps in mental health services at TCJ. No mental health counselors are assigned to the overnight shift, and psychiatric consultation is only available through telemedicine.

RECOMMENDATION

- Add five additional counselors to provide full mental health screening and assessment coverage, 24-hours a day, 7 days a week at TCJ /Central Booking Facility. Until such time as additional counselors can be hired, the MH Director should make every effort to assign at least one counselor to the overnight shift at CBF/TCJ.

Chapter 4: Inmate Programs Analysis

Current programs available to inmates were evaluated to look at areas for improvement, including access to programs and gaps in adequacy or availability to appropriate target populations. Inmate programs focus on vocational, recreational and educational opportunities, as well as counseling and other programs that can improve rehabilitation potential and reduce idleness in the detention facilities. The analysis, findings and recommendations were all completed by County staff for inclusion into the Master Plan.

FINDING 4.1

Access to inmate programs, particularly those held in classroom settings in the Health Services Building, is limited for inmates classified as maximum security. The vast majority of inmate programs are offered at HSB, where access is restricted for maximum security inmates. Some programs are offered at the housing units, but class offerings are much more limited. Providing additional programs to maximum security inmates could provide a substantial benefit.

RECOMMENDATIONS

- Explore use of additional space to expand access to programs at the housing unit level.
- Where unused space exists now, consider outfitting it for program delivery. In developing the physical Master Plan in Phase 2, provide additional program space at housing units, particularly for maximum security inmates who do not have access to the array of programs offered at HSB.

FINDING 4.2

Although there are a variety of programs available to the inmate population, there are still gaps that should be addressed.

- Most programs have long waiting lists due to several factors, particularly due to limited staff and volunteer resources. Wait times are also impacted by efforts to provide equal programming to all areas.
- While classrooms are heavily utilized during day hours (8am-3pm), there is additional capacity for more programs.

- Although comparable classes are offered to both male and female inmates, there is a need to expand gender-specific programming and interventions for female offenders.
- A particular gap relates to the GED. While eligible inmates are identified in the booking process, the test is currently undergoing a transition away from paper testing. TCCC has outfitted classrooms for online testing, but they have not yet been used due to security concerns. Additionally, as the classrooms are located in the HSB, maximum security inmates are not eligible.

RECOMMENDATIONS

- Provide additional space to meet program objectives. First and foremost, this should include a large multi-purpose space for major events (i.e. job fairs). Other programs have specialized space needs unique to their function. Nursing mothers require lactation rooms. Culinary arts programs require kitchens for food preparation. Habitat for Humanity would require an outdoor construction area.
- Explore gender-specific programs focused on the female population's greatest needs: multifaceted treatment for drug abuse, trauma recovery, pregnancy, parenting skills and training in jobs to be offered, when possible, in the least restrictive programming environment.

FINDING 4.3

Additional programming requires more volunteer organizations to get involved with inmate program delivery.

RECOMMENDATION

Develop policy for county-funded community programs to offer a percentage of services within the county. Promoting the involvement of non-profit organizations in inmate programs would boost the number of volunteers available to instruct courses as well as the variety of courses that could be offered to inmates, connecting inmates with new opportunities.

Chapter 5: Inmate Classification Analysis

The inmate housing classification process was reviewed by the Consultant team. The analysis looked at procedures, tools used, basis for classification decisions and appropriateness of target populations for different custody levels. Often the existing classification system reflects more the types of housing available than an objective assessment of risk related to custody level. The findings and recommendations identify potential gaps and suggest improvements to the system that recognize that the future number and type of beds should reflect the type of custody levels required and not the reverse.

FINDING 5.1

The current classification assessment is done without the benefit of a formal and confidential face-to-face interview with the inmate. The assessment is done remotely by civilian staff (Security Specialists) at TCCC and does not involve direct contact with the inmate.

RECOMMENDATION

Conduct a brief face to face interview with the inmate for both initial and reclassification events. The change from a remote entry process to a face-to-face interview with inmates will require a change in the status of classification staff from civilian to sworn personnel and a corresponding salary adjustment. Staffing and space requirements to support face-to-face classification interviews in the new downtown central booking facility should be determined in Phase 2 of the Master Plan.

FINDING 5.2

TCJS policy on prior criminal convictions is resulting in an over classification of inmates to maximum custody.

RECOMMENDATION

Restore the ten year time limits on prior criminal conviction scoring factors.

FINDING 5.3

A considerable level of over-rides are occurring, especially during the initial classification process of males. These over-rides are not being properly recorded in the TCSO data system, making it very difficult to assess their use.

RECOMMENDATION

Develop a formal listing of all over-rides and separate them into the categories of mandatory and discretionary over-rides.

FINDING 5.4

There are a number of inmates who are scoring maximum custody on both the initial and reclassification instruments because they are receiving 7 points or higher on the first three scoring items. This is causing a higher number of inmates to be assigned to maximum custody whose disciplinary conduct is similar to medium and minimum custody inmates.

RECOMMENDATION

Alter the threshold for maximum custody inmates for the top section of the initial classification instrument to 8 points. Increasing the threshold to 8 points would require an inmate to score points on at least two top four scoring items rather than just scoring on a single item with 7 points.

FINDING 5.5

Age appears to be one of the more consistent and stronger predictors of misconduct.

RECOMMENDATION

Create a separate age factor that is more refined than the current dichotomous age score. Using four categories for age, and using it on both the initial and reclassification instruments would make the overall classification system more predictive.

Chapter 6: Population Projections and Bedspace Requirements

The purpose of this chapter was to examine historical jail population trends (admissions, releases and the daily population) and criminal justice system indicators at large (County population demographics, crime and arrests), and to project secure bedspace needs for the next twenty (20) years. The analysis and forecast of Travis County's bed space needs was conducted by experts from the JFA institute. Projections were provided by gender, status, custody level and special risk and needs as a foundation for the development of housing options in Phase 2.

FINDING 6.1

The model currently used by TCSO does not provide an accurate forecast of future jail bedspace requirements. An examination of the County's projection model revealed poor accuracy levels outside acceptable ranges and a lack of complex analysis of the underlying jail populations.

RECOMMENDATION

Replace the current projection model with a more robust and sophisticated simulation model to complete jail population projections. The County will be receiving the consultant's forecast model and will be trained for its use and implementation.

FINDING 6.2

Forecasts generated by the consultant indicate that the County's jail population will remain relatively stable over the 20-year projection horizon, resulting in a need for 2,805 beds. There is no significant correlation between County population growth and jail population trends; and jail usage indicators such as admissions, average daily population, and average length of stay have stabilized or declined in recent years.

The Needs Assessment also revealed the following bedspace capacity requirements for gender, special risk/need, and general custody classification designations:

- 130 beds are required for pre-classification housing (48-hour housing)
- 14% of the beds are required for female housing
- 21% of the beds are required for special risk/special need populations
- The remaining capacity is designated for minimum, medium, and maximum custody housing

RECOMMENDATION

Provide for a total system capacity of 2,805 beds in Phase 2: Physical Master Plan. This will accommodate the 20-year projected need, taking into account inmate population peaks and a classification margin. Incorporate the above classification bedspace distributions into the development of future facility master planning scenarios in Phase 2.

Chapter 7: Bedspace Capacity Analysis

The consultants conducted a detailed accounting of the current bedspace capacity systemwide (TCJ and TCCC) including usage, occupancy rate, classification designation, configuration, and location. This inventory identified gaps and challenges and forms the foundation for generating facility development options for meeting new or replacement beds at TCCC or downtown.

FINDING 7.1

In addition to pre-classification housing, TCJ provides long term housing for a variety of classifications. The County has indicated that the replacement downtown jail will accommodate pre-classification housing only.

RECOMMENDATION

Replace TCJ post-classification bedspace capacity at TCCC. The number and type of beds to be provided will be determined in Phase 2 of this project.

FINDING 7.2

Current housing does not adequately address classification and/or operational considerations for females and youthful offenders.

RECOMMENDATION

Explore a housing response in Phase 2 that allows for the proper separation of females by risk and need, and provides for sight and sound separation of 17 year olds.¹

FINDING 7.3

Current housing capacity does not adequately address the growing number and acuity level of inmates with medical and mental health conditions.

- There is an overall shortage in the number and type of acute medical beds available at TCCC.
- The current HSB units do not provide the appropriate continuum of mental health housing. Most of the housing units are large, 64-bed units with mezzanine style configuration, appropriate for general population but challenging for inmates suffering from mental illness.
- The Full Safety Precaution (FSP) cells are difficult to observe, do not lend themselves to therapeutic interaction, and do not provide a humane environment.

RECOMMENDATION

Develop a medical and mental health housing plan in Phase 2 that responds to the full continuum of need.

- Acute medical housing (3% of total bedspace capacity).
- Mental Health housing (15% of total bedspace capacity)
- An alternative to the current FSP cells

FINDING 7.4

Medium and maximum custody inmates are housed together. While this practice is compliant with the Texas Commission on Jail Standards, it poses operational challenges for TCSO staff because the two populations are managed differently.

RECOMMENDATION

Explore a capacity housing plan in Phase 2 that supports TCSO's preference for housing maximum security inmates separate from medium inmates.

Next Steps—Phase 2: Master Plan

Phase 1 Needs Analysis established the number of correctional beds required by Travis County for the 20 year planning horizon, further delineated by gender, status, custody, and special risk/need categories. The projections provide the foundation for Phase 2 Master Planning, including the processing and 48-hour housing requirements associated with a new Central Booking Facility, and bedspace capacity requirements for correctional complex at Del Valle (TCCC). Phase 2 will include an evaluation of all buildings at TCCC to determine their viability in meeting future objectives relative to physical condition, functionality, and capacity (number and type of beds). A square footage space program of need will be developed, and facility/site Options will be generated for meeting the projected need at TCCC through renovation, new construction, or a combination – as well as for the Central Booking Facility. The options will be evaluated in terms of staffing efficiencies, and operational and capital cost considerations.

¹ Texas is considering legislation that would raise the age of juvenile jurisdiction to 17 years old, removing this population from the adult system.

Introduction & Background

Introduction and Background

Introduction

In 2011, Broaddus and Associates, in association with CGL Ricci Greene and Wiginton Hooker Jeffry Architects, completed a Central Campus Master Plan commissioned by the Travis County in 2009. The Central Campus Master Plan addressed the facility needs of County agencies and the Court facilities located in central Austin. The Central Campus Master Plan recommended expansion of the Criminal Courts in the central business district in the near future, necessitating the construction of a new Central Booking Facility and the demolition of TCJ.

In 2014, the County retained CGL Ricci Greene, in association with Broaddus and Associates, to undertake a Master Plan dedicated to the Adult Correctional System. Building upon the results of the Central Campus Master Plan, the current study reviewed those elements of the criminal court system that could impact jail bedspace demand, and other factors pertinent to correctional system planning.

The Master Plan has two Phases:

Phase 1 Needs Analysis addresses the operational needs and the bedspace capacity (number and type) required in the future to accommodate the County's correctional system population. While Phase 1 does not directly address the needs of community corrections or alternatives to incarceration programs, the use of these programs was considered in connection with the needs assessment for determining the projected inmate population.

Phase 2 Master Planning focuses on the development of future facility master planning scenarios based on the findings and recommendation of Phase 1. Phase 2 will include an evaluation of existing buildings at TCCC to determine their viability in meeting future objectives relative to physical condition, functionality, and capacity (number and type of beds), and will culminate in a series of options for meeting future correctional system requirements that is reflective of bedspace demand, the population to be served, operational objectives, and physical plant realities.

This Report represents the analysis, findings and recommendations for the *Phase 1 Needs Analysis* of the Master Plan. A second report will integrate Phase 1 requirements and recommendations into a physical master plan for correctional facilities.

Background

The Travis County Sheriff's Office (TCSO) Corrections Bureau is responsible for the safe and secure holding of detainees being processed into the system, and for the housing of inmates remanded or sentenced to jail by judicial order. To fulfill these responsibilities, TCSO Corrections Bureau operates two facilities: the Central Booking Facility (CBF)/Travis County Jail (TCJ) located in downtown Austin, and the Travis County Correctional Complex (TCCC), located in Del Valle, about 10 miles from downtown.

- CBF is the centralized hub where all newly arrested individuals are booked and processed into the system. The Central Booking Facility (CBF), is co-located with the downtown Travis County Jail.
- TCJ provides short-term housing for detainees awaiting classification and transfer to TCCC. TCJ provides short-term housing for detainees awaiting classification and transfer to TCCC. Texas Jail Standards require that all detainees are classified and placed in permanent housing within 48 hours of booking. The facility has a design capacity of 359 beds, most of which will need to be replaced at TCCC when the building is demolished for the eventual construction of a new Criminal Court facility.
- TCCC houses the majority of the County's inmate population. Comprised of 12 housing buildings, the complex has a design capacity of more than 2,800 beds in a combination of general population, special risk, and special need beds for male and female inmates. While the inmate population has not grown in recent years, an increasing number of inmates are presenting medical and mental health conditions, and with greater acuity levels than in the past. For many of these inmates, general population housing environments are not suitable, particularly for the female population.

With a declining inmate population, the challenge is no longer about having a sufficient **number** of beds- it's about having the right **type of beds** to address a changing, high need inmate population.

A related challenge is the rising cost of corrections operations, despite a parallel decline in jail admissions and daily population census.

Project Methodology

The Phase 1 Needs Analysis was a comprehensive and inclusive process, conducted over a six month period. It included the following tasks:

1. A review of the Travis County correctional system, starting with a review of criminal court activities and trends that impact jail bed days (e.g. case filings, disposition rates, time to disposition and specialized criminal court dockets) and TCSO operations (e.g. court transport demand);
2. A comprehensive analysis of jail operations, including staffing, health care, and inmate programs, with a focus on optimizing operational efficiencies.
3. An analysis of current capacity and bed utilization, classification processes and outcomes, and the development of 20-year bedspace projections for the correctional system.

The CGL Ricci Greene team included specialty consultants in the areas of Correctional Health Services and Inmate Population Forecasting.

To accomplish these tasks, the consultant team:

- reviewed existing reports and documents;
- toured all correctional facilities;
- obtained and analyzed a wide variety of criminal justice system and jail data from several sources;
- conducted meetings, interviews, phone calls and e-mail exchanges with County staff regarding capacity, classification, staffing, health services, inmate programs, and overall operations;
- held conversations with members of the Judiciary, judicial staff, pre-trial services, probation, and criminal justice planning regarding court operations and related processes;
- held a workshop with key criminal justice agencies to discuss factors impacting jail bedspace demand, and
- conducted several on-site and web-based meetings with the Planning Committee to present preliminary findings and recommendations.

Report Organization

This report represents the analysis, findings and recommendations of Phase 1 Needs Assessment, compiled in seven (7) chapters according to the major areas of study.

Chapter 1. Criminal Courts Analysis

Information on Travis County Criminal Courts and Specialized Dockets activity indicators was gathered and analyzed relative to their impact on jail bedspace utilization and court transport demand. The data and knowledge required to inform and support the Needs Assessment Study, were acquired through on-site meetings and interviews with Criminal Court staff, pre-trial services, probation, and criminal justice planning representatives, as well as available statistics and reports.

Chapter 2. Custody Staffing Analysis

The purpose of this chapter was to assess the adequacy of staffing levels for the current inmate population and distribution of beds across multiple facilities at both the TCJ and TCCC relative to operational efficiencies and cost savings. To that end, the consultant team evaluated the current staffing deployment plan, applicable shift relief factors, and use of overtime, as these are factors often having the biggest impact in translating staffing post requirements to actual payroll costs. Hard data, as well as interviews with supervisors and line staff were all considered to obtain a clear and comprehensive picture of procedures, issues, and gaps.

Chapter 3. Healthcare Services Analysis

A review of current medical and mental health operations and services provided to the incarcerated population is found in Chapter 3. Level of healthcare services provided was assessed in relation to national best practices and with an eye toward improving operational efficiencies and identifying related cost savings. The evaluation of the inmate healthcare system engaged the services of a correctional healthcare consultant working with the CGL consultant team. The review included consultations with correctional medical staff, on-site observation of healthcare services delivery practices, quality of technology, facilities and adequacy of medical and mental health housing options, supplemented by the gathering of data and information relative to healthcare services usage levels, staffing levels and cost factors.

Introduction and Background

Chapter 4. Inmate Programs Analysis

With the technical support of the CGL team, Travis County Justice and Public Safety-Criminal Justice Planning Division conducted an internal review of TCSO's inmate programs for inclusion into the Master Plan. The study assessed the utilization of these programs and identified areas for improvement, including access to programs and gaps in adequacy or availability to appropriate target populations. For this review, Criminal Justice Planning interviewed jail staff, including Travis County Inmate Counseling and Education Services (CES), Chaplain Services, and SWAP Services, as well as correctional programs and service providers across the country.

Chapter 5. Classification Analysis

To conduct the classification analysis, the CGL consultant team engaged the services of the JFA Institute. An expert on classification-related issues looked at current classification policies, procedures, tools and process decisions informing current custody level assignment, and conducted an empirical validation of the classification instrument used by TCSO. The analysis concluded with a series of recommendations and a breakdown of the inmate population by custody classification based on implementation. The percent distribution of minimum, medium, and maximum security inmates was used to determine future custody classification bedspace requirements for the Master Planning phase.

Chapter 6: Population Projections and Bedspace Requirements

The purpose of this chapter was to examine historical jail population trends (admissions, releases and the daily population) and criminal justice system indicators at large (County population demographics, crime and arrests), and to project secure bedspace needs for the next twenty (20) years. The analysis and forecast of Travis County's bed space needs was conducted by experts from the JFA institute. Recognizing that jail bedspace demand is not a corrections issue alone, changes in other justice system indicators and measures and across-the-board practices and policies were discussed with key Travis County Criminal Justice stakeholder agencies, with an eye toward possible impact on correctional bedspace demand. Within the scope of this task, projections were broken down by gender, status, custody level and special risk and needs as a foundation for the development of housing options in Phase 2.

Chapter 7. Bedspace Capacity Analysis

The consultants conducted a detailed accounting of the current bedspace capacity systemwide (TCJ and TCCC) including usage, occupancy rate, classification designation, configuration, and location. This inventory identified gaps and challenges and forms the foundation for generating facility development options for meeting new or replacement beds at TCCC or downtown.

1: Criminal Courts Analysis

1. Criminal Courts Analysis

The Criminal Court Analysis provides an overview of criminal court processes in Travis County, including growth trends and measures, specialized dockets, calendaring, court transport, and other aspects of operations that can impact jail bedspace demand or TCSO staff workload.

Approach and Methodology

The Criminal Court analysis focused on three main areas of investigation that inform the Adult Correctional System Needs Assessment:

- A review of Criminal Courts data to identify any trends in filings or processes that could influence jail usage.
- An evaluation of Specialty Courts and Dockets aimed at reducing jail populations through expedited case processing or targeted diversion.
- An analysis of court activity in general and for specialized dockets, to determine the impact on secure court transports and related TCSO workload.

Criminal Court data were collected and provided to the consultant team by the County. Court docket and scheduling data were also reviewed and discussed relative to TCSO transport workload. Based on a review of the data, the team conducted interviews with a range of individuals involved with both the District and County Criminal Courts, including an initial interview with a District Court Judge and representatives from the Office of Court Administration, follow-up conference calls with a County Court at Law Judge, and other judicial officials and staff.

Criminal Courts Overview

Criminal Courts play a key role in regulating the jail population, particularly the large population of pre-trial detainees. After Central Booking, the next major phase of the criminal justice system through which criminal cases move is the Criminal Courts. For those individuals who are not released pre-trial on bond, prosecution and court processes determine how long the person will remain detained in jail. The custody and care of remanded inmates, as well as secure transport requirements to and from Court pending disposition, is a continuing cost for the County.

In Travis County, Criminal Courts are housed in the county seat in downtown Austin, in the Blackwell-Thurman Criminal Justice Center. The Criminal Court System is comprised of seven District Courts, six County Courts at Law and one Drug Court. Judges in Travis County are elected for four year terms.

At present, there are seventeen general jurisdiction District Courts in Travis County. By local practice, seven of the District Courts hear criminal cases brought by the District Attorney, which includes all felony cases, from the lowest level state jail offenses such as theft and drugs, to the most serious felonies, including capital murder. In 1993, Travis County established the first Drug Diversion Court, the second in the State, designed to provide case management and treatment services to County defendants charged with a non-violent, drug-related felony offense. Additionally, a Magistrate Court was created in 2003 to manage a specialized reduction docket for felony cases. Each Criminal District Court is comprised of a judge with three judicial FTEs assigned to each court. Cases are assigned by rotation and divided equitably between the District Courts.

Travis County currently has eight County Courts-at-Law. While any judge may sit in any court, County Courts-at-Law 1 and 2 hear primarily civil cases and Courts 3, 4, 5, 6, 7 and 8 hear primarily misdemeanor criminal cases (class A or B) brought by the County Attorney's Office. Each criminal court has its own judicial aide responsible for setting cases on the individual docket of that court. In addition, the Criminal Courts Administrator is responsible for the administration of both the District and County Courts-at-Law that hear criminal cases.

Criminal Courts Measures

Based on historic data provided by Travis County and reported to the Texas Office of Court Administration, case filings, disposition rates, and time to disposition for both District and County Courts-at-Law were reviewed and analyzed. These are the typical measures used by courts to assess their performance in terms of general caseflow management and court efficiency.

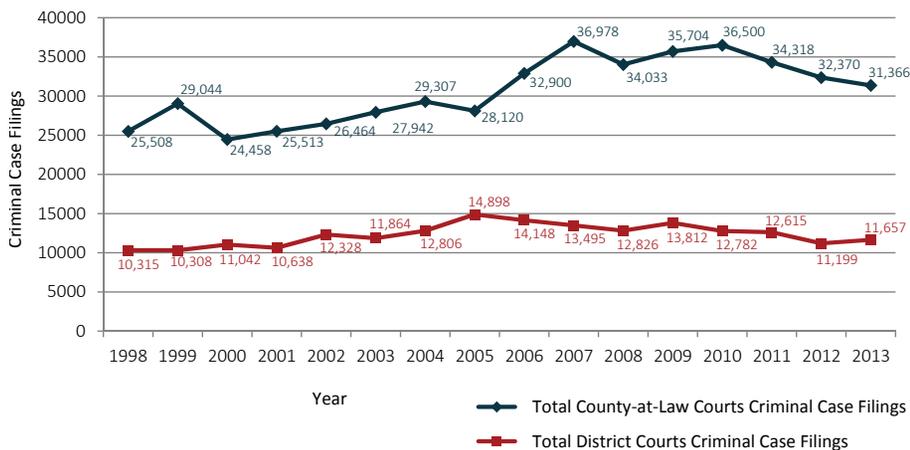
The purpose of this review was to develop an understanding of trends in caseloads, and to identify whether there were changing caseload characteristics that would likely be impacting the detention system. This quantitative data was supplemented with discussions with judicial representatives and other key criminal justice system representatives regarding perceptions of case flow and circumstances impacting cases moving through the system, time to disposition goals, as well as challenges and opportunities impacting system efficiencies overall.

Case Filings

An influential factor on jail population trends is courts policies and practices. Growth in both District and County Courts-at-Law case filings and in their annual rates of criminal case dispositions are indicators of the Criminal Courts' operating efficiency and of a potentially growing backlog of cases that might contribute to an increased ADP by increasing the Average Length of Stay (ALOS).

Figure 1.1 depicts the history of District Court and County Courts-at-Law criminal case filings between 1998 and 2013. It shows that, historically, a significantly smaller number of felony cases are processed annually (29% of total filings on average). Felony offenders, however, are more likely to be incarcerated, and for longer periods of time than misdemeanants.

FIGURE 1.1 DISTRICT & COUNTY COURTS-AT-LAW CRIMINAL CASE FILINGS



Travis County District Courts: The number of felony case filings grew by 13%, during the sixteen year period, from 10,315 in 1998 to 11,657 in 2013. There has been a slight but steady decline after a peak in 2005. Since then, the number of felony case filings has decreased by 22% overall, a marked change from the growth trend characterizing the early half of the decade.

Travis County Courts-at-Law: Misdemeanor case filings for the County Courts-at-Law increased steadily for the first ten years of the study period, peaking to almost 37,000 cases in year 2007. Over the last six years, the Courts-at-Law have experienced a 15% decline in case filings, reversing the earlier upward trajectory.

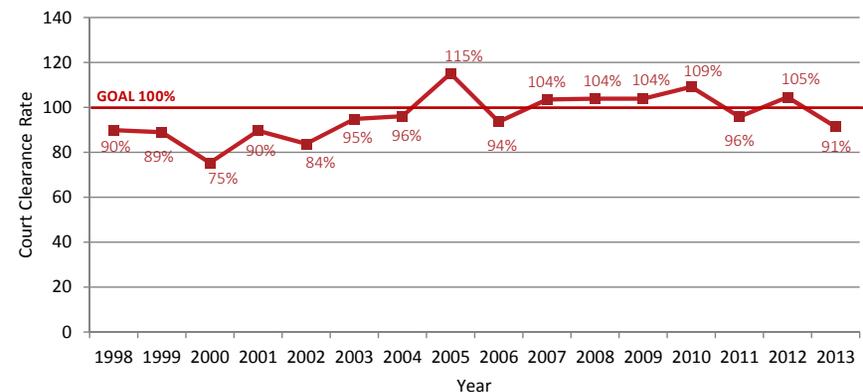
An increase in criminal case activity could suggest increased jail bedspace demand, because defendants may be detained pending court disposition. Overall, recent filings for both courts are down, indicating that court caseload trends are not adding demand to jail capacity.

Case Disposition Rates

Ideally, courts should maintain a neutral balance between the number of cases opened and the number of cases closed annually. A 100% case disposition rate reflects an efficient operation that disposes cases as quickly as new cases are filed, and is an indication that the number of Judicial Officers is adequate to dispose of current caseloads. When cases are not cleared in a timely manner, there is a strong likelihood that the backlog will impact jail bedspace demand, because defendants are waiting longer for their cases to be resolved. When defendants are waiting in-custody, the result is increased lengths of stay in jail, and a rise in the overall jail ADP.

Case disposition rate is one of the most commonly used indicators to monitor case flow. It is obtained by dividing the number of resolved cases by the number of incoming cases. Figures 1.2 and 1.3 depict annual case disposition rates for the District and County Courts-at-Law, respectively.

FIGURE 1.2 CRIMINAL DISTRICT COURTS CASE DISPOSAL RATES

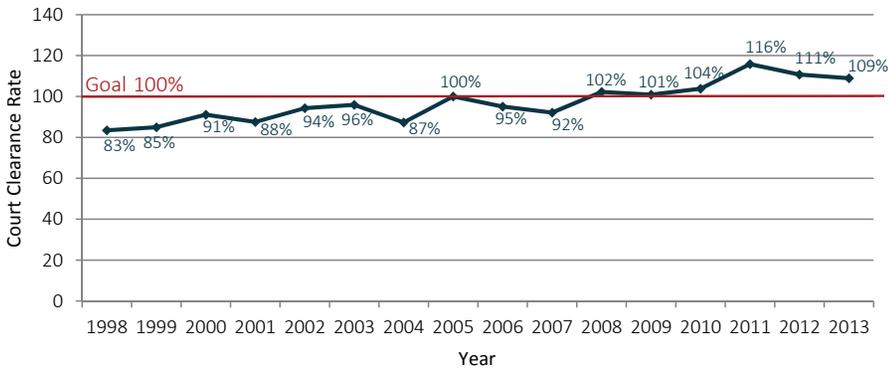


1. Criminal Courts Analysis

Case disposition rates for the District Courts have exceeded 100% since 2007. The only exceptions during this time period were in 2011 and 2013, when clearance rates fell below the 100% target, which is coincident with an increase in case processing time for felony cases. Maintaining good clearance rates at the District Court level has helped in managing jail bedspace demand, as it is typically the more serious (felony) cases that remain longest in pre-trial incarceration.

Case disposition rates for the Criminal Courts-at-Law have a pattern similar to District Court trends. Rates were below the 100% target for the earlier part of the decade, but have remained above 100% since 2008.

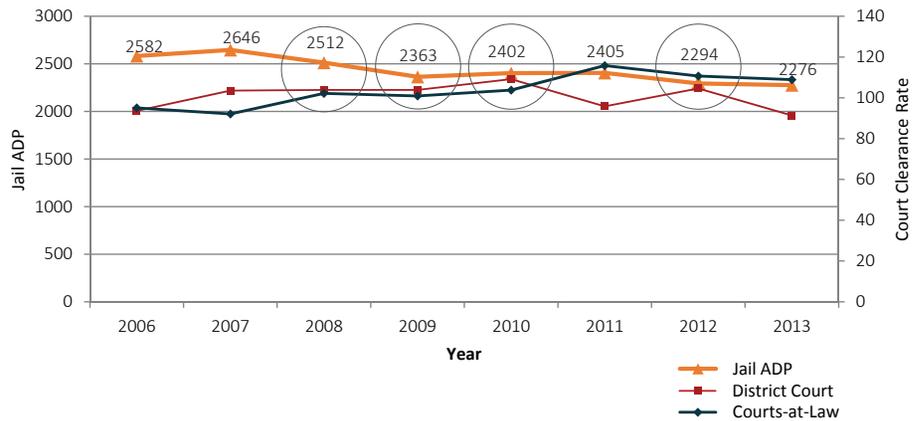
FIGURE 1.3 CRIMINAL COURTS-AT-LAW CASE DISPOSITION RATES



This indicates that Travis County Criminal Courts are currently balancing the inflow and output of cases in an efficient manner.

Figure 1.4 compares the average daily jail population (ADP) with annual case disposition rates for both Criminal Courts. While many factors influence jail usage, this provides a broad measure of the inter-relationship between court processes and jail bedspace, particularly for the years indicated. For example, when clearance rates were below 100%, jail ADP figures were generally higher.

FIGURE 1.4 DISTRICT COURTS AND COURTS-AT-LAW CLEARANCE RATES VS. JAIL ADP



Time to Disposition

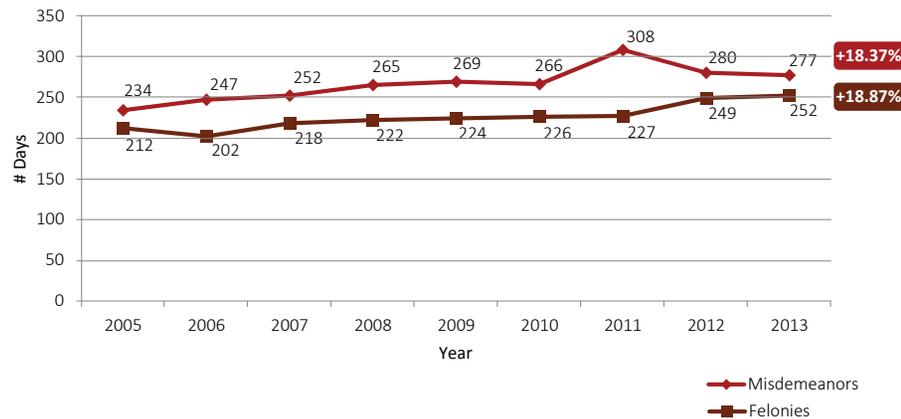
While Case Disposition Rates depict the overall relationship between cases opened and cases closed, Time to Disposition provides a measure of how long it takes, on average, for the Courts to dispose of a case. Average time from booking to disposition was analyzed for the years 2005 to 2013, by case type (felonies vs. misdemeanors) and for defendants in custody and out of jail.¹

As depicted in Figure 1.5 Time to Disposition has increased gradually but steadily for both felony and misdemeanor cases, despite the recent decline in case filings and the high clearance rates achieved by the courts.

¹ Criminal Courts do not have jurisdiction over cases until the District Attorney's Office or the County Attorney's Office prosecute the case and, on average, it takes about 41 days for the District Attorney's Office to fill an indictment and 9 days for the County Attorney's Office to finalize the charging document.

1. Criminal Courts Analysis

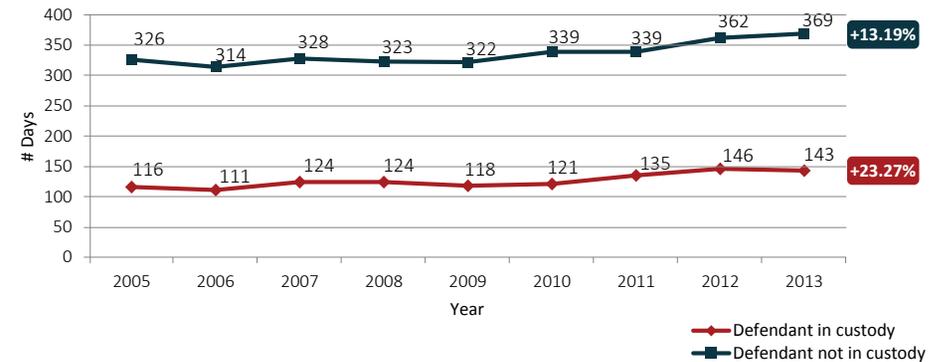
FIGURE 1.5 AVERAGE TIME FROM BOOKING TO DISPOSITION BY CASE TYPE



Disposition times are not within the recommended standards set by the American Bar Association for felony or misdemeanor cases.² Criminal Courts representatives noted that issues like case complexity, self-represented parties, changing legislative requirements and the like all impact the amount of time it takes to dispose of a case – offsetting the full advantage of fewer case filings on judicial workload and overall court processing time.

As illustrated in Figure 1.6, in-custody cases are disposed of much more quickly than out-of-custody cases. This may be attributed to the priority that judges and prosecutors have given to these cases to help reduce jail overcrowding historically, working collaboratively to develop and implement creative court jail programs aimed at early judicial intervention and shorter processing times. However, given lengthy disposition times, Travis County defendants remain in jail for relatively longer periods of time prior to disposition.³

FIGURE 1.6 TIME TO DISPOSITION FOR IN CUSTODY VS. NOT IN CUSTODY DEFENDANTS



An analysis of jail trends indicates a slight uptick in the Average Length of Stay (ALOS), despite declining admissions. This is discussed in greater detail in *Chapter 6 Inmate Population Projections*. However, the rise in time to disposition for in-custody defendants and the increased jail ALOS is worth noting here.

Conversations with representatives of the Criminal Courts indicated that the increase in Time to Disposition for in-custody defendants may be attributed in part to the high percentage of cases being reset for another docket call.⁴ Related data provided by the Sheriff’s Office (TCSO) indicates that 47% of those transported to court from jail had their cases reset, requiring another secure transport from the correctional facility to the courthouse at a later date.

2 ABA time to disposition standards are 90% disposition within 120 days, 98% within 180 days and 100% within one year for felony cases, and 90% within 30 days and 100% within 90 days for misdemeanors.

3 *Caseflow Processing in the Travis County District Courts*, (Institute for Court Management), page 35

4 Cases are reset for a variety of reasons: the attorney isn’t present; the case is not ready for trial; victims need to be contacted before the court date; a jury trial where the inmate comes back daily until sentenced; inmate is found guilty but won’t be sentenced until a later date, etc.

1. Criminal Courts Analysis

FINDING 1.1

Criminal Court case filings are down but time to disposition is increasing. This may be impacting jail bedspace, as in-custody defendants wait longer for their cases to be disposed. Jail average length of stay has increased slightly over the last few years.

RECOMMENDATIONS

Proactively monitor in-custody cases with the goal of decreasing time to disposition. Continue collaborative efforts aimed at prioritizing in-custody cases and shortening disposition times.

Specialized Courts and Specialty Dockets

Travis County has a long history of addressing the jail population through development and implementation of innovative jail programming and population management efforts. This includes specialized criminal courts dockets.

The first specialized criminal court established in Travis County was a drug court program created in 1993 (the second oldest in the State, after Jefferson County). Since then, the County has been at the forefront of a now national trend, steadily increasing the number of specialized criminal court dockets that include therapeutic justice programs and problem-solving programs operated by both the Courts and the Adult Pretrial Services and Probation Department.

At present, there are several such specialized criminal court dockets operating in the County, more than any other county in Texas:

- Downtown Austin Community Court Docket
- Road to Recovery Diversion Program (PI Enhanced)
- Misdemeanor Project Engage Docket
- Veterans Court
- DWI Court
- Misdemeanor Mental Health Docket

- Felony Mental Health Docket
- Magistrate’s Docket
- Jail Reduction Docket
- Adult Drug Diversion Court and SMART Re-entry Court
- Probation Sanctions Docket

For a description of these initiatives, see *Appendix A1 Detailed Description of Specialty Courts & Dockets*.

In Travis County, specialty courts and dockets currently in place have a strong local support, having helped the County to proactively manage bed space demand. While many factors influence jail usage, the marked decline and stabilization of the jail population can be partially attributed to these initiatives.

As documented in a 2011 study on “Caseflow Processing in the Travis County District Courts” conducted in collaboration with the National Center for State Courts Institute for Court Management, the Magistrate’s Court Docket, the daily misdemeanor Jail Reduction Docket and the Probation Sanctions Docket¹ have had the greatest impact in successfully increasing disposition clearance rates. In addition, these dockets have also had a positive impact on days to disposition and ALOS in jail, helping TCSO to maintain its population at stable levels.²

The remainder of the specialized dockets serve a small number of participants, the majority of which are not typically in jail, therefore not having sufficient caseload to significantly impact on jail bedspace utilization. At the time of this report, the Courts were in the early stages of developing a specialized Prostitution Court. The target population, timeline, or type of court (probation vs. diversion) had not yet been established, although it is expected that the focus of this caseload will be primarily misdemeanor cases. Since the volume of prostitution case filings is not that large, the potential impact of this specialized docket on jail use is also expected to be minimal.

Based on available data provided by TCSO Business Analysts and Adult Probation (CSCD) staff, the consultant team analyzed criminal court measures for the Travis County Specialized Criminal Courts Dockets to identify current or potential impacts on jail beddays.

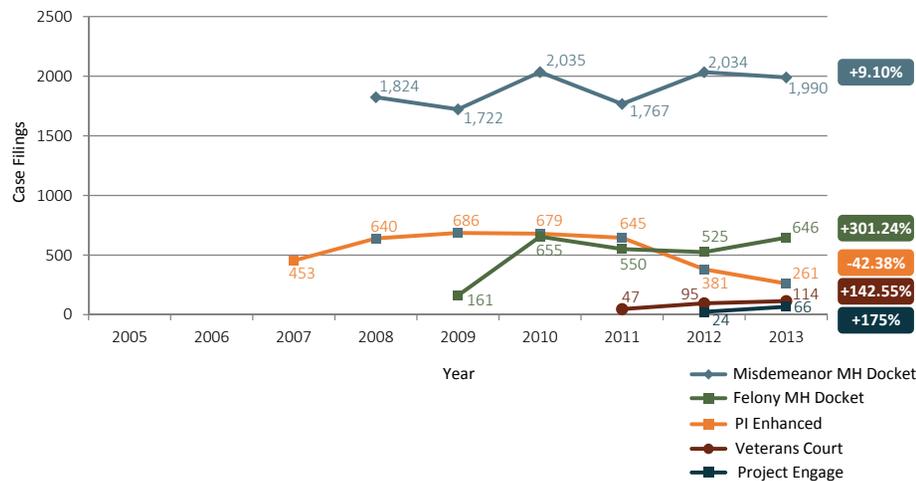
1 The Probation Sanctions Docket is part of a BJA funded grant which, according to Adult Probation Department representatives, was expected to end in 2014.

2 Debra Hale, Caseflow Processing in the Travis County District Courts, (Institute for Court Management).

Case Filings

Figure 1.7 presents new case filing trends for Specialized Criminal Court Dockets.

FIGURE 1.7 SPECIALIZED CRIMINAL COURT DOCKETS CASE FILINGS



With the exception of the PI Enhanced Docket, case filings for all specialized dockets have increased since their inception. Case filings more than doubled in the first two years of implementation for the Misdemeanor Project Engage docket (+175%). Aimed at reducing the number of revocations, convictions and jail sentences for misdemeanor teenage defendants (ages 17 to 19), judicial representatives reported that this docket has helped reduce incarceration of young offenders in adult jails. The majority of cases filed in Veterans Court are for misdemeanor defendants who are not in jail, therefore the impact on jail ADP is minimal.

Mental Health Dockets

Of particular interest are the Specialized Mental Health Dockets, given that over 90% of cases filed are for in-custody defendants. Since their inception, these two dockets have been handling an increasing and rather significant volume of mental health cases (representing 82% of total specialized dockets case filings, magistrate’s docket and jail reduction docket excluded). This growth in mental health case filings is consistent with the reported growth in the number of mentally ill people involved with the criminal justice system.

The *Misdemeanor Mental Health Docket* began operations as a pilot program in 2006. Cases were set every Tuesday and Thursday morning on a mental health docket and rotated between the 5 courts. In May 2008, all misdemeanor mental health cases were transferred to County-at-Law No. 3. At the time of this report, County Court at Law No.5 was managing this special docket, with the specialized prosecutor, defense counsel, and other team members working with the docket as part of their regular responsibilities.

Cases on this docket are handled on an expedited basis in order to reduce the duration of incarceration time when appropriate. The program has no maximum capacity and has a daily average of 137 participants.

Annual case filings for the Misdemeanor MH docket have increased about 9% overall since 2008, with annual fluctuations ranging from a low of 1,722 new cases filed, to a high of 2035, as shown in Figure 1.7.

The *Felony Mental Health Prosecution Docket* began operations in January 2009. Initially held weekly, this specialized docket started serving only lower-level drug and property felony cases of defendants with a major mental health diagnosis who were still in jail-no violent offenses and no cases involving victims. The docket is now held Tuesdays, Wednesdays, and Thursdays with staff consisting of a social services coordinator from the jail, an ATCIC representative, and a mental health probation officer.

1. Criminal Courts Analysis

Since its inception, the felony mental health docket has grown significantly (646 new case filings in 2013 vs 161 new case filings in 2009), as depicted previously in Figure 1.7. A total of 2,537 cases (70% male/ 30% female) have been placed on this specialized court docket between 2009 and 2013, with 93% of the cases successfully disposed.

Travis County is on the cutting edge in terms of treatment of the mentally ill. A continuum of services is in place throughout the criminal justice process intended to stop the revolving door of mentally ill people in contact with the criminal justice system and in jail. Supporting the Specialty Dockets described above, initiatives include designated mental health prosecution teams at both the County and District Attorney offices, and public defense attorneys assigned to prosecute/provide unique special defense to individuals. Additionally, available diversion programs such as the Pretrial Services Mental Health Supervision Program, serve as critical strategies in preventing people in conflict with the law with mental illness from entering in the criminal justice system, and in reducing unnecessary pretrial jail days.

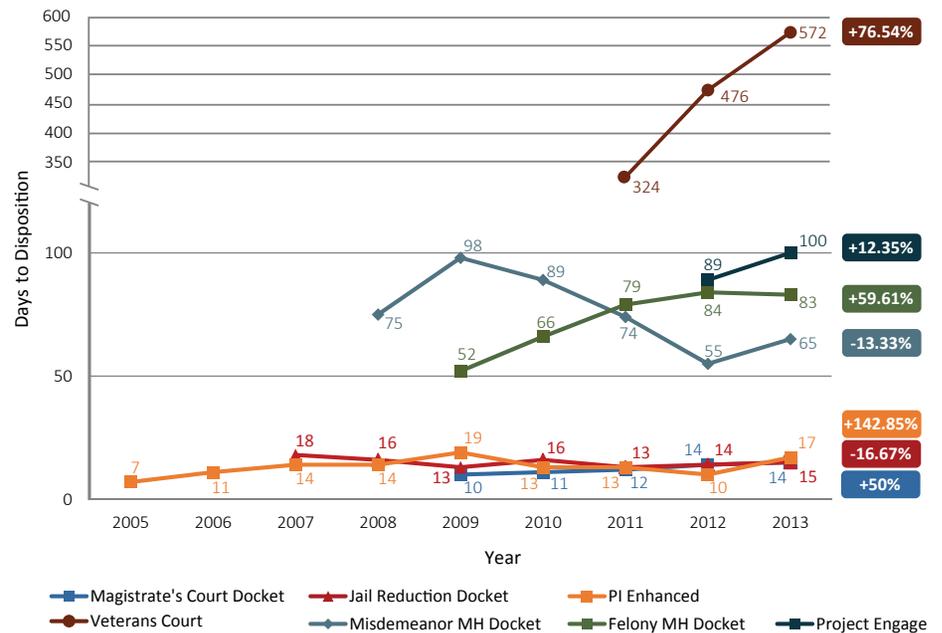
Time to Disposition

Historically, judges and county officials have worked to develop innovative and effective strategies to expedite the processing of cases. However, time to disposition for most of the specialty court dockets has increased over time – some much more than others, as depicted on Figure 1.8.

A possible explanation given for the increase is that servicing a larger number of clients through these dockets has added social service responsibilities and activities to the courts – traditionally the responsibilities of non-court county departments. Together with an increased complexity of the cases, this has lengthened the time it takes to dispose of these cases.

There are special considerations for the Mental Health and Magistrate’s Court Dockets.

FIGURE 1.8 SPECIALIZED CRIMINAL COURT DOCKETS DISPOSITION TIMES



Mental Health Dockets

By streamlining the adjudication process on these cases, the mental health dockets have helped reduce the number of days mentally ill defendants are detained. When the felony mental health docket started in April 2009, an inmate with mental health issues spent an average of 109 days in jail. In FY 2011, this number was reduced by half – with defendants on this docket averaging about 52 days in jail. Over the last five years, however, a consistently upward trend in time to disposition is reported – up to 83 days in 2013 (a 60% increase).

1. Criminal Courts Analysis

In addition to the reasons cited above, the mental health docket time to disposition is impacted when individuals referred to treatment have to wait long periods of time in jail until an appointment can be made with an out-patient treatment provider, until the person can be finally admitted to a mental health program in the community, or until a treatment bed becomes available. There is also a lack of permanent and transitional housing and residential treatment beds for homeless mentally ill defendants, many of whom have co-occurring disorders.

Magistrate’s Court Docket

Given its expediting intent, of particular concern is the 50% increase in the days to disposition experienced by the Magistrate’s Court Docket over the last five years. As illustrated in Figure 1.8, the time to disposition has increased from 10 days in 2009 to 15 days in 2013. This is reportedly due to the greater complexity of cases, but also, as conveyed to the consultants by representatives from the Criminal Courts and corroborated through on-line research, to the increased time it takes to receive blood tests and crime lab test results.³ With more police officers turning to blood tests to build their drunken driving cases where initial lab reports are verified by final lab reports, labs have become backlogged, creating delays in prosecution and forcing defendants to wait longer in jail for their cases to be heard. It was also noted that because participation is predicated on a guilty plea, the case cannot be disposed of until the verifying toxicology tests are complete.

Substance Abuse Treatment Dockets

Created in October 2007, the Adult Probation DWI Court is a post-adjudication outpatient treatment program offered in County Court-at-Law No. 7 to alcohol dependent, repeat DWI offenders arrested for a 2nd or subsequent DWI offense within two years of first arrest or conviction. Through collaborative partnerships between the DWI Court, public agencies, and community-based organizations repeat DWI offenders receive the support and services they needed to stop their repetitive involvement with the criminal justice system.

Adult Probation Department staff reports that without the DWI Court Program, multiple DWI defendants would typically serve jail time – either as a probated sentence with 30 full jail days as a condition; or as a jail sentence as a final disposition resulting in approximately 80 full jail days.⁴ With 54 participants, the impact of the program ranges from 1,880 to 4,320 beddays, depending on the sentence.

FINDING 1.2

- Travis County has a variety of successful Specialized Dockets that expedite court processing and help to reduce jail bedspace demand. In particular, these include the Special Reduction Mental Health Docket, the felony Magistrate Special Reduction Docket, the misdemeanor Jail Reduction Docket and the Probation Sanctions Docket.
- While the Magistrate’s Docket has reduced overall jail bed days since its inception, the “time to disposition” has increased 50% over the last 5 years, from 10 days in 2009 to 15 days in 2013. Reasons cited for the increase in disposition time include servicing a larger number of clients, greater complexity of the cases, and a general backlog at the crime lab for blood test results.

RECOMMENDATIONS

- Continue the use of Specialized Dockets and Specialty Courts. These best practice initiatives, which have become standard for the courts, improve services and have helped to manage jail bedspace demand.
- Explore ways for shortening time to disposition for the Magistrate’s Docket without compromising program integrity. A shorter disposition time would reduce jail beddays.

3 On-line Data Source: “Crime lab backlogs weigh down court system”, by investigative reporter Tony Plohetski. Austin-American Statesman, Saturday, Feb. 2, 2013. <http://www.statesman.com/news/news/local/crime-lab-backlogs-weighing-down-court-system/nWdm6/>

4 Email communication with Director Charles Robinson on May 16, 2014.

1. Criminal Courts Analysis

Impact on Court Transport

The criminal District and County Courts-at-Law are in downtown Austin, while most of the jail inmates are in the TCCC in Del Valle, about 10 miles away. This translates into a large number of inmates having to be transported back and forth on a daily basis.

TCSO is responsible for the movement of defendants to and from court. Defendants may be escorted directly from the downtown TCJ, or driven in buses and vans from TCCC. According to TCSO, there are currently 38 posts for court transport duty. With shift relief factor, this translates into about 47 staff.

As it relates to the Specialized Criminal Courts, the potential for locating a courtroom at TCCC was considered, including its potential impact on TCSO transport requirements.

Conversations with Criminal Courts and TCSO raised the possibility of holding the Misdemeanor Mental Health docket at TCCC, primarily for the benefit of minimizing transport of this difficult to manage population. As noted previously, this docket is held twice a week, on Tuesday and Thursday mornings, resulting in large volumes of individuals being transported to court at once (30 to 40 defendants per docket). In calendar year 2013, County Court-at-Law No.5 generated a total of 2,199 inmate transports (for mental health hearings as well as other cases heard as part of the regular docket). This volume represents approximately 6.8% of the total number of transports generated that year (32,572). Approximately 58% of defendants on that docket were seen by the judge, with this court having a reset rate of 40%. A reset typically results in an additional court date, and another transport.

Another possibility, which would have the most measureable impact on court transports, though not fully vetted with the Criminal Courts, is to locate the Magistrate's Court Docket and Jail Reduction Dockets at TCCC.

Table 1.1 (following page) provides the total number of inmate movements to court. Approximately 1/3 of all inmate visits to the courthouse are associated with these two dockets, for a total of 10,172 court visits in FY 2013. The majority of these defendants are transported from TCCC.

In 2013, the Magistrate's Court Docket generated 4,492 transports to Court, representing 13.8% of all 2013 transports. The Jail Reduction Docket had the most transports, at 5,680, or 17.4%. Combined, these two expediting dockets represented 31.2% of all TCSO transports.

Approximately 52% of the Magistrate's Court Docket defendants were seen by the judge, and 53% were reset. Approximately 73% of the Jail Reduction Docket Jail Call defendants were seen by the judge and the reset rate was 26%. As noted, these cases are rescheduled, necessitating another round trip transport at a later date.

The Magistrate's Court Docket cases are generally heard in the morning and the Jail Call cases are generally heard in the afternoon. A courtroom at TCCC that could hear the majority of cases for both of these dockets could reduce transport requirements considerably. Transporting 31% fewer inmates to court could result in a savings of 9-12 FTE, if the same proportion of court visits was applied to current transport FTE figures.

While locating a courtroom at TCCC could save considerable transportation costs, it would impact staffing and operational logistics for Criminal Courts and supporting departments. Also, previous attempts at using a courtroom at TCCC had the courtroom located inside the secure perimeter, and it was hardly used. Design considerations and space requirements for a courtroom at TCCC in Phase 2 of the Master Plan must include input from TCSO, Criminal Courts and supporting departments.

1. Criminal Courts Analysis

Video court was also discussed as an alternative to transporting this population to downtown courts. At present, video conferencing is primarily used by attorneys to visit with clients and for inmate interviews, and sometimes, video conferencing is used at the District Court level to take pleas from high risk felony defendants and to dispose of cases for out of state arrestees, although this is a practice not widely used.

The County may want to consider expanding the use of teleconferencing to conduct the criminal arraignment and plea proceedings of inmates. With the understanding that felony cases are just more complicated because confessions often are required and more documents are involved, the County could still consider video proceedings for misdemeanor cases. Ten years ago, the use of video conferencing was tried out by the County Courts at Law, but the pilot was discontinued. The courts have expressed openness to revisiting video appearances as the technology has improved and conditions may be different now.

TABLE 1.1 INMATE COURT STATISTICS 2013

Court	Total	Seen	Percent seen	Disposed	Of seen % disposed	Reset	Of total % rest	Held over	Court arrest	Total hours
147th	1425	1119	79%	592	53%	767	54%	62	21	1628:30
167th	1619	801	49%	569	71%	1003	62%	56	55	1494:00
299th	1817	801	44%	549	69%	1224	67%	49	27	1551:15
331st	1400	727	52%	548	75%	863	62%	24	24	1257:45
390th	1933	834	43%	540	65%	1313	68%	72	41	1561:45
403rd	1624	761	47%	609	80%	984	61%	39	32	1252:10
427th	1672	819	49%	509	62%	1107	66%	60	42	1402:30
Masters	4492	2339	52%	2015	86%	2401	53%	74	53	1956:55
CC3	587	309	53%	337	109%	234	40%	50	7	654:15
CC4	3153	1210	38%	1391	115%	1705	54%	104	42	1661:40
CC5	2199	1265	58%	1492	118%	869	40%	45	13	1102:15
CC6	696	349	50%	358	103%	292	42%	68	21	848:45
CC7	535	302	56%	299	99%	193	36%	55	5	1077:15
CC8	580	298	51%	284	95%	273	47%	36	6	694:50
AG	942	741	79%	554	75%	367	39%	19	0	1563:15
JP5	2218	2173	98%	2146	99%	32	1%	29	0	179:50
Jail Call	5680	4142	73%	4155	100%	1505	26%	17	2	3082:20
Total	32572	18990	58%	16947	89%	15132	46%	859	391	22969:15

Source: Travis County Sheriff's Office

FINDING 1.3

A large percentage of court transport volume is associated with Specialized Dockets and Specialty Courts, impacting TCSO workload.

- **Approximately one third of all inmate visits to the courthouse are associated with the Magistrate’s Docket and the Jail Call Docket.** This represents 10, 172 in-custody court visits in FY 2013, each requiring at least one round trip transport from TCCC and back. There are 47 TCSO FTE staff currently assigned to court transport; a significant portion of their overall “per capita” workload is associated with these two dockets.
- **While the Mental Health docket is addressing a critical need population, it has the potential for increased operational efficiencies.** The two day a week docket is not sufficient for the number of cases serviced. This results in large dockets that require TCSO to transport 30-40 individuals from TCCC and back. The mental health and behavioral condition of participants creates added challenges.
- **An on-site or video courtroom at TCCC would reduce the number of inmates transported to these dockets. This would lessen TCSO transport workload, reducing FTE requirements.**

RECOMMENDATIONS

- Continue discussions with the Criminal Courts about an on-site or video courtroom at TCCC to accommodate the majority of defendants for the Magistrate’s and Jail Call Dockets.
- Consider expanding the Mental Health Docket to more than two days a week. Continue discussions with the Criminal Courts about the feasibility of an on-site or video courtroom for this docket.
- Establish design considerations and space requirements for a courtroom at TCCC in Phase 2 of the Master Plan. Discussions should include TCSO, Criminal Courts and supporting departments who will need on-site staffing and space.

The consultant team was also asked to review and update the Judicial projections contained in the Central Campus Master Plan. These projections do not directly impact the Corrections Master Plan study. They are intended to provide an indication of the number of temporary courtrooms to include in the proposed new Central Booking Facility, until the Criminal Courts expansion to the Justice Center is constructed. This analysis appears in *Appendix A2 Judicial Projections Update*.

Summary Criminal Court Recommendations

- Proactively monitor and continue to prioritize in-custody cases to reduce time to disposition.
- Continue the use of Specialized Dockets and Specialty Courts, which have become standard practice for the courts. These dockets improve services and help to manage jail bedspace.
- Explore ways for shortening time to disposition for the Magistrate’s Docket without compromising program integrity. A shorter disposition time would reduce jail beddays.
- Continue discussions with the Criminal Courts about an on-site or video courtroom at TCCC to accommodate the majority of defendants for the Magistrate’s and Jail Call Dockets.
- Consider expanding the Mental Health Docket to more than two days a week. Continue discussions with the Criminal Courts about an on-site or video courtroom for this docket.
- Establish design considerations and space requirements for a courtroom at TCCC in Phase 2 of the Master Plan. Discussions should include TCSO, Criminal Courts and supporting departments who will need on-site staffing and space.

2: Custody Staffing Analysis

2. Custody Staffing Analysis

This section of the report summarizes findings and recommendations derived from the consultants' review and assessment of the current staffing patterns of Corrections Officers, Sergeants, Lieutenants, Captains and some Civilian posts of the Downtown Jail (TCJ) and Correctional Campus (TCCC). The consultant reviewed current operations and custody staff deployment, examined relief factors for translating post coverage into FTE requirements, and explored factors impacting the current use of overtime and its costs.

A detailed spreadsheet that documents required posts, calculates relief for those posts, and produces a recommended staffing complement for the Downtown TCJ and the TCCC is provided in Appendix B1.

It should be noted that this chapter addresses custody staff only. Staffing requirements for Healthcare staff are addressed in Chapter 3: Inmate Healthcare Analysis. However, a comprehensive list of all staffing recommendations for the Sheriff's Office Corrections Bureau is provided in Appendix B2: Proposed FTE Staff Changes List. While the supporting analysis and detail are provided in each respective chapter, Appendix B2 provides the reader with a list of recommended FTE staffing changes in one location.

Review and Analysis of Current Staffing Deployment Plan

Applicable Standards

The review and analysis of current staffing deployment and patterns was conducted taking into account the applicable regulatory standards governing staffing requirements.

There are three sets of regulatory standards that provide guidance for the staffing of a Texas detention facility. Those standards are provided by the Texas Jail Commission, the Prison Rape Elimination Act of 2003 (945 USC 15601) and the American Correctional Association. Texas facilities must comply with Texas Jail Commission standards and the Prison Rape Elimination Act is federal law. The American Correctional Association standards are not binding, but are recognized by most courts as correctional best practices. In addition to those standards, officials can gain insight as to the court's position on staffing by reviewing applicable case law.

Texas Commission on Jail Standards

There are several Texas standards that reference the staffing of jails and detention facilities. Two of these standards are more direct in the requirement for appropriate staffing. These standards are as follows.

Texas Administrative Code

Title 37 - Public Safety and Corrections

Part 9 - Texas Commission on Jail Standards

Chapter 27 - Supervision of Inmates

Rule §275.1 - Regular Observation by Corrections Officers

Every facility shall have the appropriate number of jailers at the facility 24 hours each day. Facilities shall have an established procedure for documented, face-to-face observation of all inmates by jailers no less than once every 60 minutes. Observation shall be performed at least every 30 minutes in areas where inmates known to be assaultive, potentially suicidal, mentally ill, or who have demonstrated bizarre behavior are confined. There shall be a two-way voice communication capability between inmates and jailers, licensed peace officers, bailiffs, and designated staff at all times. Closed circuit television may be used, but not in lieu of the required personal observation.

Rule §275.4 Staff

Inmates shall be supervised by an adequate number of jailers to comply with state law and this chapter. One jailer shall be provided on each floor of the facility where 10 or more inmates are housed, with no less than 1 jailer per 48 inmates or increment thereof on each floor for direct inmate supervision. This jailer shall provide documented visual inmate supervision not less than once every 60 minutes. Sufficient staff to include supervisors, jailers and other essential personnel as accepted by the Commission shall be provided to perform required functions. A plan concurred in by both commissioners' court and sheriff's office, which provides for adequate and reasonable staffing of a facility, may be submitted to the Commission for approval. This rule shall not preclude the Texas Commission on Jail Standards from requiring staffing in excess of minimum requirements when deemed necessary to provide a

2. Custody Staffing Analysis

safe, suitable, and sanitary facility nor preclude submission of variance requests as provided by statute or Chapter 299 of this title.

The proposed staffing plan is in compliance with these Texas Jail Commission Standards.

PREA Standards

The Prison Rape Elimination Act of 2003 (945 USC 15601) also known as PREA provided for a commission to develop standards to be adopted by the U.S. Attorney General to detect, prevent, and respond to sexual assaults that take place in prisons and other detention facilities. Standard § 115.13 of this act addresses staffing and sets forth the following provisions:

§ 115.13 Supervision and monitoring.

(a) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

- (1) Generally accepted detention and correctional practices;*
- (2) Any judicial findings of inadequacy;*
- (3) Any findings of inadequacy from Federal investigative agencies;*
- (4) Any findings of inadequacy from internal or external oversight bodies;*
- (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);*
- (6) The composition of the inmate population;*
- (7) The number and placement of supervisory staff;*
- (8) Institution programs occurring on a particular shift;*
- (9) Any applicable State or local laws, regulations, or standards;*

(10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and

(11) Any other relevant factors.

(b) In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.

(c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by §115.11, the agency shall assess, determine, and document whether adjustments are needed to:

(1) The staffing plan established pursuant to paragraph (a) of this section;

(2) The facility's deployment of video monitoring systems and other monitoring technologies; and

(3) The resources the facility has available to commit to ensure adherence to the staffing plan.

(d) Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

This standard also requires "adequate" staffing along with supervision of staff to ensure compliance. The main focus of this standard is to provide enough security to be able to respond to sexual assaults with adequate numbers of staff in a timely manner and to provide adequate supervision to ensure that inappropriate relationships do not develop between staff and inmates.

The proposed staffing plan has been developed in compliance with the Prison Rape Elimination Act. Lieutenant Shane Poole has also been identified as the PREA Coordinator for Travis County. In this capacity Lieutenant Poole is responsible for continually monitoring, training, and revising procedures and staffing to ensure ongoing compliance.

2. Custody Staffing Analysis

ACA Standards

The American Correctional Association uses standard 4-ALDF-2A-14 as a performance based standard and I-CORE-2A-09 as a minimum standard for meeting acceptable criteria for staffing. A recent U.S. Appeals Court decision (Cody v. Hillard) concluded that the ACA standards can be used to determine constitutional requirements.

The Core Standard for staffing is as follows:

Sufficient Staff

I-CORE-2A-09 (Ref. 4-ALDF-2A-14)

Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to staff safety and the security, custody, and supervision of inmates as needed to operate the facility in conformance with the standards.

This standard requires a designated supervisor “at all times” along with a sufficient amount of correctional staff. Industry standard provides for 3 levels of supervision: line level staff, supervisory staff, and command staff. The number of staff that is deemed “sufficient” can be determined based on several factors, including the philosophy of operation and the programs provided. Other determining factors are the design of the facility’s components, the types and frequency of internal inmate movement, and the various risks and needs of the inmate population.

The ACA standard 3-ALDF-1C-03 provides some guidance in determining this number by stating the following:

Staffing Requirements

3-ALDF-1C-03

Staffing requirements for all categories of personnel are determined on an ongoing basis to ensure that inmates have access to staff, programs, and services. Staffing requirements should be determined on more than inmate population figures and should include review of staffing needs for health

care, academic, vocational, recreation, library, and religious programs and services. Workload ratios reflect such factors as goals, legal requirements, character, and needs of the inmates supervised, and other duties required of staff. Workloads should be sufficiently low to provide access to staff and effective services.

A staffing plan for the correctional system should consider all of these factors and provide staffing and supervision coverage at a sufficient level to meet security and program objectives.

Court Cases

In addition to the above standards, there have been numerous court cases that address the issue of staffing. The holdings of key court decisions that address staffing may be summarized as follows:

Staff must be provided:

- To protect inmates (from themselves and from other inmates);
- To make regular visits to inmates-occupied areas and to maintain communication with inmates;
- To respond to inmates’ calls for assistance;
- To classify and separate inmates;
- To ensure the safety of inmates at all times;
- To maintain security;
- To process and supervise female inmates;
- To operate electronic surveillance;
- To ensure that all required inmate activities, services, and programs are delivered (medical, exercise, visits, etc.).

Courts have frequently found jail administrators and elected officials liable for incidents that have resulted from inadequate staffing. Costly damage awards have often been levied when staff and officials are found negligent in selecting, retaining, assigning, and supervising staff.

Approach and Methodology

The consultant team began the staffing analysis task by collecting and reviewing relevant data about current staffing for the Travis Correctional System. Data that was requested and reviewed included policies and procedures, standard operating procedures (SOPs), current staffing levels, staff deployment schedules, three years of “time off” data, and schematics of all buildings and areas.

This data was supplemented by three on-site visits and interviews with TCSO staff. The first visit began with an overview meeting with administrative staff in early April 2014. Overview, or walk-through, tours were conducted of the downtown TCJ and the TCCC buildings. After the overview tours, lengthy discussions were held to determine current staffing positions, staffing levels, deployment schedules and reporting structures for both sworn and civilian staff.

The second on-site visit took place during the last week of May 2014. This visit was dedicated to spending time in all areas of the system talking with staff, observing operations, and comparing staffing requirements with the current deployment of staff. The staff appeared to be open and forthcoming with their opinions of staffing needs, workload burdens, and opinions of working conditions in both the direct and indirect supervision housing units. After this visit a preliminary staffing plan was developed based upon the data received, as well as on-site observations and interviews.

The third visit, in July 2014, was to meet with administrative staff to review questions concerning policies, procedures, and post orders as well as key findings in the time off data analysis. This visit concluded with an interim presentation to Travis County officials on the progress of the staffing analysis.

Current Security Staffing Positions

Corrections staff are primarily located in two physical locations, the Downtown Jail (TCJ) and the Travis County Correctional Complex (TCCC). Located within the TCJ are the Central Booking Facility and short-term pre-classification housing units. The TCCC, at Del Valle, provides a total of 2,515 inmate beds distributed in seven buildings. There are an additional 288 inmate beds located in five buildings that are currently closed.

As of July 2014, staffing levels for personnel in the Correctional System totaled 959 funded positions, including both security and non-security positions. As Table 2.1 shows, the majority of those positions are Correctional Officers assigned to various shifts and locations throughout the system. This category includes Cadets, Certified Peace Officers, Corrections Officers, Corrections Specialists, and Security Coordinators. Understanding that there are differences in benefits, certifications, and duty assignments, these positions have been grouped together under a common denominator of “Correctional Officers” for the purpose of tabulating the current staff positions.

TABLE 2.1 CURRENT STAFF BREAKDOWN

Position Category	Quantity	%
Civilian (other than security)	51	5.3%
Security Coordinator	86	9.0%
Correctional Officer	736	76.7%
Sergeant	65	6.9%
Lieutenant	14	1.5%
Captain	5	0.5%
Major	1	0.1%
Total Corrections Staff	959	100%

Source: Travis County - Does not include Health Services

These 959 corrections staff positions cover all posts and job assignments established to support the daily operation of the correctional system. The primary categories for these posts are: Command (major, captains, lieutenants, and sergeants), Central Booking Facility, TCJ, Transportation, Complex/CTAC, HVU, Buildings 1/11, Buildings 2/3/CCB, Building 12, Health Services Building (HSB), Classification and Records, Laundry, Marketable Skills, Maintenance, Life Safety, Food Service, and Support. Table 2.2 disaggregates each of these positions by their primary post and location, the associated shift the post is active, the work schedule, hours of coverage, and whether the post requires relief. The purpose of this table is to obtain an overall understanding for the coverage requirements for each post, as the foundation for calculating the overall safety coverage requirements.

2. Custody Staffing Analysis

The majority of command and administrative staff are scheduled to work a Monday through Friday “business shift” from 8:00 am to 5:00 pm. Most of the security personnel are assigned to one of three 8-hour shifts (A, B, or C shift), and are scheduled to work 40 hours per week. A Shift is scheduled from 6:00 am to 2:00 pm. B Shift works from 2:00 pm until 10:00 pm, and C Shift is scheduled to work from 10:00 pm through 6:00 am.

There are personnel in some areas that are scheduled to work four 10-hour days each week. The areas where these schedules are currently used include the Security Threat Unit, some laundry staff, some warehouse staff, and the Life Safety Unit.

To operate the correctional system in Travis County 24 hours a day, 7 days a week, requires filling 613.5 positions. Approximately 30% of these positions are on A Shift; 29% are on B Shift, and 23% on C Shift. Considering all posts and all shifts, there are 175 current positions Downtown and 438.5 positions at the TCCC. In all areas of the TCJ and TCCC toured by the team, the identified posts appeared to be justified and appropriate for the tasks performed.

TABLE 2.2 CURRENT POSTS

Current Downtown Posts Post/Position	M-F	8 Hour Shifts			10 Hour Shifts	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a		Days	Hours	
Major	1.0					5	40	No
Subtotal Major Posts:	1.0	0.0	0.0	0.0			40	
Captains								
TCJ Captain/Central Booking	1.0					5	40	No
Transport/Courts Captain/HVU	1.0					5	40	No
Support Captain	1.0					5	40	No
Subtotal Captain Posts:	3.0	0.0	0.0	0.0			120	
Lieutenants								
TCJ Lieutenant	1.0					5	40	No
Central Booking Lieutenant	1.0					5	40	No
Transportation Lieutenant	1.0					5	40	No
Subtotal Lieutenant Posts:	3.0	0.0	0.0	0.0			120	
Sergeants								
Central Booking Shift Sergeant		1.0	1.0	2.0		7	224	Yes
TCJ Shift Sergeant		1.0	1.0	1.0		7	168	Yes
Transportation Sergeant	3.0					5	120	No
Subtotal Sergeant Posts:	3.0	2.0	2.0	3.0			512	
Corrections Officers								
Central Booking								
Intake		2.0	2.0	4.0		7	448	Yes
Booking Window		1.0	1.0	1.0		7	168	Yes
Booking Entry		1.0	2.0	2.0		7	280	Yes
Holding / S&E		1.0	1.0	1.0		7	168	Yes
Prints		1.0	2.0	3.0		7	336	Yes
Screening		1.0	2.0	2.0		7	280	Yes
Warrants		1.0	1.0	1.0		7	168	Yes
Court		1.0	1.0	1.0		7	168	Yes
Property / CBF Processing (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Housing Float		1.0	1.0	1.0		7	168	Yes
Magistration		1.0	1.0	1.0		7	168	Yes
Releases		2.0	2.0	1.0		7	280	Yes
Bonding		2.0	2.0	2.0		7	336	Yes
Receiving & Discharge		1.0	1.0	1.0		7	168	Yes
Main Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Subtotal Central Booking Posts:		18.0	21.0	23.0			3,472	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Downtown Posts Post/Position	M-F	8 Hour Shifts			10 Hour	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a	Shifts	Days	Hours	
TCJ								
Reception		2.0	2.0	0.0		7	224	Yes
Post 1 (Pre-Class - 45 beds)		1.0	1.0	1.0		7	168	Yes
Post 2 (Pre-Class - 52 beds)		1.0	1.0	1.0		7	168	Yes
Post 1/2 Float		1.0	1.0	1.0		7	168	Yes
Medical (13 beds)		1.0	1.0	1.0		7	168	Yes
Med Line		1.0	0.0	1.0		7	112	Yes
2 North (Max - 48 beds)		1.0	1.0	1.0		7	168	Yes
2 Float		1.0	1.0	1.0		7	168	Yes
2 South (Max - 48 beds)		1.0	1.0	1.0		7	168	Yes
3 North (Max - 48 beds)		1.0	1.0	1.0		7	168	Yes
3 Float		1.0	1.0	0.0		7	112	Yes
3 South (Max - 48 beds)		1.0	1.0	1.0		7	168	Yes
4 North (Max - 42 beds)		1.0	1.0	1.0		7	168	Yes
4 Float		1.0	1.0	1.0		7	168	Yes
4 South (Max - 43 beds)		1.0	1.0	1.0		7	168	Yes
1 Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
2 Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
3 Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
4 Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Recreation		2.0	0.0	0.0		7	112	Yes
Subtotal TCJ Posts:		22.0	19.0	17.0			3,248	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Downtown Posts Post/Position	M-F	8 Hour Shifts			10 Hour	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a	Shifts	Days	Hours	
Transportation								
Senior Office Specialist	2.0					5	80	Yes
1st Bus	3.0					5	120	Yes
2nd Bus	2.0					5	80	Yes
3rd Bus	2.0					5	80	Yes
Late Bus	2.0					5	80	Yes
TCCC	2.0					5	80	Yes
Court Staging	2.0					5	80	Yes
331st Court	2.0					5	80	Yes
Master	1.0					5	40	Yes
167th Court	2.0					5	80	Yes
299th Court	1.0					5	40	Yes
147th Court	2.0					5	80	Yes
390th Court	1.0					5	40	Yes
403rd Court	2.0					5	80	Yes
CC#7	1.0					5	40	Yes
CC#3	1.0					5	40	Yes
CC#8	2.0					5	80	Yes
CC#5	2.0					5	80	Yes
CC#6	1.0					5	40	Yes
427th Court	2.0					5	80	Yes
CC#4	1.0					5	40	Yes
AG Court						5	0	Yes
126th Court	2.0					5	80	Yes
Subtotal Transportation Posts:	38.0						1,520	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Posts at TCCC Post/Position	M-F	8 Hour Shifts			10 Hour Shifts	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a		Days	Hours	
Captains								
TCCC Captain	1.0					5	40	No
Building 12 Captain	1.0					5	40	No
Subtotal Captain Posts:	2.0	0.0	0.0	0.0			80	
Lieutenants								
Admin Lieutenant	1.0					5	40	No
Support Services / Facilities Lieutenant	1.0					5	40	No
HVU Lieutenant	1.0					5	40	No
Class / Records Lieutenant	1.0					5	40	No
Complex / CTAC Lieutenant	1.0					5	40	No
TCCC Bldg 1 Lieutenant	1.0					5	40	No
TCCC Bldg 2&3 Lieutenant	1.0					5	40	No
TCCC HSB Lieutenant	1.0					5	40	No
Building 12 Shift Lieutenant		1.0	1.0	1.0		5	120	Yes
Subtotal Lieutenant Posts:	8.0	1.0	1.0	1.0			440	
Sergeants								
HVU Sergeant		1.0	1.0	1.0		7	168	Yes
Complex / CTAC Sergeant		1.0	1.0	1.0		7	168	Yes
TCCC Buildings 1/11 Shift Sergeant		1.0	1.0	1.0		7	168	Yes
TCCC Buildings 2, 3 & CCB Shift Sergeant		1.0	1.0	1.0		7	168	Yes
TCCC HSB Shift Sergeant		1.0	1.0	1.0		7	168	Yes
TCCC Building 12 Sergeant		2.0	2.0	2.0		7	336	Yes
Classification/Records Sergeant		1.0	1.0	0.0		5	80	No
Food Service Sergeant		1.0	1.0	0.0		5	80	Yes
Facilities / Support Sergeant	1.0					5	40	No
Subtotal Sergeant Posts:	1.0	9.0	9.0	7.0			1,376	
Major	1.0					5	40	No
Subtotal Major Posts:	1.0	0.0	0.0	0.0			40	
Captains								
TCJ Captain/Central Booking	1.0					5	40	No
Transport/Courts Captain/HVU	1.0					5	40	No
Support Captain	1.0					5	40	No
Subtotal Captain Posts:	3.0	0.0	0.0	0.0			120	
Lieutenants								
TCJ Lieutenant	1.0					5	40	No
Central Booking Lieutenant	1.0					5	40	No
Transportation Lieutenant	1.0					5	40	No
Subtotal Lieutenant Posts:	3.0	0.0	0.0	0.0			120	
Sergeants								
Central Booking Shift Sergeant		1.0	1.0	2.0		7	224	Yes
TCJ Shift Sergeant		1.0	1.0	1.0		7	168	Yes
Transportation Sergeant	3.0					5	120	No
Subtotal Sergeant Posts:	3.0	2.0	2.0	3.0			512	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Posts at TCCC	M-F	8 Hour Shifts			10 Hour	Frequency		Relief
Post/Position	8-5	6a-2p	2p-10p	10p-6a	Shifts	Days	Hours	
Corrections Officers								
Central Booking								
Intake		2.0	2.0	4.0		7	448	Yes
Booking Window		1.0	1.0	1.0		7	168	Yes
Booking Entry		1.0	2.0	2.0		7	280	Yes
Holding / S&E		1.0	1.0	1.0		7	168	Yes
Prints		1.0	2.0	3.0		7	336	Yes
Screening		1.0	2.0	2.0		7	280	Yes
Warrants		1.0	1.0	1.0		7	168	Yes
Court		1.0	1.0	1.0		7	168	Yes
Property / CBF Processing (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Housing Float		1.0	1.0	1.0		7	168	Yes
Magistration		1.0	1.0	1.0		7	168	Yes
Releases		2.0	2.0	1.0		7	280	Yes
Bonding		2.0	2.0	2.0		7	336	Yes
Receiving & Discharge		1.0	1.0	1.0		7	168	Yes
Main Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Subtotal Central Booking Posts:		18.0	21.0	23.0			3,472	
TCCC Building 2								
Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
A Control		1.0	1.0	0.0		7	112	Yes
A Search & Escort		1.0	1.0	0.0		7	112	Yes
B Control		1.0	1.0	0.0		7	112	Yes
B Search & Escort		1.0	1.0	0.0		7	112	Yes
Building Search & Escort		1.0	1.0	0.0		7	112	Yes
Post A (A, B, C - 48 beds) Max		2.0	2.0	1.0		7	280	Yes
Post B (D, E, F - 48 beds) Max		2.0	2.0	1.0		7	280	Yes
G Unit - 36 beds Max		1.0	1.0	1.0		7	168	Yes
H Unit - 36 Beds Max		1.0	1.0	1.0		7	168	Yes
CCB		1.0	1.0	1.0		7	168	Yes
Subtotal Bldg 2 Posts:		13.0	13.0	6.0			1,792	
TCCC Building 3								
Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Search & Escort / Recreation		1.0	1.0	0.0		7	112	Yes
Post A (A, B, C, D - 48 beds) Min/Med		1.0	1.0	1.0		7	168	Yes
Post B (E, F, G, H - 48 beds) Med/Max & Y		2.0	2.0	1.0		7	280	Yes
Post C (I, J, K, L - 84 beds) All custodies		2.0	2.0	2.0		7	336	Yes
Post C Control		1.0	1.0	1.0		7	168	Yes
Chapel		1.0	0.0	0.0		7	56	Yes
Subtotal Bldg 3 Posts:		9.0	8.0	6.0			1,288	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Posts at TCCC Post/Position	M-F	8 Hour Shifts			10 Hour Shifts	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a		Days	Hours	
TCCC Building 12								
Control (Security Coordinator)		3.0	3.0	2.0		7	448	Yes
A Pod Officer		1.0	1.0	1.0		7	168	Yes
A1 (Min/Med) - 48 beds		1.0	1.0	1.0		7	168	Yes
A2 (Med/Max) - 48 beds		1.0	1.0	1.0		7	168	Yes
A3 (Min/Med) - 64 beds		1.0	1.0	1.0		7	168	Yes
A4 (Min/Med) - 64 beds		1.0	1.0	1.0		7	168	Yes
B Pod Officer		1.0	1.0	1.0		7	168	Yes
B1 (Max) - 48 beds		1.0	1.0	1.0		7	168	Yes
B2 (Max) - 48 beds		1.0	1.0	1.0		7	168	Yes
B3 (Max) - 48 beds		1.0	1.0	1.0		7	168	Yes
B4 (Max) - 48 beds		1.0	1.0	1.0		7	168	Yes
C Pod Officer		1.0	1.0	1.0		7	168	Yes
C1 (Min/Med) - 64 beds		1.0	1.0	1.0		7	168	Yes
C2 (Min/Med) - 64 beds		1.0	1.0	1.0		7	168	Yes
C3 (Min/Med) - 64 beds		1.0	1.0	1.0		7	168	Yes
C4 (Min/Med) - 64 beds		1.0	1.0	1.0		7	168	Yes
D Pod Officer		1.0	1.0	1.0		7	168	Yes
D1 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
D2 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
D3 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
D4 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
E Pod Officer		1.0	1.0	1.0		7	168	Yes
E1 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
E2 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
E3 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
E4 (Min/Med) - 56 beds		1.0	1.0	1.0		7	168	Yes
F Pod Officer		1.0	1.0	1.0		7	168	Yes
F1 (Med) - 48 beds		1.0	1.0	1.0		7	168	Yes
F2 (Med) - 48 beds		1.0	1.0	1.0		7	168	Yes
F3 (Med) - 48 beds		1.0	1.0	1.0		7	168	Yes
F4 (Med/Max) - 48 beds		1.0	1.0	1.0		7	168	Yes
G - Special Housing - 24 beds		1.0	1.0	1.0		7	168	Yes
South Sector Search & Escort		2.0	2.0	2.0		7	336	Yes
Center Sector Search & Escort		1.0	1.0	1.0		7	168	Yes
North Sector Search & Escort		1.0	1.0	1.0		7	168	Yes
Support Officer		1.0	0.0	0.0		7	56	Yes
Subtotal Bldg 12 Posts:		39.0	38.0	37.0			6,384	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Posts at TCCC Post/Position	M-F	8 Hour Shifts			10 Hour Shifts	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a		Days	Hours	
TCCC HSB								
Control (Security Coordinator)		1.0	1.0	1.0		7	168	Yes
Post B (Min/Med/Max - 56 beds)		2.0	2.0	2.0		7	336	Yes
Post C (Min/Med/Max - 54 beds)		2.0	2.0	2.0		7	336	Yes
Post D North (Infirmary - 20 beds)		1.0	1.0	1.0		7	168	Yes
Post D East (Infirmary - 20 beds)		1.0	1.0	1.0		7	168	Yes
Post E (Min/Med/Max - 52 beds)		3.0	3.0	2.0		7	448	Yes
Post F (Min/Med/Max - 56 beds)		2.0	2.0	2.0		7	336	Yes
Clinic Security Programs	1.0	2.0	1.0	1.0		7	224	Yes
Search & Escort		0.0	0.0	0.0		5	40	Yes
Subtotal Bldg HSB Posts:	1.0	2.0	2.0	1.0		7	280	Yes
Classification & Records								
Classification/Records Supervisor (Civ)	2.0					5	80	No
Classification/Records Deputy		1.0	1.0	1.0		5	120	Yes
Classification/Records Specialist		2.0	2.0	1.0		7	280	Yes
Classification/Records Specialist		6.0	7.0	3.5		5	660	Yes
Property Office Specialist		1.0	1.0			5	80	Yes
Corrections Security Threat Unit					2.0	4	80	Yes
Subtotal Classification/Records Posts:	2.0	10.0	11.0	5.5	2.0		1,300	
Support Services								
Facilities								
TCJ Laundry	1.0					5	40	Yes
TCCC Laundry	1.0				4.0	5	200	Yes
TCCC Warehouse	1.0				3.0	5	40	Yes
Subtotal Facilities Posts:	3.0	0.0	0.0	0.0	7.0		280	
Marketable Skills								
Marketable Skills Supervisor	1.0					5	40	No
Construction & SWAP		5.0				5	200	Yes
Security Coordinator		2.0				5	80	Yes
Carpenter	4.0					5	160	No
Painter	1.0					5	40	No
Subtotal Marketable Skills Posts:	6.0	7.0	0.0	0.0			520	

2. Custody Staffing Analysis

TABLE 2.2 CURRENT POSTS (CONTINUED)

Current Posts at TCCC Post/Position	M-F	8 Hour Shifts			10 Hour	Frequency		Relief
	8-5	6a-2p	2p-10p	10p-6a	Shifts	Days	Hours	
Life Safety								
Life Safety Supervisor	1.0					5	40	No
Safety Staff	3.0					5	120	No
Subtotal Life Skills Posts:	4.0	0.0	0.0	0.0			160	
Commissary								
TCCC Commissary Manager	1.0					5	40	No
Commissary Staff	7.0					5	280	No
Subtotal Commissary Posts:	8.0	0.0	0.0	0.0			320	
Maintenance								
TCCC Maintenance Manager	1.0					5	40	No
Building Supervisor	3.0					5	120	No
Maintenance	14.0					5	560	No
Office Specialist	2.0					5	80	No
Subtotal Maintenance Posts:	20.0	0.0	0.0	0.0			800	
Food Service								
TCJ		1.0	1.0			7	112	Yes
AM Officers		4.0				7	224	Yes
PM Officers			4.0			7	224	Yes
Inventory and Procurement	2.0					5	80	No
Subtotal Food Service Posts:	2.0	5.0	5.0	0.0			640	
Mail Room / Call Center								
Mail Room Staff	2.0					7	112	Yes
Call Center Staff		0.0	1.0	0.0		7	56	Yes
Subtotal Main Room/Call Center Posts:	2.0	0.0	1.0	0.0			168	
All Current TCCC Posts and Positions:	59.0	142.0	133.0	95.5	9.0		22,780.0	
All Current Posts and Positions:	107.0	184.0	175.0	138.5	9.0		31,812.0	

2. Custody Staffing Analysis

Review of Methods of Developing Relief Factor

Properly staffing a correctional system involves much more than multiplying the number of posts to be covered by the number of shifts. Proper staffing is determined by having the right number and type of staff, in the right place, at the right time, doing the right things. A major part of determining proper staffing is the calculation of the relief factor to ensure proper coverage of the recommended security posts. Providing proper relief, or staff coverage, is critical in determining adequate staffing for jail and correctional operations.

The translation of posts to FTE positions is made by applying an appropriate relief factor.

As reported by Sheriff's staff, Travis County has used two different relief factors over the last several years (accounts vary from 3 years to 10 years). For a seven day post a relief factor of 1.84 has been used for Corrections Officers, and a factor of 1.32 has been used for Corrections Officers that work a five day post.

Approach and Methodology

Unlike most other government or justice functions the jail is a 24-hour round-the-clock 365 days-a-year operation that has substantial security and life safety requirements. The security-related positions or posts in the jail must be staffed even when the scheduled officer calls in sick, takes vacation or is away on required training.

The process used for conducting this staffing study and calculating a proper relief factor was based on the Staffing Analysis Workbook for Jails: Second Edition, produced by the National Institute of Corrections, and is considered to be the "industry standard" process for determining appropriate staffing for local corrections.

The following passage is an excerpt from the Staffing Analysis Workbook for Jails: Second Edition, 2003:

"Many staffing issues and problems jails face, such as high overtime costs, the inability to cover needed posts, or the inability to free staff from their posts for training can be attributed to inaccurate calculation of the actual number of hours staff is available to work in the jail. This critical step requires collecting and analyzing information that will provide an accurate depiction of the real number of staff hours that are available to be scheduled for each full-time position in the jail budget. It produces accurate net annual work hours (NAWH) for each position...."

An accurate NAWH for each job classification requires information on all possible time-off categories. Different classifications of employees will have different NAWH, because of the amount of vacation time or training time that is allotted and used."

At this time it is important to point out that not every post or position requires relief. Relief is typically applied to security posts that must be staffed during certain shift work hours to maintain safe, critical operations. Typically, relief is not applied to civilian posts and positions. Therefore, positions such as Administrative Assistants, Office Specialists, and Records Analysts will not have relief applied. The Corrections Specialists that work in Classification and Records are civilians that are currently assigned to shifts. While this classification may change in the future, relief will be applied to these positions as part of this study.

In order to describe/recommend appropriate staffing for Travis County, a proper NAWH was calculated for each security job classification to determine the number of staff that must be employed to efficiently fill all security posts, even when some staff are absent. After the first on-site visit, a great deal of time was spent sorting through "time off" data collected for all the time taken off by jail employees in the last three years, from 2011 to 2013. As illustrated in Table 2.3, categories included were: time taken away for compensatory time, vacation, personal time, sick leave, holidays, Family Medical Leave Act, workers compensation, military leave, administrative leave with pay, emergency leave, weather/disasters, court time, employee relations, health and safety, unpaid time off, training, hospital duty, meetings, and transportation of inmates. While employees take time off for legitimate reasons, security posts must still be staffed to maintain the safety and security of the facilities. Therefore, the actual time off data is used to determine the proper amount of relief staff that must be hired to provide adequate coverage at all times.

2. Custody Staffing Analysis

TABLE 2.3 NET ANNUAL HOURS WORKSHEET

Travis County Corrections		Job Classification				
Net Annual Work Hours		Lieutenant	Sergeant	Corrections Officer	Sec Coord	Civilian
1	Total hours contracted per employee per year.	2,086.00	2,086.00	2,086.00	2,086.00	2,086.00
2	Avg Vacation, Personal Holiday time taken per year	140.26	156.05	105.27	93.38	117.32
3	Avg Sick time taken per year	65.90	56.94	43.45	49.06	69.19
4	Avg Holiday time taken per year	71.36	86.40	118.46	82.38	73.28
5	Avg Comp time taken per year	0.00	7.03	0.44	0.21	0.50
6	Avg Emergency Leave, Weather/Disaster time taken per year	4.09	2.97	3.41	2.33	2.04
7	Avg Leave/Time Off Without Pay taken per year	0.00	0.23	4.82	5.54	2.18
8	Avg Court time taken per year	0.11	0.22	0.28	0.09	0.26
9	Avg Emp Relations, Health & Safety, Admin Leave with Pay time taken per year	1.00	0.79	0.59	0.47	3.93
10	Avg Military Leave taken per year	5.98	0.00	8.26	1.46	1.79
11	Avg FMLA time taken per year	36.43	69.92	42.68	29.81	39.68
12	Avg Workers Comp time taken per year	1.41	5.76	5.73	3.83	1.27
14	Avg time to fill a vacancy each year	0.00	0.00	11.68	0.00	0.00
15	Avg training hours per year	30.00	30.00	41.70	30.00	30.00
16	Total hours off per year (lines 2 thru 15).	356.53	416.32	386.78	298.58	341.44
17	Net Annual Work Hours (line 1 - line 16).	1,729.47	1,669.68	1,699.22	1,787.42	1,744.56

Source: CGL, June 2014

The data used in this analysis revealed a few issues for Corrections management:

- Supervisory staff use more than twice the vacation and personal holiday time than Corrections Officers.

- Training takes place during scheduled shift hours instead of on an officer's day off. This increases the number of posts that must be covered with overtime hours. If training for staff occurs on their day off, they will be paid overtime for those training hours. However, no additional staff has to report to backfill a post and there is no time-off that will be factored into the NAWH. Currently, staff training takes place during an officer's scheduled shift. So while that officer is in training (away from their security post) another officer is scheduled to backfill said security post on overtime. This means training time must be calculated into the NAWH, subsequently increasing the relief factor. If training hours were removed from the current NAWH calculations, the relief factor for a Corrections Officer would be reduced from 1.72 to 1.68. This minor reduction in relief would result in a savings of 18 FTEs for current operations.

With the calculation of a tailored NAWH, the relief factor can be derived by dividing the number of hours per year that a post must be staffed by the number of hours one officer is available to work in a year. Staffing requirements then are determined by multiplying each post by the required relief factor.

TABLE 2.4 RELIEF FACTOR CALCULATIONS

Relief Factor	Lieutenant	Sergeant	Corrections Officer	Sec Coord	Civilian
Hours per year	8,760.00	8,760.00	8,760.00	8760.00	8760.00
Hours per year divided by NAWH	5.07	5.25	5.16	4.90	5.02
Relief Factor	1.69	1.75	1.72	1.63	1.67

Source: CGL, June 2014

Proper relief factors will vary depending upon the type of post/position to which they are applied. For example, a post that is staffed for 40 hours each week will require fewer staff (and relief) than a post that is staffed 24/7. What is important when determining the required relief for a particular job classification is to factor an accurate NAWH.

The large amount of vacation and personal time taken by sergeants is the primary reason their relief factor is 1.75. Relief is applied only to those sergeants that are assigned to a shift. Relief should be applied only to those lieutenants that are assigned to shifts in Building 12.

2. Custody Staffing Analysis

FINDING 2.1

The relief factors being used by TCSO are several years old and do not incorporate the actual “net annual work hours” associated with each job classification.

RECOMMENDATION

The Net Annual Work Hours and relief factors for each job classification should be updated annually using the three most recent years of data. This will ensure the relief factors used are up-to-date and reflective of actual time off data.

FINDING 2.2

Training of staff during scheduled shift hours impacts FTE requirements.

While that officer is in training, his post must be filled by another officer on overtime, and the scheduled training time must be calculated into the NAWH, subsequently increasing the relief factor.

RECOMMENDATION

Conduct staff training during off-duty time. This can result in a savings of as much as 18 FTEs that can be reallocated to other areas in need of additional staffing.

Proposed Staffing Plan

A relief factor of 1.69 was applied to the Lieutenants that are assigned to shifts, a factor of 1.75 was assigned to the Sergeant positions that require relief, a relief factor of 1.72 was applied to all Corrections Officer positions, and a relief factor of 1.63 was applied to the Security Coordinator staff. Relief for civilian staff was calculated to be 1.67. This is a factor that is not typically applied to civilian positions as those are not security positions that are required to be staffed when that employee is away from work due to vacation, illness, etc. However, as mentioned earlier, TCSO uses Corrections Specialists in the Classification and Records Division that are civilian positions. These positions are assigned to all three shifts that are staffed on either a 5-day or 7-day schedule. These are the only civilian positions that relief was applied to in this study.

The staffing structure for Building 12 is different from the other buildings that house inmates at TCCC. Due to Building 12’s capacity, 1,336 beds, there is a Captain assigned to oversee all operations in this building. All other buildings used for housing inmates have a Lieutenant that oversees operations. These other buildings also have Sergeants in charge of operations for each of the three security shifts. Building 12, however, has Lieutenants in charge of each of the 3 security shifts. The number of Corrections Officers required to supervise the inmate population does not vary much at all due to the ratios required by Texas jail standards. The staffing impact for this structure is instead experienced at the supervisory level.

Travis County should explore revamping the secure supervisory structure at TCCC which would reduce the number of supervisory staff required. Currently, there is a Lieutenant in command of each housing building, and a Captain in command of Building 12. A recommended option would involve keeping one Captain in charge of TCCC. A lieutenant would be placed in charge of each shift for all of the secure TCCC operations, and sergeants would be in command of each shift within each building and area, including Building 12. This option would reduce the number of Captain positions by one, and would reduce the secure Lieutenant positions by five. Factors to consider, should this option be further explored, include union agreements and current salary structures.

Consistent with the methodology described above, after application of proper relief factors to all appropriate positions, there appeared to be a justification for a total number of 962 staff required to manage jail and correctional operations in Travis County. (This includes the operation of all areas currently in use for housing, programs and services. It does not include areas that have been closed or decommissioned, such as Buildings 5-9 on the Del Valle campus.)

Table 2.5 shows a comparison of the proposed staffing FTEs by area with current staffing. A comparison of current vs. proposed staffing plans indicated that some areas seemed to be currently overstaffed while others did not have the required staffing to properly carry out their duties. The comparison of total staff showed Corrections to be understaffed (at the time of the study) by three positions overall, which is minor considering a total of nearly 1,000 FTEs.

2. Custody Staffing Analysis

TABLE 2.5 PROPOSED V. CURRENT FTE COMPARISON: ALL AREAS

Post/Position	Proposed FTEs	Current FTEs	+/-
Command	74	86	12
Transportation/HVU	106	77	-29
Downtown Booking/TCJ	196	191	-5
TCCC Housing /Security	465	490	25
Classification & Records	38	31	-7
Support Services	83	84	1
Staff Totals:	962	959	-3

Source: CGL, November 2014

Next is a comparison of staffing plans (proposed vs. current), organized by major staffing category:

Table 2.6 shows the comparison of the proposed *Command Staff* positions with current staffing. The number of Captains appears to be appropriate. The Lieutenants are two positions short for the current operations, and the number of current Sergeants exceeds the proposed number by 9 FTEs. **Note: The apparent mathematical error in the “+/-” column is due to rounding.**

TABLE 2.6 PROPOSED V. CURRENT FTE COMPARISON: COMMAND STAFF

Post/Position	Proposed FTEs	Current Staff	+/-
Command			
Major	1	1	0
Captains	4	5	1
Lieutenants	11	14	3
Sergeants	57	66	9
Command Subtotal	74	86	12

Source: CGL, November 2014

The *Transportation and Hospital Visitation Unit* (HVU) have the greatest current need for additional staffing. The Transportation unit is understaffed primarily due to a reduced relief factor being applied to these five day a week positions. Applying a proper relief factor would add additional transportation officers, giving them the appropriate number of staff required.

In addition to registering and supervising visitors to the TCCC, the HVU officers are tasked with the transportation of inmates to the hospital and outside medical appointments. For the last three years corrections officers have spent an average of 20,715 hours providing security to hospitalized inmates. When these hours are divided by the NAWH of a corrections officer, there is a need for 11.6 FTEs (or 12 FTEs rounded) just to provide hospital security. Once a proper relief factor is applied there is justification for a total of 20 FTEs for hospital duty. This is the primary reason for such a large increase in proposed staffing for the HVU.

TABLE 2.7 PROPOSED V. CURRENT FTE COMPARISON: TRANSPORTATION/HVU

Post/Position	Proposed FTEs	Current FTEs	+/-
Transportation/HVU			
Transportation	47	41	-6
HVU	60	36	-24
Transportation/HVU Subtotal	106	77	-29

Source: CGL, November 2014

The current staffing levels at the downtown location are almost where they need to be. The *Central Booking Facility* is currently understaffed by 9 FTEs, while the TCJ appears to be overstaffed by 4 FTEs.

TABLE 2.8 PROPOSED V. CURRENT FTE COMPARISON: BOOKING/TCJ

Post/Position	Proposed FTEs	Current FTEs	+/-
Downtown Booking/TCJ			
Central Booking	104	95	-9
TCJ	92	96	4
Downtown Booking/TCJ Subtotal	196	191	-5

Source: CGL, November 2014

The various areas that make up the housing/security section at the TCCC vary in their current staffing levels versus those that are recommended by the consultant team. It appears that almost all have excess of staff assigned to these units. The largest of these discrepancies is in Complex/CTAC Unit.

2. Custody Staffing Analysis

TABLE 2.9 PROPOSED V. CURRENT FTE COMPARISON: TCCC HOUSING/SECURITY

Post/Position	Proposed FTEs	Current FTEs	+/-
TCCC Housing /Security			
Building 1/11	67	67	0
Building 2/3/CCB	94	98	4
Building 12	195	203	8
HSB	77	79	2
Complex/CTAC	32	43	11
TCCC Housing /Security Subtotal	465	490	25

Source: CGL, November 2014

The *Classification and Records* section is an area that is understaffed by 7 FTEs when compared to the proposed number of staff required to perform these duties. The Security Threat Unit is housed under this section, which is a bit unusual. A more appropriate section to house this Unit may be the Complex/CTAC section or the Life Safety section.

The proposed FTEs for Classification and Records staff are based upon the processes currently in place. Classification staff are primarily civilians who currently do not conduct face-to-face interviews and assessments on arrestees entering the system. Also, reassessments are reported to take place every time an inmate receives a disciplinary report. If, as discussed later in this report, recommended changes are implemented to the current processes as to include conducting face-to-face interviews, the proposed number of staff for the Classification and Records section may change.

TABLE 2.10 PROPOSED V. CURRENT FTE COMPARISON: CLASSIFICATION AND RECORDS

Post/Position	Proposed FTEs	Current FTEs	+/-
Classification & Records			
Classification & Records	38	31	-7
Classification & Records Subtotal	38	31	-7

Source: CGL, November 2014

The proposed staffing numbers indicate that the *Support Services* section is currently staffed with one additional FTE than is required. However, due to the unique tasks that are completed in these various sections, they should be individually assessed. The laundry is in need of two additional FTEs. These additional staff requirements are due to the application of an appropriate relief factor. Each of the other sections has either one or two additional FTEs that is required.

TABLE 2.11: PROPOSED V. CURRENT FTE COMPARISON: SUPPORT SERVICES

Post/Position	Proposed FTEs	Current FTEs	+/-
Support Services			
Laundry	12	10	-2
Market Skills /Maint / Life Safety	39	39	0
Food Service	19	20	1
Support	13	15	2
Support Services Subtotal	83	84	1

Source: CGL, November 2014

Table 2.12 illustrates the total number of proposed versus current FTEs, and the deltas. As mentioned earlier, variances such as these are typically corrected through attrition and staff realignment.

2. Custody Staffing Analysis

TABLE 2.12 PROPOSED V. CURRENT FTE COMPARISON: ALL AREAS

Post/Position	Proposed FTEs	Current Staff	+/-
Command			
Major	1	1	0
Captains	4	5	1
Lieutenants	11	14	3
Sergeants	57.46	66	9
Housing / Transportation			
Central Booking	104.31	95	-9
TCJ	91.77	96	4
Transportation	46.53	41	-6
Complex/CTAC	32.22	43	11
HVU	59.65	36	-24
Building 1/11	66.76	67	0
Building 2/3/CCB	93.75	98	4
Building 12	195.38	203	8
HSB	76.58	79	2
Classification & Records			
Classification & Records	38.09	31	-7
Support Services			
Laundry	12.27	10	-2
Market Skills /Maint / Life Safety	38.59	39	0
Food Service	19.18	20	1
Support	13.16	15	2
Staff Totals:	962	959	-3

Source: CGL, November 2014

Fiscal Implication

The average salary for a Corrections Captain is reported to be \$126,046 base salary. Reducing the staff projections by one Captain position would represent a savings of \$161,789 in FY 2013 funds once benefits are added. According to the FY13 Peace Officer Pay Scales for the TCSO, a Corrections Lieutenant Step 10 (middle of the pay grade) earns a salary of \$98,509.01. Once benefits are added, the total salary for 3 Corrections Lieutenants is more than \$384,185. A Corrections Sergeant, Step 10 earns a base salary of \$86,551.92. The total salary, with benefits, for an excess of 9 Sergeants FTEs is \$1,020,447. The total cost of adding 9 additional Corrections Officer FTEs totals 651,824, and seven additional civilian staff would be approximately \$385,446. If all required FTEs for the various ranks and positions were balanced to the recommended levels, totaling 968 positions, the total budget increase for salaries would be approximately \$449,687 in FY 2013 dollars. The total salary implications of this staffing reorganization and adjustment would be a savings of approximately \$1,364,284 in FY 2013 dollars..

TABLE 2.13 SALARY IMPLICATION

Position	Salary with Benefits	Proposed Adjustments	FY '13 Salary Implication
Captains	\$ 161,789.00	-1	\$ (161,789.00)
Lieutenants	\$ 128,061.71	-3	\$ (384,185.14)
Sergeants	\$ 113,383.02	-9	\$ (1,020,447.14)
Corrections Officer	\$ 72,424.91	+9	\$ 651,824.18
Civilian	\$ 64,241.00	+7	\$ 449,686.99
Total		+3	\$ (1,364,284.08)

FINDING 2.3

The command rank structure at TCCC is not consistent with the remainder of the correctional system - particularly in Building 12, where a Captain is in command of the building and Lieutenants are in charge of each shift.

RECOMMENDATION

Reorganize the command rank structure at TCCC. One Captain should be in command of the overall TCCC, and a Lieutenant should be in overall command of each shift. All buildings (including Building 12) should have a Sergeant supervising operations for each shift.

2. Custody Staffing Analysis

Review of Overtime Usage

The use of overtime has fluctuated greatly over the last several years. After a significant decline in 2011 (27%), there was a 20% increase in overall overtime hours from 2011 until 2012. Then the rate doubled to a 40% increase in overtime usage from 2012 to 2013. While the rate of growth has declined somewhat in 2014, there was still a 20% increase from the overtime hours used in 2013. During the course of interviews, Sheriff's staff were unable to determine the cause of such increases.

TABLE 2.14 OVERTIME USAGE TRENDS

2014	2013	2012	2011	2010	2009
69,113	55,424	33,443	26,744	34,057	21,225
64,836	52,797	30,681	24,046	25,082	= Coverage
90	125	198	1,047	6,653	= FLSA
2,648	1,724	3,040	1,598	2,561	= Hospital
375	0	0	854	3,412	= Sec Screen
1,304	1,163	2,727	523	Unk.	= Other
-140	-385	-484	Unk.	Unk.	= Flexed (Subtract)
69,113	55,424	36,162	28,068	37,708	= Total OT Hr
20%	40%	20%	-27%	38%	= Yearly Increase

Source: Travis County Sheriff's Office/ CGL

The total number of overtime hours for 2013 was then broken down by assigned area of work (Table 2.15). The largest number of overtime hours came from staff working in building 12. This is not surprising, however, as building 12 has more officers assigned than any other area. To derive a relative comparative analysis, the total number of staff assigned to each area was then divided into the overtime hours. On a per staff basis Building 12 had the largest number of annual overtime hours in the system with an average of 119 hours each. Until recently, the majority of new officers were assigned to Building 12. These new officers had to complete the Training Academy as well as spend several weeks with a Field Training Officer before they were allowed to work on their own. This should explain why the average overtime hours were historically high for staff assigned to Building 12.

Staff assigned to the Hospital/Visitation Unit (HVU) also averaged more than 100 hours of overtime per staff member annually. As discussed earlier, there has been an average of more than 20,000 total hours each year (both regular time and overtime) providing hospital security for inmates. This would account for the high number of overtime hours for staff assigned to the HVU. If properly staffed, the amount of overtime used by this section should decline.

Staff assigned to Building 1 had an average of 70 hours of overtime in 2013. It is reported that two housing units in Building 1 were operated when there were no official staff positions allotted for those units. Therefore, the units were operated on straight overtime hours.

TABLE 2.15 OVERTIME USAGE BY AREA

2013	OT Hrs	OT per FTE
Building 12	25,813.7	119.0
Building 1	5,190.8	70.1
TCJ	5,055.6	49.1
HVU	4,181.0	102.0
Central Booking	3,894.9	37.8
HSB	2,971.2	35.0
Buildings 2/3/CCB	4,194.8	39.6
Complex/CTAC	1,966.3	39.3
Transportation	591.6	12.3
Averages:	5,984.4	56.0

Compiled by CGL, July 2014

There are times when overtime hours can be planned and scheduled. The administration is aware when staff will be attending training in the Academy, shadowing a Field Training Officer (FTO), on vacation, or on military leave. It is when staff do not report to work due to illness or unexpected situations that a bigger burden is placed on supervisors to ensure minimum post coverage.

Fiscally speaking, there are many instances where paying overtime is less costly than hiring additional staff. Overtime does not require the payment of additional leave, insurance and other fringe benefits. However, overtime is a resource that must be closely monitored and managed especially in a law enforcement or corrections environment. Too much overtime results in staff that are tired, burned out, and not as alert as they should be while working. The very nature of the work that is performed by Corrections staff dictates that staff should constantly be fresh, ready and alert. Failure to do so can easily result in harm to inmates, staff and the general public. The heightened liability and financial consequences could result in costs far greater than hiring adequate numbers of staff.

Restricted Duty

There are also times when staff are called in to work overtime for situations that have not been planned in advance. In 2013 there was a daily average of more than 125 hours of overtime worked for staff that were on restricted duty. In other words due to some sort of illness or injury staff were restricted from having any contact with the inmate population. These hours equate to more than five individuals on a daily basis. If an officer is working on restricted duty post (which officially does not exist) they are receiving full compensation for their time worked. However, since the staff person is on a restricted duty post other staff must be called in to work the regular duty post. The officer that is called then is earning overtime pay. In this situation Travis County is paying 2 ½ times the salary for one regular duty post.

FINDING 2.4

An overall comparison of current vs. proposed staffing FTEs by staffing area indicated that some areas seemed to be currently overstaffed while others did not have the required staffing to support current operations and overall post coverage. .

RECOMMENDATION

Assess the areas that are currently overstaffed as well as understaffed. Take the necessary steps to reallocate existing staff to areas with the greatest need for additional personnel.

Leave Time

It was reported to the consultant team that Travis County employees used to have a limit of 240 hours leave time that they could accrue. Several years ago this was reportedly lifted due to staff shortages which resulted in the inability of staff to use their accrued leave time. Apparently this limit has not been reinstated. As a result there are some staff now reporting leave balances of hundreds, and even thousands, of hours. This practice has placed Travis County in a new predicament. Many staff now have more leave hours than they are allowed to take in a given year, and their balances are continually increasing. Since staff are unable to take their accrued leave time, the County is now faced with paying staff very large balances of unused leave time upon their retirement.

2. Custody Staffing Analysis

FINDING 2.5

There is no limit to the amount of vacation time that can be carried over annually, and many officers have significant time accrued. While typical vacation coverage is considered in the relief factor, extensive coverage requirements for high usage for extended periods of time can result in overtime.

RECOMMENDATION

Travis County should re-evaluate the current accrued vacation time policy and consider placing a limit on the number of accumulated leave hours that can be carried over to subsequent years. Staff currently having a leave balance in excess of this amount should be allowed to use these excess hours until they return to the maximum number of hours allowed. However, the staff should not be accruing additional hours of leave until they return to the maximum number of hours allowed.

Data was provided by TCSO staff later in this study process for the FY2014 overtime data once the fiscal year was complete. By building location, the increase varied from a low of a 3% increase in the HSB to a high of 152% in the Transportation Unit. Overall for the fiscal year, the total increase was 109%, or 6,521 hours. However, for the last half of FY2014 the overtime hours have been declining on a monthly basis.

TABLE 2.16 2013-2014 OVERTIME USAGE COMPARISON

Staff Location	2013 Overtime Hours	2014 Overtime Hours	% Increase from 2013
Building 12	25,813.7	59,948.0	132%
Building 1	5,190.8	10,559.1	103%
TCJ	5,055.6	7,351.0	45%
HVU	4,181.0	9,867.6	136%
Central Booking	3,894.9	9,729.9	150%
HSB	2,971.2	3,069.7	3%
Buildings 2/3/CCB	4,194.8	8,425.9	101%
Complex/CTAC	1,966.3	2,109.9	7%
Transportation	591.6	1,492.5	152%
Averages:	5,984.4	12,505.9	109%

Compiled by CGL, November 2014

Inmate Movement

A primary goal of corrections is the provision of safe and secure custody and control of the inmate population. Minimizing movement outside of an inmate's assigned housing unit is one way this is provided. However, due to needs involving programs, health care, and legal matters there are many times when inmates must be moved to various locations both inside and outside the facility.

Internal Movement

Travis County appears to have an effective and efficient process for moving inmates within and between their facilities, both downtown and at Del Valle. Staff recognize that not every inmate requires an escort for internal movement. The determination is made based upon the inmate's risk factors and custody level.

Downtown at the TCJ all internal inmate movement is escorted because all inmates are either pre-classification status, or are housed in maximum security or special management housing. Escorts are required for these inmates due to known factors (maximum security) and unknown factors (not yet classified).

Internal inmate movement at the TCCC varies depending upon the custody/ classification level of inmate that is being moved. Each building that houses inmates at Del Valle has search and escort officers assigned. These officers are available to provide escort for inmate movement depending upon their specific risk and need. There are also Complex officers to provide escorts and to supervise the movement of inmates between buildings. As a general rule, lower custody inmates (minimum and medium) can move without escort, while higher custody inmates (maximum and special management) require escort staff. This is a very efficient use of staff resources.

External Movement

The risk of inmate escape, and threat to public safety, are always highest when inmates are being transported outside of the facility. This could be during a trip to a medical appointment or to a court hearing. External movement not only deals with the restraint, supervision, and transport of the inmate: searching and preparation of the transport vehicle, surveilling the immediate surroundings, and gaining access to the destination facility are all standard duties that require the presence of more than one officer. Until recently the practice was to use one transportation officer to transport small numbers of inmates outside of the facility. Recently, Sheriff Hamilton instituted a directive requiring at least two transport officers whenever high risk inmates are to be moved outside the facility. In an August 29, 2014 memo to the Commissioners Court, Major Priddy explained the new directive this way:

“In late 2013 we took a hard look at our practices and realized that in an attempt to be fiscally responsible we were jeopardizing the security of our staff and the citizens that we serve. We had been doing medical transports with one officer on all but the highest risk inmates, and frankly we’ve been lucky that nothing bad happened. Since recognizing the threat, we are no longer willing to gamble the safety of the community who expects us to protect them, and we now use two officers to transport all maximum security inmates off-site”

While this directive will result in an increase in the required number of transportation staff, it is a good move to ensure the safety of the public, staff, and inmates.

The current practices of internal and external movement of inmates should be continued. The decision of whether to escort or simply observe and monitor internal movement should continue to be based upon the particular inmates risk, need, and custody status. Requiring more than one officer to be present while transporting inmates outside the facility is a sound, “best practice” that should be continued to ensure proper safety and security measures.

Policy and Standard Operating Procedures Review

The consultant team conducted a review of the Sheriff Department’s Policy and Procedures Manual and the Standard Operating Procedures (SOPs), as they may impact required staffing levels.

Policy and Procedure

The consultant team reviewed the current Policy and Procedure Manual as provided by Sheriff’s Office staff. While not directly related to the Staffing Analysis, the following observations and issues are worth noting:

- The Table of Contents lists all policies by title and shows the date of last revision. According to this listing there are quite a few policies that have not been revised since 2004. Typically each policy is signed and authorized by the Sheriff along with an effective date. All policies with a revision date of 2008 or older are signed by Sheriff Frasier. Many jurisdictions do not consider a policy to be “in effect” unless it is signed by the sitting Sheriff.

The consultant team recommends that policies not only list the most recent revision date, but also the last date of review. Each policy and procedure should be signed by the current Sheriff. To reduce potential liability, this would demonstrate that staff have reviewed each policy and they have the Sheriff’s endorsement. This will also reduce confusion as to whether policies from a previous administration are still in effect.

- The beginning of each policy references applicable ACA (American Correctional Association) standards. The standards referenced, however, are ACA third edition standards.

As the ACA released their fourth edition standards several years ago, is recommended that the policies and procedures be updated to reference the most current ACA standards. It is also recommended that Texas Jail Commission standards be referenced on each policy as well.

- As the current policies are written, there are none that directly impact staffing levels. Policies that address inmate movement, both internal and external, discuss proper restraining requirements for the inmates.

These policies do not address the numbers of staff that are required to perform these tasks and should be updated.

2. Custody Staffing Analysis

- The Policy and Procedure Manual Table of Contents lists policy 2.1.2 Continuous Staff Observation. The date of last revision for this policy states “No Draft”. Sheriff’s staff informed the consultant team that no draft was ever submitted for this policy. Therefore, there is no policy on or for Continuous Staff Observation. This is a policy topic of great benefit to staff and to inform required staffing levels. The term “continuous observation” is very specific in corrections. This typically is used when describing the supervision required for inmates that pose the most serious risk of harm to themselves or others. One officer is posted with one inmate providing continuous, unbroken, observation. This level of observation has great impact on staffing levels for any shift, and impacts staffing requirements overall if required for a prolonged period of time or for multiple inmates.

Develop and implement a policy for Continuous Observation. Liability to the Sheriff and County could be greater by having the topic in the Policy and Procedure Table of Contents, yet having no policy.

Standard Operating Procedures (SOPs)

The Standard Operating Procedures (SOPs) for the jail and correctional system were reviewed by the consultant team, with the following issues and observations noted:

- Each building, or area, appears to draft their own SOPs. This could lead to a great deal of duplicated effort, as well as confusion for line staff who work in more than one building.
- The SOPs of these are written in different formats, various levels of detail, and various topics. For example: Building 1 and building 12 each have an SOP for cleaning, disinfecting, and distributing mattresses to inmates. This is an SOP that should be universally applied in all housing areas in the jail and correctional system. However, Building 2, the HSB, and the downtown jail facility do not have SOPs for this topic. Building 1 has a total of 35 SOPs, Building 2 has a total of 31, and Building 12 has 84 SOPs.

- The SOPs for Building 1 are fairly consistent with their formatting, but are inconsistent as to whether they provide a revision date. The SOPs for Building 2 are fairly consistent with formatting. However, some contain revision dates, some contain clipart, and some contain signature lines but no signatures. The SOPs for Building 12 are very consistent in their formatting. Each contains a space to record an effective date, but no dates are listed. The SOPs for the TCJ are also consistent in their formatting, but do not have an effective date.
- While the items listed do not directly impact the quantity of staffing required for operations, proper staffing involves more than just adequate numbers of staff. Proper staffing means that facility has the right type of staff, in the right places, doing the right things. For standard operating procedures to be effective they should be standardized. Each building can have its own unique way of completing certain tasks. But basic procedures and protocols should be consistent across all buildings and enforced accordingly. This will help eliminate confusion for staff as they rotate through the various posts throughout the system, and also support accountability for staff based on a documented set of expectations.

A universal topic list of SOPs should be developed and adopted for all areas of operation throughout the correctional system. Deviations that are unique to a particular area or location should be noted. Otherwise, the SOPs should be written with a consistent format and level of detail.

Impact of Numerous Independent Housing Facilities

The TCCC has 12 separate buildings that are capable of housing the inmate population. Five of these buildings (Buildings 5 through 9) are currently closed and represent a total of 288 decommissioned beds. For planning purposes, these beds are not included in the current available capacity. TCSO staff have reported that these buildings are offline, but are continuously maintained so they would be available for reach activation as an emergency measure in the event the inmate population surges. In the long-term these buildings are not ideal due to their small size and age.

The remaining seven buildings have a total of 2,470 available beds today. Four of the eight housing units in Building 1 are constructed with 60 beds each. However, to remain in compliance with Texas Jail Commission staff to inmate ratios, these housing units are each operated with 48 inmates. If more than 48 are housed, an additional Corrections Officer must be added to maintain compliance with Texas Jail Standards.

2. Custody Staffing Analysis

For planning purposes, housing units in Building 1 should continue to operate with 48 inmates. Although this reduces the available capacity for Building 1 from 432 to 384 beds, operating these units beyond 48 beds would not be a cost effective alternative to current practices.

The spread of bed space capacity across three comparatively small buildings (Buildings 1, 2 and 3) is resulting in a redundant supervisory hierarchy. Each building is operated under a chain of command hierarchy, with a Lieutenant in charge of overall operations for each building, and sergeants assigned to supervise each of the 3 security shifts.

The staffing structure for Building 12 is different from the other buildings that house inmates at the TCCC. Due to Building 12's capacity, 1,336 beds, there is a Captain assigned to oversee all operations in this building. All other buildings used for housing inmates have a Lieutenant that oversees operations. These other buildings also have Sergeants in charge of operations for each of the three security shifts. Building 12, however, has Lieutenants in charge of each of the 3 security shifts. The number of Corrections Officers required to supervise the inmate population does not vary much at all due to the ratios required by Texas Jail standards. This staffing impact for this structure is instead felt at the supervisory level.

In the past decade several housing buildings on the Del Valle campus were demolished and replaced with Building 12 which has a capacity of 1,336 inmates. The remaining buildings used for housing are of outdated design and are beginning to show their age. If a similar plan were to be undertaken today, Buildings 1, 2, and 3 could be replaced with a single, larger capacity building. This option may not reduce the number of corrections officers that would be required, but may save on the number of shift supervisors that would be required. This is an option that should be explored in greater detail during Phase 2 of this project.

TABLE 2.17 BEDSPACE BY AREA

TCCC					
Building	Building Design Capacity	Available Beds Today	Required Staffing		
			Lt.	Sgt.	C/O
1	432	384	1	5.25	54.44
HONORS	96	96			9.90
2	168	168	1	5.25	46.19
3	180	180			39.59
CCB	48	48			4.95
12	1,336	1,336	5	10.49	188.07
HSB	255	258	1	5.25	73.77
5 (closed)	48	0			
6 (closed)	48	0			
7 (closed)	48	0			
8 (closed)	48	0			
9 (closed)	96	0			
TCCC Total:	2,803	2,470	8	26.24	416.91

2. Custody Staffing Analysis

Alternative Schedule and Staffing Plan

The consultant team developed an alternative staffing plan for 12 hour shifts as opposed to the eight hour shifts currently being used. The net annual work hours, and resulting relief factor, were recalculated for 12 hour shifts. As a result, these calculations netted an increase of approximately 38 FTEs when compared to calculations for eight hour shifts. Therefore, the recent move by the Sheriff's office from 12 hour shifts to eight hour shifts resulted in a more efficient staffing plan.

Job Classifications

Travis County currently uses several different level classifications of staff to manage the jail and correctional operations. Staff classifications include Cadets, Certified Peace Officers, Corrections Officers, Senior Corrections Officers, Corrections Specialists, and Security Coordinators. All of the staff classifications manage and deal directly with the inmate population except for Security Specialists and Security Coordinators. These staff are not fully certified Corrections Officers, and are assigned to posts where they do not come into direct contact with inmates. Since they are not fully certified Corrections Officers, their salaries and benefits packages are less than that of the fully certified Corrections Officer or Peace Officer.

Many jurisdictions use multiple job classifications in their detention facilities. Civilian staff are often used to operate control centers, booking, and classification. When smaller jurisdictions use civilians or partially certified staff to work control rooms, they often maximize their flexibility to rotate staff between multiple posts and assignments. In Travis County, however, this is not the case. The corrections operation currently has more than 950 staff, of which 108 are Security Coordinators and Security Specialists. This is a good example of utilizing various job classifications as a fiscal benefit to the County, as well as the career ladder for staff.

Staff Assignments

Travis County has a way of tracking staff FTEs that is different from other jurisdictions that the consultant team has worked with previously. Rather than funding and allocating a certain number of staff classifications to the Sheriff for jail operations, the numbers and types of FTEs are allocated to each building or work area. For instance, rather than allocating 86 Security Coordinators to be distributed as needed, there are 11 Security Coordinators allocated to Central Booking, 21 Security Coordinators allocated to the Central Jail, 2 for the SWAP program, 13 assigned to Building 2, and so on. This is also the case for all other job classifications including Corrections Officers, Sergeants, and Cadets.

If these staff were only allowed to work these areas, there would be great difficulty in providing staff coverage whenever an officer is absent due to vacation, illness, etc. However, the consultant team spoke with many staff that indicated they have worked in many different buildings and locations. This supports the practice of moving staff as appropriate to provide staff coverage to various areas that are in need of additional staff.

Staff are assigned, by Sheriff's administration, to specific buildings and work locations for a period of 6 six years. At the end of this period of time staff are reassigned to different work areas. However, the practice of the County in allocating particular staff to specific work areas appears to be an overly detailed process.

As long as staff can be temporarily shifted to other locations as needed to provide security coverage, the allocation of staff by duty station is an administrative decision by TCSO. As such there is no recommendation for changing this practice.

Summary Staffing Recommendations

In summary, the consultant team’s assessment proposes the following recommendations to the current staffing plan for the Jail and Corrections System:

- Incorporate the updated Net Annual Work Hours and relief factors for each job classification annually using the three most recent years of data.
- Conduct staff training during off-duty time.
- Reorganize the command structure at the TCCC to be consistent throughout the system.
- Assess the areas that are currently overstaffed as well as understaffed. Take the necessary steps to reallocate existing staff to areas with the greatest need for additional personnel.
- Eliminate restricted duty posts, and require staff to return to work only when they can report to full duty status.
- Reinstate a limit to the number of leave hours a staff person can accumulate.

Recommended Staffing for Current Operations

The staffing analysis for existing operations found the need for 962 staff FTEs. This is 3 more FTEs than current staff levels. Travis County should assess the areas that are currently overstaffed as well as understaffed, and take the necessary steps to reallocate existing staff to areas with the greatest need for additional personnel. Staffing numbers should be reviewed on an annual basis to ensure the correct number, and type, of staff are funded and stationed appropriately to ensure a professional operation.

Appendix B1 Recommended Staffing for Current Operations displays a breakdown of the correct number of staff required by building or functional component and the recommended deployment across all shifts. Each Position/Post is listed along with the total required working hours. The Net Annual Work Hours (NAWH) for each job classification are calculated to determine the total FTEs required for every post and position.

TABLE 2.18 RECOMMENDED CUSTODY STAFFING FOR CURRENT OPERATIONS

Position	FTE
Major	1
Captain	4
Lieutenant	11
Sergeant	57
Corrections Officer	729
Security Coordinator	79
Civilian (other than security)	79
Total FTE	962
<i>Source: CGL, November 2014</i>	

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3. Inmate Healthcare Analysis

3. Inmate Healthcare Analysis

The Needs Assessment included a review and evaluation of the County's current inmate health care services delivery system, with an eye toward improving operational efficiencies that could reduce costs. This chapter provides a descriptive overview of the current inmate health care system as both a context for existing conditions and a frame of reference for future needs. It presents the consultant team's analysis and findings, and identifies strategies and recommendations to improve health service delivery and/or impact operational costs.

Approach and Methodology

The evaluation of the inmate health care system engaged the services of a correctional healthcare consultant working with the CGL team. In conducting the review, the consultant team evaluated essential components of the inmate health care system. These included organizational structure and staffing, health care processes and trends, costs, and general quality of care considerations for both medical and mental health components. Staffing recommendations in this chapter relate to medical and mental healthcare staff only. A full, combined listing of Custody and Healthcare staffing recommendations can be found in Appendix 2B.

Not all findings and recommendations center on cost reduction strategies. In fact, the consultant team found that significant, ongoing initiatives by correctional health administration were already in place to control escalating medical costs. And while some of the findings and recommendations don't lend themselves to empirical or quantitative analyses, they address measures to maintain or improve inmate health outcomes, increase operational efficiency, better disease prevention, enhance employee professionalism, and sustain expectations of care comparable to those in the community.

The methodology included formal interviews and discussions with key medical and mental health staff. Discussions were also held with security personnel involved in the health care delivery system to examine the impact on their operations. Particular focus was on workload relating to emergency room transports, hospital stays, and transports to outside vendors/clinics. Health services and security staff were asked to share their understanding of what is currently working, what areas need improving, and their best ideas on how to accomplish the needed changes. Information gained from these meetings was invaluable to the preparation of this report.

The interviews were supplemented by a review of current protocols, relevant written reports, departmental data, and a walk-through of the Central Booking Facility (CBF), the Travis County Jail (TCJ), and the Travis County Correctional Complex (TCCC). The walk-through enabled the consultant team to observe first hand health care clinic spaces, medical/mental health housing, health care processes, and activities. Also considered were equipment availability and appropriateness, inmate service volume and movement, personnel placement and staffing.

A number of health care reports and data provided by health care personnel were reviewed, including:

- Policies and procedures
- Staffing levels
- Tracking logs and health records
- Primary admission diagnosis
- Infirmary capacity and ADP
- Off-site medical/mental health services
- Medical transports, number of ER visits and associated hospital admissions
- Pharmacy access reports

Throughout the study, the consultant team found a professional work environment. All staff, from all disciplines, provided access, open and honest responses to the many requests made, and provided the necessary data. Each interaction with medical staff revealed fully engaged management team, effective clinical supervision, and caring and compassionate individuals who, despite some difficult working conditions, are clearly dedicated to their mission and able to perform their medical duties diligently.

Overview of Health Care Services

Since the famous Supreme Court ruling in Estelle v. Gamble (1976) adequate medical care is accepted as a constitutional right of all inmates, and corrections health care has evolved over the years from a neglected inconvenience to a major aspect of a correctional facility’s overall mission. The level of care required for mental health in corrections is still evolving, but the role of jails in the treatment of the mentally ill population is also expanding, as the number of inmates with mental illness continues to escalate. In many correctional systems, health care is second only to security in the number of personnel employed and its impact on the budget; and Travis County is no exception in this regard.

Correctional facilities employ one of two basic models to deal with their health care responsibility: through internal staffing or through a contract with a private health services provider agency. The Travis County Sheriff’s Office uses its own employees to provide care. An advantage to using TCSO’s employees is that all members of the workforce are on the same team and are ultimately accountable to the same person. This core staff of TCSO health services employees is supported by contract staff for specialty services such as dental, psychology, and psychiatry.

The Travis County inmate health care system is organized under two separate divisions: *Inmate Medical Services* and *Inmate Mental Health, Counseling and Education Services*. Neither medical nor mental health could accomplish its mission without the other, and they work well together as well as interface with the other TCSO’s operational divisions regarding the provision of their respective services.

Medical Services is responsible for providing comprehensive medical care to patient inmates under the Sheriff’s custody by providing the community standard of care to inmates with medical needs. Services include intake screening and health assessments on detainees processed in the Central Booking Facility (CBF) on a 24/7 basis, as well as providing follow-up health care services to the inmates housed at the downtown Travis County Jail (TCJ). The major location for comprehensive health care services is at the Travis County Corrections Complex (TCCC), which encompasses the health services clinic, pharmacy, medical housing, and ancillary services such as dentistry and X-ray. Medical services provided at TCCC include the basic array of sick call, medication monitoring and distribution, and minor emergency services in order to insure that the health of the inmates is properly managed within the established threshold of in-house care. The professional staff works to provide all possible care on-site and arranges for care with local specialists and hospitals when required.

Mental Health Services is responsible for providing mental health care to inmates and as such, the mental health component has a similar mission to that of medical: conducting mental health screenings, assessments, treatment, and monitoring the general well-being of mentally ill inmates throughout their stay in custody at both TCJ and TCCC. TCSO counselors screen inmates upon booking and assess throughout an inmate’s stay for serious mental illness. Inmates who meet criteria are scheduled to see a psychiatrist or psychiatric nurse practitioner to receive treatment. Counselors continue to see inmates, based upon their needs, to monitor symptoms, educate the inmate about their particular mental illness and provide support.

The next section presents the analysis, findings and recommendations for the Medical Services Division. A discussion of Mental Health Services is provided later in this chapter.

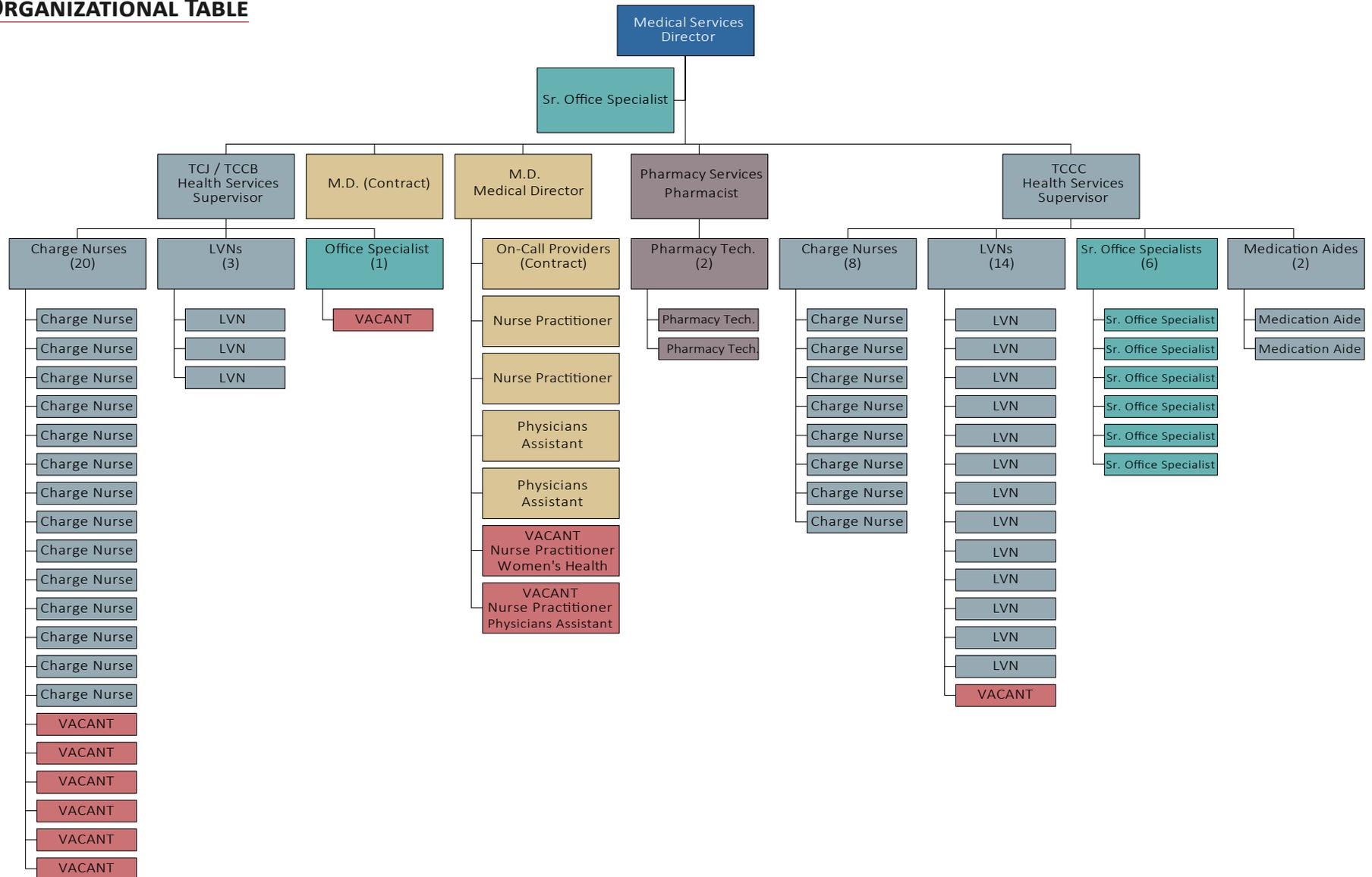
Medical Services Division

Organizational Structure

The medical services division staffs only professionally-trained, licensed and certified medical personnel including: physicians, advanced nurse practitioners, physician’s assistants, registered nurses, licensed vocational nurses, pharmacists, pharmacy technicians and certified medication aides. As illustrated in Figure 3.1, the Medical Services Division is organized and staffed along four functional lines of responsibility: TCJ/TCCB Health Services; TCCC Health Services; Medical; and Pharmacy, each with a designated supervisor or head.

3. Inmate Healthcare Analysis

**FIGURE 3.1 MEDICAL SERVICES DIVISION
ORGANIZATIONAL TABLE**



Health Services Component

Health Services personnel at TCJ and TCCC are predominantly charge nurses (RN) and LVN professionals, supplemented with office specialists/support staff. The CBF/TCJ facility is staffed with 21 registered nurses (RNs) and 3 licensed vocational nurses (LVNs) deployed across three shifts (24/7). They conduct initial screening and assessment of arriving detainees as well as provide medical services to individuals housed at TCJ, under the supervision of a Health Services Supervisor. There are currently five vacant RN positions (funded but not filled) at CBF/TCJ.

Health services at TCCC are provided by 8 RNs, 14 LVNs, 6 office specialists (assigned to medical records), and 2 medication aides, who also work under the supervision of a Health Services Supervisor. There is currently one LVN vacancy at TCCC. Although the current medical staffing plan is generally sufficient to meet current requirements at TCCC, the size and configuration of the campus, coupled with the more extended range of services provided, makes staffing requirements more complex and extensive at this site.

Physician and Mid-level Providers Component

Medical services consists of one full time physician (Medical Director), one contract physician, on-call contracted providers, and six mid-level professionals (nurse practitioners and physician assistants). As of October 1, 2013, there were two mid-level vacancies within this category – with only one applicant getting to the hiring board phase and ultimately hired, filling the Women’s Health opening.

Pharmacy Component

The Pharmacy component includes a Pharmacist and two pharmacy technicians located on the TCCC campus who service both TCJ and TCCC, covering the medication needs of both the medical and mental health divisions.

Staffing Considerations

The TCSO has historically done its best to properly staff the medical components in its facilities and with a few noted exceptions the medical division is generally staffed for today’s inmate census and medical service demands. However, it was noted by medical personnel that changing patient needs could impact future staffing. For example, June 2010 saw a significant increase in the number of inmates withdrawing from prescription medication, when previously withdrawal was predominantly for alcohol. The monitoring for medication withdrawal is a more significant draw on nursing time. Another unforeseen, similar shift would challenge current medical staffing levels.

FTE Vacancies

As noted above, the Medical Division currently carries a number of vacancies, particularly in the nursing categories but also for mid-level providers. Filling vacancies is challenging for several reasons, enumerated below.

The number of RN candidates available for recruitment has declined. This is in part because local hospitals have recently implemented an “all RN” staff, shrinking the potential pool of RN candidates available in the community.

Travis County salary levels for RNs are not commensurate with work experience. It was reported that RNs are only given credit for their years as a registered nurse, when their starting salary is set by Human Resources. As a result, nurses who have spent years working and going to school to improve their licensing level- advancing from CNA to LVN to RN, would have the same starting salary as a recent RN graduate with no prior work experience. Not only does this discourage current staff from furthering their education but it also insures that many recent hires will have no prior work experience. The inherent challenges in a jail environment are far better met by experienced personnel.

3. Inmate Healthcare Analysis

Starting salaries for Physician Assistant and Nurse Practitioner positions are well below comparable positions in the private sector market. While the current TCSO hiring range salary for mid-levels professionals (PAs and NPs) is \$68,095 to \$88,524, a comparable position in the community is higher, according to the Medical Director. This may help explain why in the last twelve months there were only five (5) such applications, and only one successful hire- a brand new Physician Assistant with no work experience who filled the Women's Health opening. Other applicants withdrew themselves based on the salary range.

The recruitment process for potential hires is time consuming and lengthy. Medical administration has noted that the HR Department has put emphasis on closing the gap between recruitment and hire, including several initiatives to expedite the process (see *Appendix C1*). Still, when the onboarding process takes upwards of several weeks, candidates often take another offer of employment in the meantime.

Getting candidates interested in working in a corrections setting is a challenge that cannot be remedied only through improved recruitment efficiencies or logistics. For example, for a 23-day period in September 2014, there were no applicants for the five open Registered Charge Nurse positions; and of the five candidates initially responding to the mid-level provider opening from 10/1/2013, only one completed the process.

Use of Agency Nurses

Critical vacancies result in the reliance on temporary staffing, and TCSO uses agency nurses in both facilities to help fill gaps in scheduling. Agency nurses are freelance personnel contracted through an agency on a per diem or hourly basis.

Agency personnel are more expensive than salaried staff, on an hourly cost basis. Agency nurses cost roughly \$20 an hour more than County employees, not including benefits. For example, agency RNs earn \$53.50/hr. and LVNs earn \$43.50/hr., as compared to the average hourly rates of \$33 and \$20.80, respectively. The cost differential is even more dramatic for mid-level staff, at \$95 versus \$42.56 per hour.

The use of agency nurses allows the division to maintain shift coverage and ensure that patients are seen, and there is flexibility in scheduling to respond to population census ebbs and peaks. Typically transient by definition, agency nurses employed by the Medical Division have been relatively long term, and many are retired, former employees. In the last four months, two agency staff members have transitioned to full time and two others have expressed a similar interest. The transition from temporary to permanent employee also allows both parties to first see if the candidate is a good match.

Maintaining an adequate number of full time, licensed providers and using current nursing staff at their optimum skill level contributes to a more efficient, cost effective work environment, and TCSO has implemented several measures to reduce use of agency personnel (see *Appendix C2*). However, with vacancies in nursing positions and the shortage of full time recruits in the community, there will continue to be some reliance on agency personnel to cover shift assignments and fulfill service requirements.

Professional Development

There is not sufficient staffing capacity for addressing health care education, quality assurance, and professional development with a dedicated focus. The Director's goal is to hire an Education/Quality Assurance Supervisor to assist in supervisory responsibilities, but acting primarily as Nurse Educator. A properly credentialed Nurse Educator, can provide on-site Continuing Education Units for professional staff, thereby increasing professional competency, meeting annual training requirements, reducing time away from the unit and enhancing job satisfaction. The same individual can provide health-related training to security personnel. The position should also be responsible for organizing the continuous quality improvement (CQI) effort and chairing the CQI committees. Quality assurance audits are also a necessary part of any health care organization. Without them, mistakes do not get recognized and corrected in time to avoid costly errors.

In-house continuing education reduces staff time off-site and minimizes off-site training costs. A stronger quality assurance program than the part-time effort currently in place should result in better patient outcomes and subsequent costs avoided in treatment. Finally, the additional Supervisor will provide capacity for preparation in attaining NCCHC accreditation, a future goal of the division.

FINDING 3.1

- There are nursing vacancies at both facilities: 5 Registered Nurse (RN) positions at TCJ; and 1 Licensed Vocation Nurse (LVN) position and 2 Mid-Level Service providers at TCCC. This results in reliance on per diem agency personnel to cover gaps in shift coverage.
- Recruitment of nursing and mid-level personnel is challenging. This is due to a shortage of RN candidates in the community; the salary differential with the private sector; and the time it takes to bring a new hire on board.
- There is no designated RN on staff to provide continuing education of medical personnel and quality assurance of medical services. This is important to ensure professional development, staff satisfaction, and continuous quality improvement.

RECOMMENDATION

- Adjust the salary schedule to more accurately reflect traditional nursing career progressions (e.g. credit for full career/licensing, not just time as RN).
- Adjust the starting salary for mid-level professionals (PAs and NPs) to better align with community pay scales for comparable positions.
- Increase the budget for recruiting and internships to assist in filling health service vacancies, and continue working to close the time gap between identifying a viable nurse candidate and bringing them on board full time.
- Hire an Education/Quality Assurance Supervisor to provide on-site Continuing Education Units for professional staff and organize the continuous quality improvement (CQI) effort and chairing the CQI committees.

National Accreditation

TCSO facilities are not currently accredited by the National Commission on Correctional Health Care (NCCHC). At a minimum, national accreditation signifies a higher profile in the community for the importance and quality of detention health care, enhanced delivery of health care, improved recognition and morale for detention staff and it provides some protection against adverse legal findings. Traditionally, the American Correctional Association (ACA) was called upon when a facility wanted its entire operation accredited, and NCCHC accreditation was applicable only to the health care operation and issues impacting health care delivery.

Although those lines have become blurred with the ACA’s development of independent health care standards, the consultant believes the clearest statement concerning the importance of the health care operation comes from gaining accreditation from the NCCHC. According to NCCHC’s Standards for Health Services in Jails:

“Accreditation by the National Commission on Correctional Health Care is a process of external peer review in which NCCHC, an independent not-for-profit organization dedicated to supporting and improving correctional health care, grants public recognition to detention and correctional institutions that meet its nationally recognized Standards for Health Services. Through accreditation, NCCHC renders a professional judgment on the effectiveness of a correctional facility’s health services delivery system and assists in its continued improvement in this area.

NCCHC accreditation benefits staff, visitors, workers, inmates, and the communities to which they return. The following are among the many benefits of NCCHC accreditation:

- Promotes an efficient and well-managed health care delivery system
- Enhances the facility’s prestige
- Increases staff morale and aids recruiting efforts
- Provides pathways for continuous improvement
- Suggests new efficiencies and possible cost savings
- Supports and helps justify budget requests
- Provides an expert, independent assessment of what is working well as well as opportunities for improvement
- Helps protect against adverse events and reduces liability
- Achieves a key component of the National Sheriffs’ Association’s Triple Crown Award¹

1 Standards for Health Services in Jails 2014, Appendix A, p.159.

3. Inmate Healthcare Analysis

There are costs associated with the accreditation process, including an ongoing fee to maintain the accreditation. These administrative costs are not major and the consultant is already recommending an additional RN (educator and quality improvement duties) to gear up for the accreditation process. However, significant nursing personnel will be required to provide enhanced service requirements, including screening of all new admissions, as discussed next. The impact on the medical services personnel budget, coupled with the current difficulty in recruiting the necessary RN nurses for service level compliance, make this accreditation a longer term, albeit important goal.

FINDING 3.2

Travis County correctional facilities do not currently have national health care accreditation status.

RECOMMENDATION

Pursue National Commission on Correctional Health Care accreditation. The recommendation benefiting all of health services is eventual accreditation status. The costs, scheduling, and benefits should be assessed to establish a timeframe for achieving this goal.

Medical Service Delivery

The Inmate Medical Services division provides comprehensive health care services for all inmates. These services result in a total health care program, which includes medical screening, assessment and triage, follow-up, dental, medication, psychiatric and related health care services. An overview of health care operations is presented below, by location. The section includes a brief description along with observations, findings and recommendations. A more detailed description of services and activities appears in *Appendix C3 Detailed Description of Health Services*.

Medical Services Provided at the Central Booking Facility

The Central Booking Facility received about 54,000 newly arrested individuals annually over the last few years. Approximately one half of these were referred for medical screening at intake. This translated into 27,218 evaluations in 2012; 26,793 evaluations in 2013; and 4,008 evaluations for the first two months of 2014 alone.² In terms of daily workload, nurses perform upwards of 70 medical assessments a day at CBF. Given this volume, it is clear that filling gaps in shift coverage due to FTE vacancies at CBF/TCJ is critical.

There are a few considerations unique to Central Booking that could impact medical operations, staff workload, and costs there.

Medical screening policy: Research shows that screening all inmates upon intake is a critical first step to prevent epidemics and to reduce severity of untreated illnesses and conditions. Screening all new admissions at intake is also a requirement for National Commission on Correctional Health Care (NCCHC) accreditation – an eventual goal of the division, as discussed previously.

Presently, about half of new intakes are medically screened at CBF. Meeting the 100% threshold would require a significant increase in FTE nursing staff, nearly doubling the number of RNs currently assigned to CBF/TCJ. Medical administration reported that the ability to recruit the required RN personnel, and the related budget impact, have made it cost prohibitive to implement a full screening policy at this time. Some experts suggest that routine intake screening could be delivered less expensively through the use of medical students under supervision of a licensed doctor, as often is done in teaching hospitals. Use of medical students may be most useful where there is a limited pool of doctors willing to go into jails, and where there are teaching hospitals in the area.

² Source: TCSO Medical Division

Sobriety Center: For several years, Travis County has been considering the feasibility of a Sobriety Center as a diversion option for inebriated individuals. Data compiled by Criminal Justice Planning revealed that 14% of all bookings met the planning criteria for a Sobering Center (Public Intoxication/Enhanced PI charge only). In 2013, this translated into 3,754 potential diversions, many of whom would require immediate medical attention or assessment at intake.

Over the past two years, twelve inmates were hospitalized a year for alcohol withdrawal who had minor charges. Cumulatively, these twelve cases incurred about \$140,000 in hospital care and related security detail costs. These costs may have been avoided if these individuals were placed in a sobriety center rather than incarcerated, depending on the admission criteria and range of services provided.

Although outside of the scope and reach of this project, the establishment of a Sobriety Center would go a long way in reducing some of the turmoil at the CBF, the associated workload and the potential risk that goes along with accepting individuals who are under the influence of alcohol.

Medical Services Provided at Travis County Jail

For inmates housed at the TCJ, medical request slips are available at each housing unit, which are reviewed by medical staff daily. Initial sick call assessments are conducted by a nurse at the housing unit level as part of the medication distribution daily pass. A nurse's office, dental exam room, x-ray room, and examination room are available on the first floor of TCJ for follow-up of required services. In addition, there is a nurse's station available on the second floor of the facility to service the general inmate population also housed downtown.

Medical charts initiated at TCJ for inmates with observed or identified medical conditions, accompany all inmates transferred from TCJ to TCCC, and clinic staff follow up with these inmates after admission to TCCC.

Male and female inmates with special medical needs are housed primarily in the medical observation section (MOO) located on the first floor (medical hallway), which also houses mental health patients. The medical unit consists of 13 single cells and, according to the Medical Director, in 2013 it was filled 90-95% of the time, with mental health patients overflowing into other units at TCJ when populations peak. A further discussion of the medical unit is provided in *Chapter 7 Capacity Analysis*.

Medical Services Provided at Travis County Correctional Complex

TCCC is the major location for comprehensive inmate medical care services. There is no formal sick call. Requests are reviewed on a 24-hour basis and inmate sick call is conducted for each housing unit on the campus daily, with follow-up medical services provided in the Health Services Building (HSB). According to the Annual Report of the Medical Division, there were 36,000 medical appointments last year, plus the ancillary services associated with health care, such as dental, X-ray, medication distribution, and medical records maintenance.

The HSB includes an ambulatory health clinic, minor trauma room, wound care facility, x-ray room, a dental operator for providing palliative dental services, negative pressure cells for communicable disease isolation, a self-contained pharmacy and dedicated space for records, medical staff and administration offices, and dedicated medical housing. The pharmacy component is located in Building 12.

Access to the clinic area is scheduled throughout the day and closely monitored by security staff. Inmates circulate from the housing buildings to the HSB via the pedestrian walkway throughout the campus – either unescorted or escorted based on security classification designation. With a capacity of 1,200 beds, Building 12 averages 700 sick calls a month. An additional 30 to 35 diabetics come to the clinic twice daily for required blood sugar checks, many from Building 12. Every inmate movement requires staff coordination and manpower. To reduce movement requirements between buildings, TCSO recently established a satellite clinic examination area for nursing sick call in Building 12. At the time of this report, the satellite clinic construction was in progress.

3. Inmate Healthcare Analysis

Pharmacy Services

The number of prescriptions filled continues to increase every year, despite a stable inmate population census. This may be indicative of reported increases in medical acuity levels. In 2013, there were 69,227 separate prescriptions filled- an average of 278 per day, which compares to the volume of an extremely busy commercial pharmacy. An additional 2,464 prescriptions were filled for the Gardner-Betts Juvenile Detention Facility. The Pharmacy Director projects that 73,152 prescriptions will be filled by year's end – an 11.4 % increase over 2011 figures (65,654). The 2014 projection is based on the first six months of the year and reflects a long-term trend. The number of daily prescriptions administered has also increased in the last 5 years, from about 250 a day in 2009, to about 290 a day at present.³

Travis County has implemented many best practice measures to control pharmaceutical costs. Examples include charging inmates for certain medications and services; switching to less expensive or generic drugs; pursuing third party reimbursement; and actively engaging the courts to release inmates where medical conditions and costs are prohibitive and public safety is not at increased risk. A full list of measures implemented by the County to control rising pharmaceutical costs can be found in *Appendix C4 List of Implemented Pharmaceutical Cost Control Measures*.

Medical Equipment and Technology

Medication Management and Distribution

The pharmacy is open Monday through Friday, 8:00 AM to 4:30 PM. When the pharmacy is not open, continuity of care requires that “stock medications” are available⁴. These medications are kept in a locked cabinet in the clinic area. The current medication administration and inventory control processes are labor intensive and time-consuming. Stock medications are inventoried every time one is dispensed and then again every month by the pharmacy technicians. Nursing staff must count Schedule II (DEA-controlled) medications at every shift change, meaning one outgoing nurse and one incoming nurse together must count and agree on the inventory three times a day. All of this is done manually.

A number of new technologies and procedures are available to improve the efficiency of the medications dispensing process, while virtually eliminating medication errors. One of the ways to improve efficiencies is by using an automated medication dispensing cabinet to eliminate the task of medication preparation by storing, packaging, and labeling individual inmate medications. A nurse enters an individual identifier, and the equipment dispenses the required medications. The use of an automated medication dispensing cabinet is critical, particularly during hours when the pharmacy is closed. The impact on 24/7 medical operations would be dramatic – inventory is controlled, out-of-date medications are identified for removal, and an electronic record is kept of all drugs issued by both inmate and staff member. A conservative estimate is that 3.5 hours of nursing time would be saved every day, as well as time currently spent for monthly inventory and restocking by the medication technicians. The cabinet does not replace the work of the pharmacy and its staff for the bulk of the prescriptions; rather, it serves as an after-hours supplement to the work of the on-site pharmacy.

At the time of this report, a consultant was assisting the pharmacy director in determining the ideal technical requirements for the TCCC site and obtaining bids for a suitable cabinet. Ideally both nursing sites would have dispensing cabinets, but the heavy patient load at TCCC makes it a higher priority.

X-Ray Imaging

Overall, medical equipment at both detention facilities is adequate. However, the current X-ray machine, which uses film, is outmoded and not conducive to operational efficiency or quality care. Film requires that the provider be on-site or the film carried to the provider. Thousands of individual films are stored for a great length of time to insure both availability for future diagnosis comparisons and to meet medical records retention requirements. Any small numbering or placement mistake results in the film not being readily available for future medical reference/diagnosis, as well as a great deal of staff time spent searching for the needed films. This is an inefficient use of nursing staff time, as it diverts them from their primary duties of providing direct healthcare services to patients. TCSO has recently noted that the film based equipment is scheduled to be replaced this year (2015).

³ Source: TCSO pharm.budgetcompare.doc

⁴ These include antibiotics, ibuprofen, hypertensive medications, diabetic medicines, psych drugs, and all controlled substances.

Furnishings

Only one of the three exam rooms in the Central Booking Facility has a hand-washing station. This creates an environment in which it is very difficult to maintain proper personal hygiene and protect against spreading disease from patient to patient and from patient to staff.

While overall clinic spaces are appropriate, the current stationary table in the physical therapy/wound care room does not lend itself to proper physical therapy or wound care treatment. It is difficult to maneuver the patient onto the table and obtain proper positioning for treatment, a safety issue for both patient and staff.

FINDING 3.3

Outmoded equipment and technology impacts staff efficiency and health care service delivery.

RECOMMENDATIONS

- Install an automated medication dispensing cabinet in TCCC clinic. Automating helps to control inventory, avoids distribution of out-of-date medications, and saves nurse time.
- Install an adjustable examination table in physical therapy/wound care room in TCCC clinic. A modern examination table, height adjustable and movable, will improve treatment and reduce the chance of injury to provider and patient.
- Install hand washing stations in all exam rooms to improve sanitation and minimize possible cross-contamination.

Outside Clinics, Emergency Room and Hospital Usage

Outside Medical Clinic Appointments

Although medical staff works hard to provide as many medical care services and treatment as possible on-site, a wide array of outside specialty clinic services are utilized, including but not limited to traumatic brain injury clinic, eye clinic, orthopedic clinic, and high risk OB/Gyn clinic (a full list of off-site clinics appears in *Appendix C5*). All visits are reimbursed at Medicaid rates.

The medical division controls unnecessary consumption of outside medical services, including a policy requiring the jail physician to review all referrals for non-urgent specialty medical treatment. And with the exception of emergency cases, no inmate is to be transported to outside medical appointments without the authorization of the jail physician. Still, the number of referrals to outside medical appointments has increased about 5% between FY2011 and FY2013. Activity for the first nine months of FY2014 (903 runs) has already outpaced previous years, despite a decline in the inmate population. This may be indicative of the growing medical acuity level reported by health services staff. However, there does not appear to be an over-reliance on outside clinic services, considering the number of off-site clinics offered and the daily census of about 2,450 inmates.

TABLE 3.1 OUTSIDE MEDIAL APPOINTMENTS

FY	# Medical Runs
2011	774
2012	879
2013	814
2014 (thru July)	903

3. Inmate Healthcare Analysis

Inmates are transported to outside medical visits by TCSO Hospital Visitation Unit (HVU) transport staff. The table below illustrates the transport workload in hours associated with outside medical runs. Three years of available data indicate that corrections escort time for medical appointments has increased by 25%, with year-to-date figures already outpacing the number of correctional officer hours spent in 2013 transporting inmates to outside medical appointments. The 3,685 hours attributed to medical runs in FY2014 through July are comparable to 1.5 FTE.

TABLE 3.2 MEDICAL RUN HOURS: TCSO STAFF

FY	# Hours
2011	2,948
2012	3,097
2013	3,291
2014 (thru July)	3,685

The increase in TCSO medical run hours coincides with the increase in the number of visits scheduled. The more recent increase may also be due to a recent change in TCSO transportation policy requiring two officer escorts when transporting maximum security inmates.

Medical staff recognizes the value of having some specialty services on-site, but there are challenges and considerations to bringing specialty clinics to TCCC. For one, there must be a threshold volume of cases for it to be worth the providers' benefit to come on-site. In November, the Plastic Reconstructive Specialty Clinic was discontinued after 18 months of operation in the HSB. The provider did not renew the contract, deeming it no longer profitable.

TCSO practice allows patients who have an established specialist in the community for the routine care of a chronic illness or serious medical condition, to continue care with their personal provider while incarcerated. Maintaining continuity of care between the patient and a provider who is familiar with their condition- and who will continue the treatment upon release- is an important healthcare consideration.

Medical staff would like to establish an on-site Ob/Gyn clinic. The recent hiring of the mid-level provider to oversee Women's Health should help to support this initiative. An on-site Ob/Gyn clinic will reduce the number of visits off-site for services (112 OB visits 20 Gyn visits during the first nine months of 2014). Just as important, it will improve health services for the female inmate population generally, and for those who are pregnant. On average, about 26 pregnant women are booked into the jail each month, and on any given day there are anywhere from 15-30 pregnant females in custody at TCJ or TCCC – many of whom are high risk pregnancies.

At the time of this report, the County was attempting to bring Ob/Gyn services on site by offering a residency program/fellowship with the hospital. Partnerships with local higher education institutions provide the medical division with additional staffing resources, and provide teaching hospitals a unique opportunity to train their students in Community Health through placement at the jail.

The Medical Division is also considering expanding the number of chronic care clinics such as diabetes, hypertension, and cardiac. While off-site visits will never be fully eliminated, a reduction in the number of outside clinic "runs" will impact transport activity and associated staff workload.

Telemedicine is another way of reducing utilization of off-site specialty clinics, and associated transports. While telemedicine is less appropriate for orthopedics and cardiology, it has proved to be useful for radiology and dermatology. Most of the infrastructure for telemedicine already exists in the HSB at TCCC, but further exploration is warranted to determine if establishing such a system would be cost effective. Telemedicine would not replace situations that require the patient be physically examined or that require diagnostic equipment.

Establishing on-site clinics and telemedicine at TCCC will reduce the number of medical runs and the associated workload for correctional officers. However, inmates would still need to be escorted from the housing units to the HSB to access on-site clinics and telemedicine services, and security would need to be provided during these appointments. The impact on FTE requirements for related security would be determined by factors such as the the number and type of on-site clinics provided, the number of times per week they are offered, and the volume of inmates accessing them.

Emergency Room Care

Inmates requiring emergency care or diagnostic evaluation are sent to University Medical Center Brackenridge via EMS or officer transport depending on the inmate’s condition.

Table 3.3 illustrates the number of ER runs occurring monthly, for the last three full fiscal years and FY 2014 to date. The colored shading represents high, medium, and low event counts – with the high end averaging about 70 runs a month (2.5 a day on average). Year-end figures were comparable for FY2012 and FY2013, but increased 25% over FY2011 activity. Statistics through July suggests that FY2014 activity will exceed that of previous years.

TABLE 3.3 EMERGENCY ROOM RUNS

Month	FY2014	Aggregate YTD	FY13	Aggregate 2013	FY12	Aggregate 2012	FY11	Aggregate 2011
Oct	66	66	51	51	66	66	47	47
Nov	69	135	47	98	62	128	28	75
Dec	71	206	51	149	49	177	25	100
Jan	44	250	44	193	56	233	43	143
Feb	38	288	38	231	50	283	35	178
Mar	58	346	73	304	71	354	43	221
Apr	50	396	77	381	56	410	55	276
May	65	461	66	447	50	460	56	332
Jun	60	521	55	502	72	532	54	386
Jul	86	607	48	550	56	588	54	440
Aug			67	617	45	633	55	495
Sep			82	699	61	694	65	560

Source: Kathryn Geiger, TCSO Medical Services Director

3. Inmate Healthcare Analysis

TCSO is not charged for EMS transport services, and all emergency room visits are reimbursed at Medicaid rates (County pays 14% of the bill). However, a significant cost is in the correction officer manpower. TCSO policy requires that an officer accompanies all off-site inmate transport, and the officer must remain at the ER while the inmate is being evaluated.

TABLE 3.4 INMATE ER HOURS

FY	# Hours
2011	2,929
2012	3,341
2013	3,440
2014 *	3,382
<i>* pro-rated based on 10 months of data</i>	

TABLE 3.5 INMATE HOSPITALIZATIONS BY MONTH

Month	FY14	Aggregate YTD	FY13	Aggregate 2013	FY12	Aggregate 2012	FY11	Aggregate 2011
Oct	34	34	26	26	21	21	22	22
Nov	36	70	14	40	26	47	15	37
Dec	33	103	23	63	23	70	13	50
Jan	22	125	20	83	27	97	17	67
Feb	18	143	14	97	31	128	26	93
Mar	22	165	24	121	27	155	30	123
Apr	22	187	36	157	27	182	22	145
May	30	217	23	180	18	200	25	170
Jun	22	239	28	208	32	232	32	202
Jul	23	262	29	237	24	256	27	229
Aug			29	266	20	276	18	247
Sep			32	298	32	308	30	277

It is more challenging to manage and control ER runs than routine medical appointments. Both medical and uniformed staff responds initially to inmate emergencies, but in a potentially serious condition (e.g. chest pains, abdominal pains, head trauma) the division “errs on the side of caution” and seeks outside emergency room evaluation and diagnostic.

Hospitalizations

A significant number of inmates are hospitalized throughout the year. Table 3.5 presents the monthly and aggregate admission volume for the last few years, showing that year-end hospitalization statistics have remained relatively stable, with a slight decline between FY2012 and FY2013. FY2014 monthly statistics to date have outpaced previous years, however, suggesting that year-end activity will be higher than historical usage indicators.

While Table 3.5 represents the number of inmates admitted to the hospital, Table 3.6, below, provides a measure of the overall amount of time inmates are hospitalized, in hours, on the whole. The total number of annual hospital hours declined between 2012 and 2013, however monthly figures through July suggest an uptick in FY 2014.

3. Inmate Healthcare Analysis

All hospital stays are reimbursed at Medicaid rates. The TCSO workload associated with hospital stays is significant, as a corrections officer must remain posted there throughout the hospitalization period. Inmates are typically placed in a bed associated with treatment requirements (e.g. by specialty floor, rather than co-located), making for inefficient officer staffing coverage.

TABLE 3.6 INMATE HOSPITAL HOURS

FY	# Hours
2011	20,833
2012	23,635
2013	17,677
2014 *	18,902

** pro-rated based on 10 months of data*

Converting hospital hours into beddays (hours divided by 24) allows for an examination of other utilization measures. Table 3.7 summarizes key variables relating to hospital bed utilization.

TABLE 3.7 INMATE HOSPITAL BED UTILIZATION SUMMARY STATISTICS

	FY 14 thru July	FY 13	FY 12	FY 11	Notes
Hours	15752	17677	23635	20833	
Bed days	656.35	736.54	984.77	868.06	<i>hours / 24</i>
Admissions	262	298	308	277	
ALOS	2.51	2.47	3.20	3.13	<i>bed days / admissions</i>
ADP	1.80	2.02	2.70	2.38	<i>bed days / 365</i>

Dividing hospital beddays by the number of annual admissions reveals that inmates stay hospitalized for about 2-3 days, on average (ALOS). To determine the number of inmates hospitalized on any given day (Average Daily Population, or ADP), the number of annual beddays is divided by 365. Historically, the hospital ADP has ranged between 1.8 – 2.7 inmates daily. However, this assumes maximum efficiency of bed utilization, and doesn’t take into account peak days or overlap in daily

admissions/lengths of stay. A quick review of more detailed monthly activity revealed that there were many instances where multiple inmates were admitted on the same day, and hospitalized simultaneously. In many instances, inmates’ hospital stays were less than 24 hours, but the periods of hospitalization overlapped (e.g. more than one hospital bed was required in the 24 hour timeframe, despite a less than 24 hour length of stay).

This analysis is informative in two regards:

- 1) TCSO allocates 3 posts for supervision of hospitalized inmates. On peak days, this may not be adequate, particularly when inmates are assigned to different rooms on different floors. It may be these instances where coverage is achieved with overtime – and overtime hours associated with medical and ER runs and hospital supervision have fluctuated, with a significant increase this year (see Table 3.8). As indicated in Chapter 2 Custody Staffing Analysis, the HVU was identified as a division requiring more FTEs than currently allocated.
- 2) It was conveyed to the Consultants that the County has explored the viability of establishing a secure ward at one of the local hospitals for several years. For planning purposes, the admission, length of stay, and ADP hospitalization data would suggest a capacity need ranging between **4-6 beds**.

There is no doubt that inmate healthcare has a significant impact on TCSO staffing. Table 3.8 provides the total number of hours associated with all outside medical details. The column on the right presents the staff overtime (OT) hours related to hospital events. Staff overtime hours have increased significantly in FY 2014, despite no corresponding increase in the total number of hours associated with outside medical details.

TABLE 3.8 MEDICAL RUNS, ER, HOSPITAL, AND STAFF OT

FY	Total # Hours	Staff Overtime Hours
2011	26,710	1,530
2012	30,072	3,035
2013	24,408	1,719
2014 *	24,272	3,025

** pro-rated based on 10 months of data*

5 Memorandum from Major Wes Priddy, Corrections Bureau, to Commissioners Court, August 29, 2014

3. Inmate Healthcare Analysis

According to TCSO administration, there are five posts related to hospital and medical appointments on weekdays – three for inmates in the hospital and two for medical runs. The challenge for TCSO staff in responding to sometimes simultaneous needs was noted with the following example:

“On Thursday, August 28th A-shift, there were five medical appointments all scheduled to start before 8:00 a.m. Two were surgeries, each lasting more than 7 hours, and three were maximum custody inmates requiring two transport officers. In addition to the medical appointments, there were three inmates in the hospital and one emergency room run that occurred around noon and led to a hospital admittance in the afternoon. So while housing unit posts are relatively steady, the total number of [medical related] posts that must be covered can vary greatly day by day because of variable issues like these.”⁵

This could partially explain the increase in OT this fiscal year and/or the HVU staff shortages identified in *Chapter 2 Staffing Analysis*.

The TCSO Medical Division and Fiscal Department have implemented a series of initiatives and practices to contain the costs associated with inmate hospitalizations, ER runs, and off-site clinic visits. These include conducting daily reviews of hospitalized patients for possible release; reviewing hospitalized or high fiscal

patients with criminal justice system representatives for possible pretrial bond or dismissal; and improved billing processes for hospitalization and ER visits. A full list of implemented measures to control the use of off-site services appears in *Appendix C6 List of Implemented Hospitalization Cost Control Measures*.

FINDING 3.4

Visits to off-site community clinics, emergency room runs, and hospitalizations are up, despite a decline in the inmate population. This impacts TCSO workload and costs because correctional officers must provide transport and custody supervision for these visits.

RECOMMENDATIONS

- Expand on-site clinic services at TCCC. High volume conditions to consider include Ob/Gyn, and chronic conditions such as diabetes, cardiology, and hypertension.
- Explore the cost effective use of telemedicine to reduce utilization of some off-site specialty clinics. Telemedicine would not replace situations that require the patient be physically examined or the use of diagnostic equipment, but may be appropriate for dermatology or radiology. Most of the infrastructure for telemedicine already exists in the HSB.
- Continue cost containment practices and initiatives associated with the use off-site clinics, ER runs, and hospitalizations.
- Explore with local hospitals the viability of establishing a secure ward for inmates who are hospitalized. Consolidating inmates in one secure area of the hospital has the potential to reduce the costs of TCSO supervision of hospitalized inmates.

The need for off-site clinic visits, emergency room runs, and hospitalizations will never be completely eliminated. However, any reduction in off-site usage will also reduce TCSO transport activity, workload, and costs.

Mental Health Services

Organizational Structure

TCSO is responsible for providing mental health care to individuals entrusted to its custody. Within the Travis County jail system, mental health services are provided by the Inmate Mental Health component of the broader Inmate Mental Health, Counseling and Educational Services Division of TCSO.

Under the oversight of the Director, the mission of TCSO’s Inmate Mental Health unit is to emphasize mental health intake screening and assessment at the CBF and to provide medication treatment, monitoring, stabilization and treatment throughout their stay in both TCJ and TCCC.

Mental Health counseling services are organized by facility location, with dedicated supervisors responsible for staff at TCJ and at TCCC. There are a total of 19 counselors, organized and with responsibilities specific to the mission and population served at each location, as illustrated below.

- TCJ Intake Team 1 - 3 Counselors
- TCJ Intake Team 1 Late Night Counselor - 1 Counselor
- TCJ Intake Team 2 - 3 Counselors
- TCJ Intake Team 2 Late Night Counselor - 1 Counselor
- TCJ Duty Counselor - 1 Counselor
- TCCC Male Acute Unit Counselors - 3 Counselors
- TCCC Female Acute Unit Counselor - 1 Counselor
- TCCC Male Diagnostics / Transitional - 2 Counselors
- TCCC Female Diagnostics / Transitional - 1 Counselor
- TCCC Duty Counselors - 3 Counselors

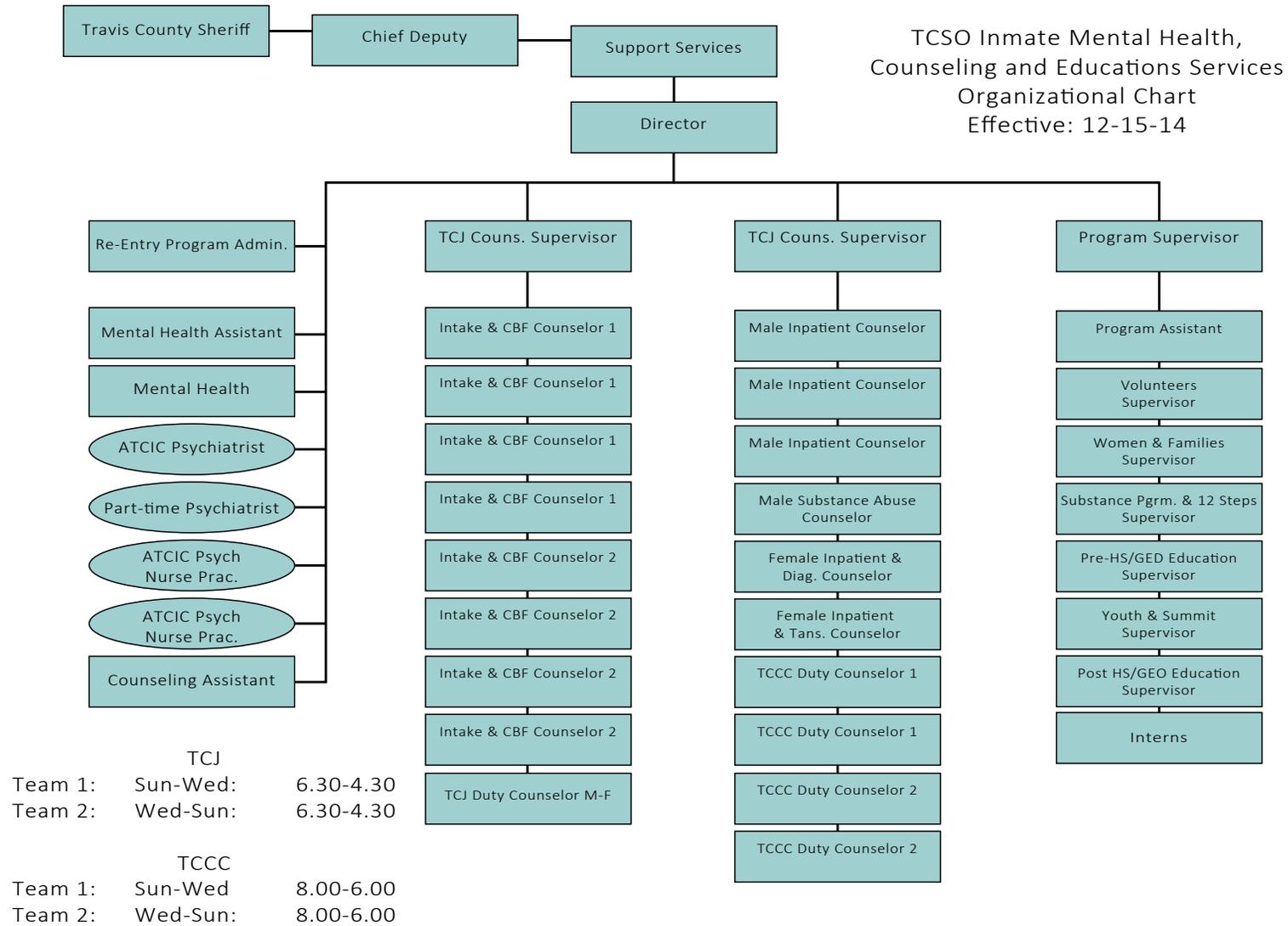
Eight counselors primarily screen and assess inmates for mental health disorders at the CBF and one provides follow-up treatment for inmates housed in the TCJ. The ten remaining counselors provide follow-up treatment for inmates with mental health illness housed at TCCC. This allocation of counselors is supplemented by 3.5 FTE psychiatric providers- 1.5 Psychiatrists (contractual) and 2 Nurse Practitioners, all located at TCCC. Consultations with TCJ are via telemedicine. There is also an interface with medical and pharmacy

Figure 3.2 depicts the organizational structure of TCSO Inmate Mental Health, Counseling and Education Division.

6 Following evidence-based research, the Behavioral Health Advisory Committee led by Judge Nancy Hohengarten has made a recommendation to incorporate criminogenic risk and substance use into the assessment process for those who have mental health problems on the mental health docket, so that individuals can be placed in the most appropriate program based on those needs and resources.

3. Inmate Healthcare Analysis

FIGURE 3.2 TCSO INMATE MENTAL HEALTH, COUNSELING AND EDUCATION SERVICES



Staffing Considerations

Over the last 10 years, TCSO has seen a 104% increase in the percentage of mental health patients coming into the jail. There has been no increase in the counseling staffing levels commensurate with this increase. Counselors should be commended for their dedication and excellent job completing screenings and assessments on a timely manner while trying to maintain the health and safety of a large and growing percentage of the inmate population.

Mental Health Counselors

Mental Health Intake teams at CBF/TCJ operate across two shifts only, providing coverage from 6:30 AM to 11 PM. There is no mental health counseling coverage when demand is at its highest. According to the Director, there are approximately five referrals per hour between the hours of 11PM to 4AM; as compared to 3 referrals per hour between 6AM and 11PM. It is also noted that standards of care have increased, now requiring the collection of more information during the screening and assessment process. As a result, counselors need to spend more time during an interview to adequately complete a comprehensive suicide, vulnerability, substance abuse and criminogenic risk assessment.⁶

Mental health coverage on the night shift must be provided by the nursing staff. This is not the most appropriate use of nursing time, and it has operational consequences. It takes nurses away from time that should be spent medically evaluating new arrivals, slowing the processing of new detainees. It also puts them in an uncomfortable position professionally. Although medical staff are trained in identification of mental illness and suicide, the training is minimal compared to the knowledge and experience of counseling staff. This may result in a more restrictive response than may be necessary- both in CBF holding and in TCJ, including the use of restraint chairs and assignment to a Full Safety Precaution (FSP) cell. While FSP housing provides the safest environment pending further mental health assessment, the environment is not conducive to an inmate in mental health crisis. This issue is discussed in *Chapter 7 Capacity Analysis*.

Professional Staff

While mental health counselors provide screening, assessment, crisis intervention, and on-going treatment, difficult cases would benefit from a psychiatrist’s involvement. Professional staff are assigned to the Mental Health component, including psychiatrists and Nurse Practitioners. These staff are all located at TCCC where the majority of the inmate population is located. They are available to counseling staff at TCJ for telephone consultation, but the inmate patient doesn’t have the benefit of a “face-to-face” consultation, which could be particularly effective for crisis intervention, according to MH staff. Where caseload doesn’t support the on-site presence of psychiatric staff, tele-psychiatry can provide added support to staff and patients. It has since been reported that tele-psychiatry has been established once a week with TCJ.

FINDING 3.5

There are gaps in mental health services at TCJ. No mental health counselors are assigned to the overnight shift, and psychiatric consultation is only available through telemedicine.

RECOMMENDATION

- Add five additional counselors to provide full mental health screening and assessment coverage, 24-hours a day, 7 days a week at CBF/TCJ. Until such time as additional counselors can be hired, the MH Director should make every effort to assign at least one counselor to the overnight shift at CBF/TCJ.

3. Inmate Healthcare Analysis

Mental Health Population and Service Trends

Mental health data were provided by TCSO Mental Health personnel, and the metrics all indicate that over the past several years, the number of individuals with mental illness and acuity levels have continued to rise, despite a stable booking trend. This has resulted in an increase in the number of referrals to mental health services.

Screenings and Referrals

Over the last three fiscal years, mental health counselors completed about 31,000 screenings annually on average, which represents about 54% of all bookings. The remaining 46% of inmates are released before the screening can occur.

Inmates who have risk factors for suicide and mental illness as flagged on the initial screening form or who have been referred from medical or corrections staff due to risk factors must be interviewed by a counselor to determine the necessary level of mental health treatment (i.e. medication by a psychiatric provider, reassessment, minimal monitoring or no treatment). Over the last three years, counselors have had to conduct approximately 17,000 of these interviews annually. The interview consists of a brief mental health and suicide assessment to determine who is eligible for services with a psychiatric provider (medication), who requires reassessment or minimal monitoring and those who are stable and capable of monitoring their own well-being and advocating for themselves as needed.

Treatment

While the number of referrals and screenings have held relatively constant over the last three years, Mental Health staff have reported a significant increase in the number of inmates requiring mental health services as a result, as well as an increase in the acuity and chronicity of their conditions. Compared to ten years ago, as reported to the consultants, the current screenings have increased about 53% (from 20,040 in 2010 to 30,780 in 2012). As illustrated in table 3.9 below, the number of inmates receiving mental health treatment daily has increased 104.5% between 2002 and 2012.

TABLE 3.9 NUMBER OF INMATES RECEIVING MENTAL HEALTH TREATMENT DAILY

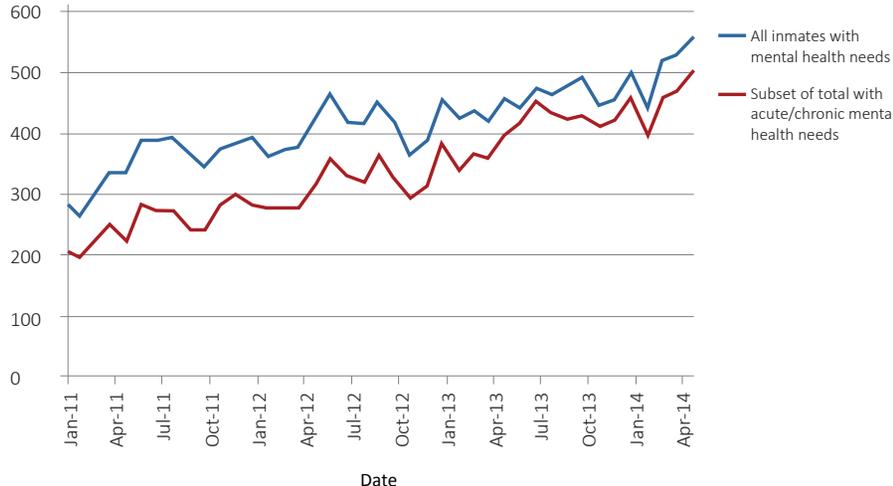
	Jan	Feb	Mar	Apr	May	Jun	Jul
2002	236	218	251	252	323	189	306
2012	573	513	471	492	510	556	554

	Aug	Sep	Oct	Nov	Dec	Average
	312	229	290	278	277	263
	525	577	545	579	563	538

Acuity Levels

Three years of recent data show that mental health acuity of inmate patients has increased even more significantly. (Figure 3.3). This is the group of patients requiring the most intensive level of treatment.

FIGURE 3.3 MENTAL HEALTH AND ACUITY TRENDS



Professional Services

Table 3.10 illustrates that expenditures for Psychiatrist/Psychologist fees have increased by 25% over the last three years. Included in these fees are costs for completing reports on competency to stand trial and sanity; forced medication applications in State Hospitals outside of Austin and offering expert witness testimony in psychiatric cases. These expenditures are not related to treatment provided in the jail. However, the increase in the number of psychiatrist/psychological reports completed annually is reflective of an increased incidence of mental illness among those in the justice system.”

TABLE 3.10 PSYCHIATRIST/PSYCHOLOGIST FEES BY FISCAL YEAR

	2011	2012	2013
Total Amount Spent	\$296,360.75	\$280,758.75	\$395,665.00
# of Reports Completed	534	570	745

Source: Travis County Commissioner’s Court work session on mental health services, strategies and upcoming initiatives. April 17, 2014

3. Inmate Healthcare Analysis

Mental Health Housing

In response to the rise in the number and acuity levels of mental health inmates, TCSO recently opened Unit D East within the HSB as a critical care unit to accommodate the most seriously ill inmates. This results in a total of five acute units and three transitional/diagnostic units today, compared to three acute psych units and one transitional unit ten years ago. Each unit requires a full time counselor.

At the time of this report, a project to convert three single cells at TCJ and four single cells at TCCC to padded Full Safety Precautions cells was underway. FSP cells are used for suicide and self-injurious behavior prevention, designed to eliminate almost all opportunities for inmate suicide or self-injurious behavior, with padded walls, no furniture or elevated surfaces and a floor toilet controlled from outside the cell. While the increased need for FSP cells indicates an increase in the number of inmates with acute mental health conditions, the design is not conducive to sanitation, mental stabilization, or improvement.

Mental Health Service Delivery

Mental health services to inmates include screening and assessment, counseling, psychiatric consultations, medication administration and monitoring, suicide prevention, periodic reevaluation of the effectiveness of the treatment modality employed, and adjustment of the treatment regimen as needed. A summary of mental health services and activities appears below. A more detailed description appears in *Appendix C7 Detailed Description of Mental Health Services*.

Mental Health Service Provided at Central Booking Facility

Upon arrival at CBF, screening inmates is the first step to determining who requires mental health services, the level of care and the appropriate type of housing within the jail. Defendants are interviewed to obtain background information regarding their family history, medical history, mental health history, and criminal background using a screening form based on the Texas Commission on Jail Standards and a brief mental health screening tool. In addition to the initial oral screening, all Texas counties are required to check the state's mental health services database- the Client Assignment and Registration System (CARE)- to determine if the individual has had previous contact with the public mental health system.

Approximately 50% of all new arrivals are screened by mental health staff within 36 hours of being booked in. All inmates who remain in TCSO custody complete the TCSO Inmate Programs and Mental Health Screening. Additionally, through court orders, TCSO is required to complete mental health assessments and provide them to the courts.

The morning shift is responsible for gathering referrals from corrections and medical staff and prioritizing who needs to be seen as well as conducting a screening on all the remaining inmates who have not had a referral. This includes a significant portion of inmates who arrive at CBF overnight and have been seen by medical staff.

Unlike inmate medical services, mental health staff do not have designated clinic space within CBF. Counselors use available offices within TCJ.

Mental Health Services Provided at TCJ and TCCC

During the incarceration period, inmate mental health services consist of treatment programs concentrated on stabilization, self-improvement and transition back into the general population.

In TCJ, mental health staff works directly in the Medical Hallway (co-ed) area dedicated to house inmate patients with acute mental health needs. In TCCC, individuals suffering from mental illnesses are housed in the Health Services Building (HSB), which consists of a clinic area and several mental health housing units providing a total capacity of 249 beds. For a discussion on the housing options available to the mentally ill, please refer to *Chapter 7 Capacity Analysis* of this report.

While in the HSB, patients are seen by the psychiatrist daily and receive programs and counseling carefully monitored and charted. Inmates who are in psychiatric lockdown are seen by a counselor daily. All other mental health patients housed in units C, E and F (inpatient units) have one counselor that is assigned to monitor 48-56 patients at a minimum of once a week, which translates to as many as 65-70 individuals when considering the high turnover. Additionally, counselors must conduct reviews for inmates new to the unit and respond to inmate requests, officer referrals or emergency visits.

Cost of Incarcerating Mental Health Inmates

For many years, TCSO has collaborated with the Planning and Budget Office to identify the cost of incarcerating individuals with mental health issues. In 2012, Travis County estimated that it cost approximately \$92 per day in fixed costs and \$12 per day in marginal costs to house a psychiatric inmate. The costs for psychiatric special needs inmates were estimated at \$142 per day in fixed costs and \$35 in marginal costs- 60% more than what it costs to house inmates without mental illness. The county also estimated that \$100,000 were spent a month on psychiatric medications for these inmates.⁷

The increased number of inmates in jail who require mental health care, and the rising acuity levels suggest that the cost for mental health care for inmates will continue to increase.

Summary Healthcare Recommendations

In summary, the following recommendations are provided for TCSO Health Care Services.

- Close gaps in personnel and professional development
 - *Adjust the nursing salary schedule to reflect traditional nursing career progressions*
 - *Adjust the starting salary for mid-level professionals*
 - *Increase the budget for recruiting and internships*
 - *Hire an Education/Quality Assurance RN*
 - *Add five additional mental health counselors at TCJ*
 - *Pursue National Commission on Correctional Health Care accreditation*
- Upgrade equipment and technology
 - *Install an automated medication dispensing cabinet in TCCC clinic.*
 - *Install an adjustable examination table in physical therapy/wound care room in TCCC clinic*
 - *Install hand washing stations in all exam rooms*
- Reduce the use and cost of off-site medical services
 - *Expand on-site clinic services at TCCC*
 - *Explore the cost effective use of telemedicine*
 - *Continue healthcare cost containment practices and initiatives*

⁷ Source: http://www.co.travis.tx.us/criminal_justice/Research_planning/pdfs/justice_mental_health_2012-10.pdf

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4: Inmate Programs Analysis

4. Inmate Programs Analysis

The Inmate Programs and Services Analysis was conducted by Travis County Justice and Public Safety- Criminal Justice Planning Division, with guidance from the consultant team. The purpose of the review task was twofold:

- 1. to assess the effectiveness of current programs (both statutorily required and discretionary) and the delivery methods of these programs in relation to the population being served; and*
- 2. to develop recommendations for changes and improvements in delivery methods that, within the confines of current funding levels for program services, might help strengthen program functioning.*

For this review, Criminal Justice Planning interviewed jail staff, including Travis County Inmate Counseling and Education Services (CES), Chaplain Services, and SWAP Services. Interviews with other county inmate services were conducted to provide more information. To identify any needs or improvements of inmate programs and services, this review collected program data to develop an informal Inmate Jail Program Database. This report also drew on Wilkinson and Like's (2004) Travis County Jail Operations Review, Jail Overcrowding Task Force: Justice System Workflow Analysis.

Approach and Methodology

Criminal Justice Planning focused research on the programs and services provided to inmates at TCCC in order to assess the effectiveness of current statutorily required and discretionary inmate programs. The Social Services Manager and Director of Inmate Mental Health, Counseling and Education Services were interviewed to gain an understanding of the kinds of programs being provided to inmates, current practices, and delivery methods. Criminal Justice Planning additionally reviewed program literature.

This assessment was supplemented with an analysis of official program records collected by jail staff. Specifically, jail staff provided the Criminal Justice Planning team with six weeks of program rosters. Based on these rosters, an informal jail program database was created to examine weekly and daily program scheduling and frequency, attendance rates, classroom utilization, and program location (Health Services Building programs and in-unit programs).

Criminal Justice Planning also researched successful and innovative inmate programs nationwide. Specifically, staff focused research on jail programs that had both attracted the interest of Travis County program staff and programs located in counties and regions similar to Travis County. The objective of this task was to identify innovative programming that Travis County might use to enhance its own jail programming, whether to strengthen an existing program or to develop a new program.

Criminal Justice Planning synthesized collected information into a set of written findings concerning the effectiveness of the current programs and delivery methods of those programs in relation to the inmate population.

Overview of Jail Programs ¹

The following three specific entities within the Corrections Bureau provide services to inmates within TCJ or TCCC:

- **Correctional Counseling and Education Services:** provides counseling services, mental health services, and education programs to inmates at TCCC.
- **Chaplain Services:** provides spiritual and religious services to inmates, religious studies, and assistance in adhering to specific dietary or religious obligations specific to their faith.
- **The Sheriff Weekend Alternative Program:** provides an alternative to jail that has inmates perform community service during the day and allows them to return to their own residence in the evening.

Each of these entities is described in more detail below.

1. This section uses language from Wilkinson and Like's (2004). Travis County Jail Operations Review, Jail Overcrowding Task Force: Justice System Workflow Analysis.

Correctional Counseling and Education Services²

At TCCC, inmates can volunteer to participate in programs. Program eligibility may depend on classification. The process for participating begins when the inmate is provided with an Inmate Programs Booklet Catalogue. The Inmate Programs Catalogue provides a listing of the various available programs and services. Inmate participation is determined on the inmates 'housing location, custody status, and other factors.' Inmates interested in counseling and education programs or services send an inmate request to be placed on a waiting list for each program.

Chaplain Services

The Chaplain Services includes two Chaplains, six associate chaplains under contract, and 125 religious volunteers. Inmates interested in religious programs or services send an inmate request directly to Chaplain Services.

The Sheriff Weekend Alternative Program

The Sheriff's Weekend Alternative Program (SWAP) is an alternative to jail where inmates perform work in the community during the day and return to their own residence in the evening. Specifically, SWAP was established in 2007 to allow inmates with minor offenses to do their time on weekends, thereby allowing them to remain employed and continue to function in the community. The Mission of SWAP is 'to provide inmates who have been convicted of misdemeanor crimes an opportunity to serve their court-ordered sentence without jeopardizing their current employment'.

Inmates in SWAP perform manual labor work at the Travis County Correctional Complex and at community projects around the city. These inmates mow lawns, clean up cemeteries, perform yard work at local schools, and work at the humane society. For the most part, they work two days a week.

2. This section uses language from the Travis County Sheriff's Office's Inmate Programs Brochure.

Current Programs

This section presents an overview of the inmate programs provided by TCSO Counseling and Education Services. The mission statement of the Counseling and Education Services Division is:

TCSO Counseling and Education Services is a team of dedicated professionals, community partners and volunteers who offer quality programming concentrated on stabilization, self-improvement and transition back to the community by addressing the mental, emotional and educational needs of inmates.

This mission statement encompasses their focus on providing programming that may aide inmates when they transition back into the community.

Inmate Programs

The inmate programs provided by Counseling and Education Services are run by a team of dedicated professionals consisting of six coordinators:

- **Literacy and GED Coordinator:** Coordinates the volunteer literacy program, educational courses provided through Austin Community College, and special classes such as creative writing, tutoring, and philosophy, taught by volunteers. This Coordinator also serves as librarian.
- **GED and Computer Lab Coordinator:** Coordinates the inmate computer lab, GED reading and writing classes, Special Education courses provided through Del Valle Independent School District, and financial and health literacy education. Position also coordinates biannual Second Chance Job and Resource Fairs, offender workforce sessions, and job readiness classes provided by Goodwill Industries.
- **Women, Families and Children Coordinator:** Coordinates the People Recognizing the Inherent Dignity of Everyone (PRIDE) Program, a program for incarcerated mothers, and Parents and Children Together (PACT), a parenting program.
- **Substance Disorders and Anger Management Coordinator:** Coordinates the Rise Up and Preserving Our Worth Embracing Our Recovery (POWER) Programs, counseling programs for substance disorders, as well as the Sheriff's Assault Prevention Program (SAPP).
- **Volunteer Coordinator:** Coordinates the scheduling and activities of the division's volunteers.

4. Inmate Programs Analysis

While these coordinators perform a critical role in program delivery, the provision of programs is heavily dependent on community partner agencies, volunteers, and interns who offer a variety of classes to inmates, such as arts and crafts, yoga, and creative writing.

Organizational Structure

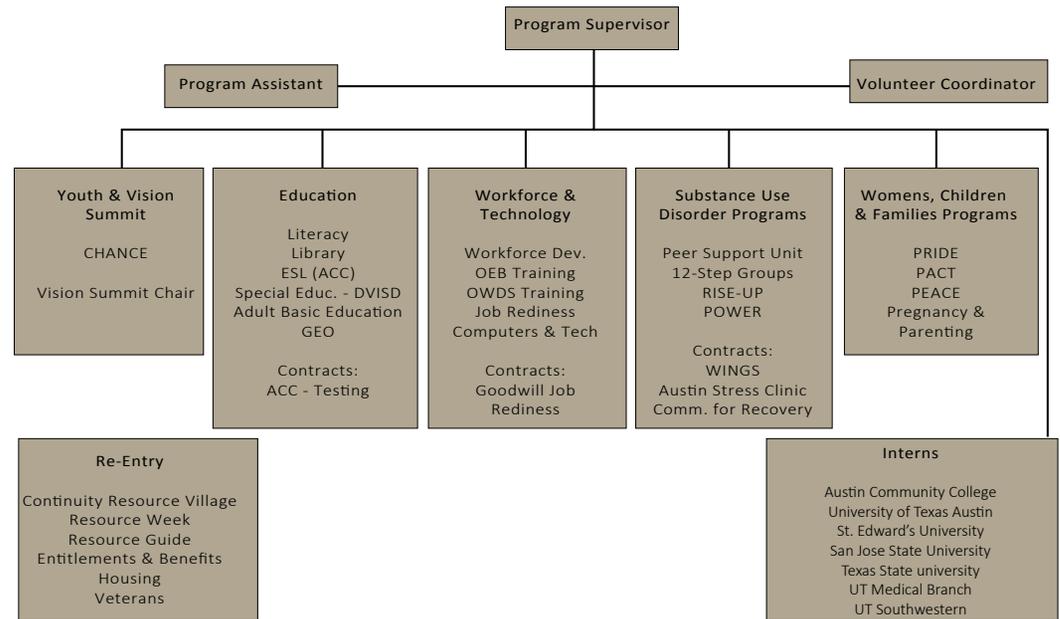
The following chart provides a current organizational chart for Counseling and Education Services.

Current programs offered to inmates in the Travis County jail system are organized along six major categories and include:

- Youth & Vision Summit programs: Programs for inmates up to 24 years old that address the GED, cognitive classes, anger management, healthy relationships, money management, young fatherhood, art, and life skills.
- Educational programs: Classes from basic literacy, English as a Second Language (ESL), GED, and an introduction to Austin Community College (ACC). Education programs are supplemented by enrichment classes such as meditation, yoga, art, and seminars in health and finance.
- Workforce and technology: Inmate training programs in computers and technology in the workplace.
- Substance Use Disorder programs: Provide inmates with opportunities for rehabilitation and self-improvement through programs such as peer support, 12-step groups, RISE-up, and POWER.
- Women, Children, and Families programs: Support programs for female mothers, including pregnancy and parenting classes.
- Re-entry programs: Programs tailored to prepare inmates for release by focusing on housing issues, transportation issues, medical/mental health issues, employment, identification, and applying for and/or reinstating social service benefits for inmates.

A more detailed description of each program can be found in *Appendix D1 Existing Programs*.

FIGURE 4.1 TCSO INMATE PROGRAM, ORGANIZATIONAL CHART DECEMBER 2014



Program Availability and Attendance

TCCC provided paper roster and attendance logs for six weeks in the spring and summer of 2014. Please note that attendance figures for classes may capture the same inmate, as some inmates attend multiple classes. Please also note that the majority of inmates counted in this program analysis have minimum or medium classifications.

The following table provides a listing of the dates examined for this section:

TABLE 4.1 NUMBER OF CLASSES BY WEEK

Weeks in 2014	# Classes	% Classes
March 3 - 7	93	16%
April 14 - 18	106	18%
May 5 - 9	115	20%
June 9 - 13	104	18%
June 30 - July 3	59	10%
July 7 - 11	100	17%
Total	577	100%

Paper rosters and attendance logs for classes provides the following information: class date, time, instructor name, number of inmates on the roster, number of attendees, class location, and building of origin for each inmate.

As these rosters and attendance logs primarily serve administrative purposes, data was not necessarily complete or consistent. Staff interpolated where possible to interpret the information, recognizing that this is not necessarily comprehensive program information. It also omits programming provided by other TCSO divisions.

Classes in the paper roster and attendance sheets fall into specific categories. The table indicates the program categories, as well as the number of classes in each category.

TABLE 4.2 PROGRAM CATEGORIES

Categories	# Classes	% Classes
12 Steps	12	2%
Educational	148	26%
Extracurricular	73	13%
Other	8	1%
Parenting	10	2%
Substance Abuse	108	19%
Veterans	33	6%
Vocational	52	9%
Women-Children-Families	78	14%
Youth Programs	55	10%
Total	577	100%

The categorization above provides a sense of inmate program priorities at TCCC. Staff found that Educational Classes (26%), Substance Abuse Classes (19%), and Women-Children-Families Classes (14%) were the three most frequently provided types of programs. *Appendix D2 Class Offerings by Category* provides the breakdown of different types of classes within each category.

Programs were further analyzed by gender. The table below provides the breakdown of classes available:

TABLE 4.3 JAIL PROGRAMMING PROVIDED TO MEN AND WOMEN

Categories	# Classes	% Classes
Programming for Men	430	75%
Programming for Women	146	25%
Total	576	100%

Note: One class (GED Testing) is open to men and women.

While 75% of programming is offered to men, this is proportionate with the percentage of women.

4. Inmate Programs Analysis

Attendance rates were analyzed for each class in which data was captured (62% of classes). This data should be interpreted cautiously, as 38% percent of courses did not have attendance information available. The table below presents attendance information by type of class:

TABLE 4.4 JAIL PROGRAM ATTENDANCE FOR THE 355 CLASSES WITH ROSTERS AND ATTENDANCE LOGS

Type of Class	# Classes (w/attendance)	# on Rosters (all classes)	# Attended (all classes)	% Attended (all classes)
12 Steps	5	103	39	38%
Educational	99	1,163	536	46%
Extracurricular	46	787	405	51%
Other	6	202	64	32%
Parenting	7	173	82	47%
Substance Abuse	74	1,410	998	71%
Veterans	25	341	183	54%
Vocational	35	310	162	52%
Women-Children-Families	22	270	132	49%
Youth Programs	36	635	304	48%
Total	355	5,394	2,905	54%

Note: CJP had complete Rosters and Attendance Logs for 62% of all classes (355 out of 577). Classes with missing data excluded from this analysis.

The three types of classes with highest attendance percentages are Substance Abuse Classes (71%), Veterans Classes (54%), and Vocational Classes (52%).

Criminal Justice Planning also examined the building of origin for inmates attending classes. The table below provides the building of origin and provides the number of people:

TABLE 4.5 BUILDING OF ORIGIN FOR INMATES

Building of Origin	# People	% People
Building 1	765	27%
Building 2	6	0%
Building 3	42	1%
Building 11	20	1%
Building 12	2,017	71%
Total	2,850	100%

Note: We have building of origin information about 2,850 people.

The two buildings with the highest percentage of inmates attending programs were Building 12 (71%) and Building 1 (27%). Clearly, a very large volume of inmates travel between Building 12 and HSB for program access throughout the day.

Finally, Criminal Justice Planning examined classroom usage by room number, date, and time, which allowed an assessment of classroom utilization. This data is available for review in *Appendix D3 Classroom Utilization*.

Program Delivery

Delivery of inmate programs is governed by Texas Commission on Jail Standards, which requires implementation of written plans for inmate rehabilitation and education, making participation by inmates in programs voluntary. Each housing unit has a copy of the Inmate Programs Brochure, which is the course catalog of all the programs available to inmates.

Inmate participation in all programs is voluntary. Access to programs is either granted through submitting a request for admission to the Program Coordinator, or, in some cases, inmates are screened for eligibility based on established criteria and then asked if they wish to participate (for example, the CHANCE program is only for male inmates who are 17-24 years of age).

Inmate Counseling and Education Services continue to strive for a more needs-based admission to programs. They are also developing more programs for the Maximum security inmates, who may only access programs within their housing units. Most current programs have a waiting list, with inmates being placed on the list in the order that the requests are received.

Inmates housing location, custody status, and other factors may affect participation in programs. The vast majority of programs are offered in the Health Services Building. A more limited number of programs are offered at individual housing units.

The table below provides an overview of program spaces, and related capacity, available at TCCC:

TABLE 4.6 PROGRAM SPACES, AND RELATED CAPACITY, AVAILABLE AT TCCC

Building	Room	Sq Ft	Classroom	Assembly
1	Show up	670	33	44
2	E125 MPA	1100	55	73
2	E124 Classroom	160	8	10
3	MPA North	260	13	17
3	MPA South	260	13	17
Chapel	Fellowship Hall	1550	77	103
HSB	1A28 Group Meeting	220	11	14
HSB	Classrooms 1-11	600	30	40
HSB	Classroom 13	1350	*49	*49
12	A-F Multipurpose	290	14	19

As the table indicates, the vast majority of program spaces (13 of 20) are located within the Health Services Building (HSB). Four buildings (1, 2, 3, and 12) provide program space for their respective housing units.

Program location is an important issue given the mobility constraints for maximum security inmates. Minimum and Medium security inmates move unescorted to program spaces in other facilities, while maximum security inmates require escorts for movement. As a result, maximum security inmates are only granted access to programs offered at their housing unit.

4. Inmate Programs Analysis

FINDING 4.1

Access to inmate programs, particularly those held in classroom settings in the Health Services Building, is limited for inmates classified as maximum security. The vast majority of inmate programs are offered at HSB, where access is restricted for maximum security inmates. Some programs are offered at the housing units, but class offerings are much more limited. Providing additional programs to maximum security inmates could provide a substantial benefit.

RECOMMENDATION

Explore use of additional space to expand access to programs at the housing unit level. Where unused space exists now, consider outfitting it for program delivery. In developing the physical Master Plan in Phase 2, provide additional program space at housing units, particularly for maximum security inmates who do not have access to the array of programs offered at HSB.

Future Program Opportunities

Criminal Justice Planning also discussed future program opportunities with Inmate Programs staff. The discussion included both new programs currently under consideration by the division as well as best practices in program offerings from jurisdictions around the country.

Inmate programs staff helped identify new and expanded programs that might be offered at TCCC, focusing on opportunity areas where gaps currently exist. Several opportunities were identified, including the following:

- Therapeutic housing units (specific for substance abuse recovery, pregnancy, etc.);
- New vocational programs (culinary arts, hospitality, fish farming, Habitat for Humanity). Currently, vocational programs, while well-attended, represent a relatively small proportion of inmate programs;
- A mentoring program between veterans and youthful offenders (to begin May 1st);
- Expanded pregnancy and breastfeeding education ;
- Expanded dog-training program.

These programs have the opportunity to improve outcomes and opportunities for jail inmates. Each of these, however, has spatial and staffing implications.

Recommendations for accommodating new programs are outlined at the end of this chapter.

Successful and Innovative Inmate Programs around the Country

To supplement input provided by Inmate Programs staff, Criminal Justice Planning researched successful and innovative inmate programs around the country, focusing on benchmark jurisdictions. The objective of this task was to identify innovative programming that Travis County might use to strengthen an existing program or to develop a new program.

During the preliminary stages of this project, Criminal Justice Planning found that there was a paucity of research about jail programming. At present, the criminal justice research literature largely focuses on two related, but different areas: institutional corrections (prison) programming and the re-entry challenges that inmates face as they re-enter society after a period of incarceration (see *Appendix D4 Research & References*). While this research is important for evaluating prison programming, it has some shortcomings when it is applied to planning efforts around jail programming. One shortcoming, for example, is that inmate jail sentences are often quite short compared to prison sentences. Thus, the correctional programming for jail inmates needs to focus on providing services to inmates for the time that they are in jail. When administering longer programs, jail program workers should ensure that people with longer sentences are enrolled in these programs.

Given these limitations, Criminal Justice Planning relied on interviews with researchers and justice staff in the field. Specifically, Criminal Justice Planning spoke with national experts in jail programming and staff from jails throughout the county (see *Appendix D5 Phone Survey & Contacts* for a list of the people, and their respective agencies, consulted for this report).

A. Vocational Programs

There are two different ways jails provide vocational training to inmates. First, jails may have Workforce Readiness Programs, which offer inmates skills and training on employment retention, resume building, interviewing, and job hunting techniques. These programs focus on helping the inmate to create and maintain a professional appearance and to exhibit professional behavior with potential employers.

Jails may also have Vocational Programs, which provide inmates with the opportunity to obtain ‘hands-on’ training and skills for a specific type of job. These programs focus on training inmates in certain industry-specific skill sets while they are incarcerated. The goal of these programs is to provide the inmate with specific work skills prior to release to facilitate their job search in the community. Most of these latter inmate programs provide a certificate upon completion.

Some jurisdictions have done a particularly good job at connecting inmates with continuing education after release. The Vocational Training Center (VTC) in Harris County, Texas encourages former inmates to continue their education after receiving certificates by allowing the non-credit hours (time) to count toward college credit hours.

In Montgomery County, Maryland, inmates who are about to exit jail can participate in Pre-Release and Reentry Services (PRC) programming. The PRC specifically serves inmates who are within 12 months of their release date.

The PRC is a work release program that encourages some individuals in confinement to gain services that are available in the community (vocational training, education, and social services). In one example, PRC recognized the need for people with certification in the food industry for the growing restaurant industry. PRC began to provide ServSafe, a food and beverage safety training and certificate program administered by the National Restaurant Association.

B. Programs focused on Women

Programming that focuses on women varies significantly across jails. Some programs focus on providing counseling or therapeutic classes or programs, while others target parental care, to strengthen parenting skills. Several counties interviewed mentioned classes or programs to help support inmates who were parents to children, though limited detail was provided.

One county (Montgomery County, MD) offers women-specific parent programming. They provide women with a case manager who organizes weekly group sessions covering a wide range of topics from substance abuse to parental care.

FINDING 4.2

Although there are a variety of programs available to the inmate population, there are still gaps that should be addressed.

- Most programs have long waiting lists due to several factors, particularly due to limited staff and volunteer resources. Wait times are also impacted by efforts to provide equal programming to all areas.
- While classrooms are heavily utilized during day hours (8am-3pm), there is additional capacity for more programs.
- Although comparable classes are offered to both male and female inmates, there is a need to expand gender-specific programming and interventions for female offenders.
- A particular gap relates to the GED. While eligible inmates are identified in the booking process, the test is currently undergoing a transition away from paper testing. TCCC has outfitted classrooms for online testing, but they have not yet been used due to security concerns. Additionally, as the classrooms are located in the HSB, maximum security inmates are not eligible.

4. Inmate Programs Analysis

RECOMMENDATIONS

- **Provide additional space to meet program objectives:** First and foremost, this should include a large multi-purpose space for major events (i.e. job fairs). Other programs have specialized space needs unique to their function. Nursing mothers require lactation rooms. Culinary arts programs require kitchens for food preparation. Habitat for Humanity would require an outdoor construction area.
- **Explore gender-specific programs focused on the female population's greatest needs:** multifaceted treatment for drug abuse, trauma recovery, pregnancy, parenting skills and training in jobs to be offered, when possible, in the least restrictive programming environment.
- **Remove obstacles from providing programs, such as the GED:** Bring stakeholders together to address access and security issues to find a workable solution to provide inmates with access to GED testing.

FINDING 4.3

Additional programming requires more volunteer organizations to get involved with inmate program delivery.

RECOMMENDATION

Develop policy for county-funded community programs to offer a percentage of services within the County. Promoting the involvement of non-profit organizations in inmate programs would boost the number of volunteers available to instruct courses as well as the variety of courses that could be offered to inmates, connecting inmates with new opportunities.

Summary Inmate Programs Recommendations

In summary, the Criminal Justice Planning team proposes the following recommendations:

- Explore use of additional space to expand access to programs at the housing unit level.
- Assess areas where additional volunteers or interns may be used to enhance current programs and/or offer new ones.
- Provide additional space to meet program objectives.
- Explore gender-specific programs focused on the female population's greatest needs.
- Remove obstacles from providing programs, such as the GED.
- Develop policy for county-funded community programs to offer a percentage of services within the county.

5: Classification Analysis

5. Classification Analysis

This section of the report summarizes the findings and recommendations derived from the inmate classification analysis. The purpose of this analysis was to review and validate the current Travis County inmate classification system as well as the current housing plan and to recommend changes to improve the effectiveness and efficiency of the current classification system relative to bedspace utilization.

Approach and Methodology

For the review and analysis of the Travis County's inmate population classification system, the services of the JFA Institute (JFA) were engaged by the CGL Team. As part of the evaluation process, JFA reviewed and assessed the classification instrument currently utilized and conducted an on-site visit to observe the classification process firsthand. This assessment was supplemented with on-site interviews with classification staff and follow-up telephone and e-mail conversations to identify strengths and weaknesses of the current classification tool, process and system. As part of the review and evaluation process, the consultant also met with representatives from the Texas Jail Commission on May, 15, 2014 regarding the assessment criteria.

The first phase of the evaluation process entailed conducting a reliability test to measure the percent agreement between the initial and reclassification scores. The second phase involved the performance of a statistical validation test regarding utilization and validity of the initial and re-classification system. Both tests were supported by an analysis of data provided to the consultant by County staff.

Based on the interviews with County staff and the data analyses, the overall effectiveness and/or deficiencies of the current classification system were determined. Recommended changes to the instrument were presented to County staff for approval. The effects of implementing the recommended instrument changes were simulated to more accurately reflect what the bedspace requirements by custody level could be on the current and future projected forecast needs, as discussed in *Chapter 6 Inmate Population Projections* of this report.

Overview of Current Classification System

The current classification system is based upon the design set forth by the National Institute of Corrections (NIC) Jail Center. This system has been widely adopted in literally hundreds of local jail systems throughout the nation. It is based on NIC's objective prison classification which has also been widely used by most state prison systems.

The classification system has several distinct features to it. First, the format is what is referred to as an additive point system which is commonly found in most inmate classification and risk assessment instruments.

Second, the system consists of both an initial and reclassification process. The former is conducted within a few days of booking and is used to make an initial housing assignment. The latter instrument is used after the inmate has been in custody for 60 days. Unlike the initial classification instrument, it places more emphasis on the inmate's conduct since the initial classification assessment was completed. The reclassification process is completed every 60 days thereafter.

Third, there is a professional staff of classification officers who are assigned to the classification unit. The primary function of these staff is to complete the initial and reclassification assessments as required by policy. A total of 12 staff are currently assigned to the unit with three of them being civilians.

Fourth, the TCSO maintains a spreadsheet document that provides a current list of instructions for staff to follow in completing the initial and reclassification instruments. This spreadsheet is updated on a regular basis, having been last updated on April 8, 2014.

Fifth, the TCSO has a detailed housing plan that determines the bed capacity and allowable custody designations for each major housing unit. While there is some allowable mixing of medium and maximum, as well as minimum and medium custody general population inmates, there are no locations where maximum and minimum custody general population inmates may be housed together.

Finally, the entire process is automated so that all of the classification information is stored on the Sheriff's jail management system.

Current Issues

Although the overall classification system is compliant with national standards, there are two significant issues that need to be resolved.

First, the current practice is for the classification assessments to be done without the benefit of a formal and confidential interview with the inmate. The benefits of such an interview are as follows:

1. Classification staff can use the interview to get more specific information on those risk factors that are being used to score the inmate's initial or reclassification level. This "background" information is widely used to determine if the scored custody level should be over-ridden.
2. The interview is used to explain to the inmate the basis for the classification assessment and, more importantly, how the inmate can lower his/her custody level by compliant behavior and participating in the jail's various work and treatment programs.
3. Finally, it is important that the inmate be directly asked, "Is there anything else you wish to tell me before I complete your classification assessment?" Additionally, the interview provides an opportunity to ask, "Have you ever been the victim of sexual assault or abuse while incarcerated in a jail, prison, or juvenile detention facility?" These questions are designed to make sure the inmate has had an opportunity to provide critical information that needs to be revealed to protect the inmate and staff. In terms of PREA considerations, the consultant recommends that the second question be asked at the time of booking, as there is currently no face-to-face classification interview opportunity to do so.

FINDING 5.1

The current classification assessment is done without the benefit of a formal and confidential face-to-face interview with the inmate. The assessment is done remotely by civilian staff (Security Specialists) at TCCC and does not involve direct contact with the inmate.

RECOMMENDATION

Conduct a brief 3-5 minute face to face interview with the inmate for both initial and reclassification events.

TCSO policy requires all staff having direct contact with inmates to be sworn officers. The change from a remote entry process to a face-to-face interview with inmates will require a change in the status of classification staff from civilian security specialist to sworn correction officer and a corresponding salary adjustment. Staffing and space requirements to support face-to-face classification interviews in the new downtown central booking facility should be determined in Phase 2 of the Master Plan.

Second, the Texas Commission on Jail Standards (TCJS) conducted an audit of the TCSO's Objective Classification system in March 2014. That audit faulted the Sheriff for only assessing the past ten years of an inmate's criminal record for scoring purposes. It should be noted that the entire criminal record is always reviewed but only the past ten years are counted on the "severity of prior convictions" and the "number of prior felony convictions" items. The ten year time frame is consistent with the NIC objective jail classification guidelines and training curriculum.

This issue was brought to the attention of the TCJS in a letter dated April 14, 2014 by the author of this chapter and the NIC OJC guideline manual. A meeting was then held with TCJS officials on May 15, 2014. It was agreed that if the study being completed here indicated that the prior criminal history factor without time frames was in-effective, the County would be free to impose those time frames.

5. Classification Analysis

The Texas Commission on Jail Standards has opined that the long-standing ten year restriction on severity of prior convictions and the number of prior felony convictions should be rescinded and that such convictions should have no time limitation. To examine this issue in greater detail, a random sample of 100 inmates who had been classified as medium or maximum custody was drawn. Classification Unit staff were then asked to review each case and rescore the inmate's initial custody instrument by imposing the previously used ten year time limit. That analysis found that 18 of the 93 cases (19%) that were reviewed would have a lower classification point total. Twelve of the 18 cases were maximum custody inmates who would be scored as being in need of medium or minimum custody. The remaining six (6%) were medium custody inmates who would now be classified as minimum custody.

More significantly, of the 18 cases only two have had any disciplinary infractions since being incarcerated meaning that they are behaving very much like medium and minimum custody inmates.

FINDING 5.2

TCJS policy on prior criminal convictions is resulting in an over classification of inmates to maximum custody.

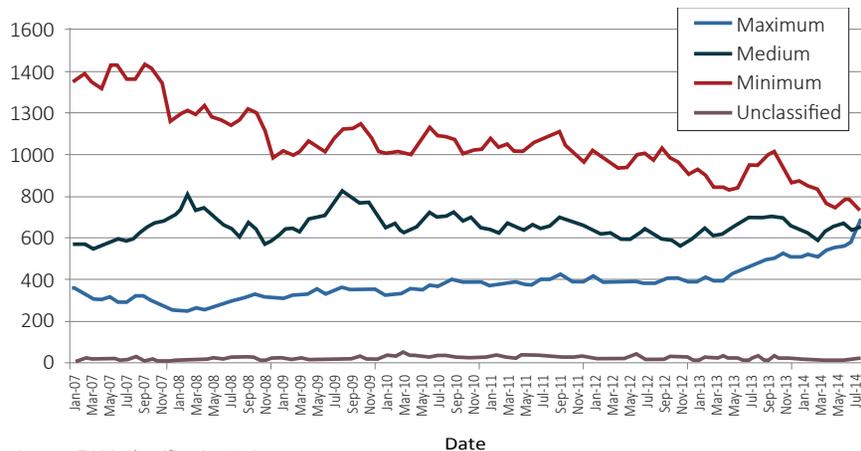
RECOMMENDATION

Restore the ten year time limits on prior criminal conviction scoring factors.

Recent Classification Trends

Related to the TCJS matter, there has been a consistent pattern over the past few years where the number of minimum custody inmates has been declining and the number maximum custody inmates has been increasing. Figure 5.1 below was provided to the consultant by TCSO staff and shows these trends for the male population. Since 2007, the number of minimum custody inmates has declined from about 1,400 to about 800. At the same time, the maximum custody inmate population increased from about 400 to 700. One can also see a sharp uptick in the maximum custody population and an associated decline in the minimum after March 2014 at the time TCJS issued its order for TCSO to alter its classification scoring rules.

FIGURE 5.1 MALE INMATE POPULATIONS BY CLASSIFICATION CUSTODY LEVELS



Source: TCSO Classification Unit

The earlier declines can be attributed to declines in the overall jail population. Based on Figure 5.1, the male inmate population declined from about 2,400 to 2,075 by July 2014. The decline in the minimum custody populations is consistent with the decline expected when people charged with less serious crimes and criminal backgrounds are diverted from jail. This decline can also be attributed to the variety of pre-trial initiatives and specialty courts and dockets implemented by the County over the years to help manage jail bedspace demand. But the current percentage of maximum custody male inmates seems very high by national standards and is probably related to the TCJS order to alter the TCSO classification scoring rules. This issue is described in greater detail later on in this report.

Reliability and Validation Studies

The classification system evaluation process involved the performance of reliability and validation studies based on data provided to the consultant by County staff. The results of both assessments are presented and discussed below.

Reliability Study Results

The first phase of the evaluation process was an inter-rater reliability test. Inter-rater reliability measures the degree of agreement by two independent classification staff on the same cases being classified. These examinations seek to measure the extent to which the classification staff are accurately completing the initial and reclassification assessment records. In Travis County, the classification system is fully automated which facilitates the process for conducting the reliability test.

A random sample of 100 inmates that was stratified by gender and initial versus reclassification records was drawn from the inmate population that was in custody on August 24, 2014. For each selected case, a trained classification unit staff member was asked to re-score the completed initial or reclassification record. Both the original and rescored data were entered on site by JFA staff and readied for analysis.

The results are shown in Tables 5.1 and 5.2 below. For each item, the percent agreement between the original and rescored item is shown. The standard used for evaluating the level of agreement is that each item must at a minimum achieve an 85% level of agreement. For the final custody level there must be a 90% agreement level.

As shown in the two tables below, TCSO is easily meeting these standards. Many of the items recorded a perfect test-retest score. The only item that did not achieve the 85% threshold was the drug/alcohol abuse item that scored 84% on the reclassification record for the females. This is largely due to the subjective nature of the item and the fact that inmates are not interviewed as part of the classification process. Relative to the scored custody level there were no disagreements.

**TABLE 5.1. INITIAL CLASSIFICATION RELIABILITY RESULTS
BY ITEM BY GENDER**

Initial Score Item	Males	Females
Severity of Current Offense	100%	100%
Serious Offense History	100%	100%
Escape History	96%	100%
Institutional Disciplinary History	96%	100%
Prior Felony Conviction	96%	100%
Alcohol and/or Drug Abuse	100%	96%
Stability Factor Points	100%	100%
Scored Custody Level	100%	100%

TABLE 5.2. REASSESSMENT RELIABILITY

Reassessment Score Item	Males	Females
Severity of Current Offense	100%	92%
Serious Offense History	96%	96%
Escape History	100%	96%
Number of Disciplinary Convictions	96%	96%
Most Serious Disciplinary Conviction	100%	92%
Prior Felony Conviction	100%	96%
Alcohol and/or Drug Abuse	100%	84%
Scored Custody Level	92%	96%

5. Classification Analysis

Validation Study Results

The next phase of analysis focused on what is generally referred to as a validation study. For most risk assessment systems, this form of analysis narrowly evaluates the extent to which risk factors (the independent variables) are associated with re-offending or recidivism rates (the dependent variables). For inmate classification systems, the issue is a bit more nuanced.

Inmate classification or custody systems are based on three generic factors of which only one is linked directly to risk – severity of the crime committed (and other factors associated with the crime), inmate’s conduct while incarcerated (a just deserts model), and those that are actually risk of future misconduct. These diverging objectives are born out in the initial and reclassification instruments. The initial classification assessment is heavily driven by current and past criminal conduct, and risk factors like age and gender. The reclassification instrument shifts this focus to the inmate’s conduct since being admitted to custody. It is much more attuned to the “just deserts” approach.

Finally, validation studies for jail classification systems are constrained by the very short periods of incarceration which greatly limit the rate of misconduct. Unlike a prison system where people spend an average of 30 months or more, the average LOS in a jail is in the 20-30 day range with a large proportion of jail bookings being released within a week. This means that a large percentage of the jail population will not have an official misconduct or disciplinary report lodged against them. This also means that validating the classification instrument will be constrained by the so called “lack of variance” in the dependent variable.

With these methodological issues in mind, a validation study was completed as follows:

- A snapshot of the current jail population as of May 2014 was secured. The number of inmates who were captured in this data file was 2,316 inmates.
- For each inmate the consultant was able to locate the person’s background attributes as well as the initial and current reclassification instrument (assuming the inmate had been in custody for 60 days or more).
- All of the inmate’s disciplinary report convictions that had been lodged against the inmate were also secured.

Classification Attributes of the Current Population

The first task of the validation assessment was to identify the classification levels of the current population and the factors that produce those results. Table 5.3 summarizes the current classification levels for current inmate population disaggregated by gender and initial versus reclassification instruments. Note that there were 72 inmates who were unclassified at the time the snapshot file was created, which is about 3% of the inmate population. This percentage of unclassified is a fairly normal percentage for jail systems.

TABLE 5.3. CURRENT FINAL CLASSIFICATION LEVELS BY GENDER BY TYPE OF CLASSIFICATION STATUS

Classification Level	Males		Females		Total	
	Inmates	%	Inmates	%	Inmates	%
Initial						
Minimum	473	41%	119	62%	592	44%
Medium	395	35%	46	24%	441	33%
Maximum	272	24%	27	14%	299	22%
Reclassification						
Minimum	326	39%	18	21%	344	38%
Medium	262	32%	29	34%	291	32%
Maximum	238	29%	39	45%	277	30%
Grand Totals						
Minimum	799	41%	137	49%	936	42%
Medium	657	33%	75	27%	732	33%
Maximum	510	26%	66	24%	576	26%
Grand Totals	1,966	100%	278	100%	2,244	100%

Source: TCSO Snapshot Data File

Over-Rides

The term “Final Classification” level means that the inmate’s custody level has been determined by either the scored custody level or one that includes an over-ride by the classification staff. The data file that was received by JFA Institute had both the scored level and the final level. If the inmate’s scored classification level was to be over-ridden, then there was to be a reason listed in the data file for such an action.

Table 5.4 shows the overall number of over-rides and the direction of the over-rides. There were 397 inmates whose scored custody level was changed to either a higher or lower custody level. Of that number virtually all of the over-rides placed an inmate in a higher custody level. The most frequent type of over-ride was for inmates scored as minimum but were placed in medium custody. The exact reason(s) for these over-rides was not documented in the data file but one would assume they reflect both mandatory over-rides and discretionary ones. For example, if a person has a felony detainer, the final classification is elevated to medium even if the inmate was scored as minimum. This also includes inmates with ICE detainees which consists of 250-300 inmates. Finally the TCSO will increase anyone with an escape or murder charge to maximum custody. This is done for both initial and reclassification.

TABLE 5.4. NUMBER AND DIRECTION OF THE OVER-RIDES

Attribute	Inmates	% of Population
Total Population	2,244	100%
Over-Rides	397	18%
Total Up	388	17%
Total Down	9	<1%
Min to Med	262	12%

The overall rate is not excessive (the recommended range is for discretionary over-rides to be in the 5%-15% range). What is unusual is the direction of the over-rides which are largely in the upward direction. Most of these over-rides are occurring for the males for the initial classification event (Table 5.5).

TABLE 5.5 SCORED VERSUS FINAL CUSTODY LEVELS INITIAL CLASSIFICATION – MALES

Final	Scored Initial Level			Total	
	Minimum	Medium	Maximum	Total Inmates	%
Minimum	473	0	0	473	41%
Medium	153	238	4	395	35%
Maximum	16	105	151	272	24%
Total Inmates	642	343	155	1,140	100%
%	56%	30%	14%	100%	
Over-Ride Summary		Up	Down	Total	
		24%	0%	24%	

FINDING 5.3

A considerable level of over-rides occur, especially during the initial classification process of males. These over-rides are not being properly recorded in TCSO data system, making it very difficult to assess their use.

RECOMMENDATION

Develop a formal listing of all over-rides and separate them into the categories of mandatory and discretionary over-rides.

5. Classification Analysis

Disciplinary Conduct of the Jail Population

As noted earlier, the consultant received all of the inmate disciplinary infractions that had been entered into TCSO data system at the time the snapshot file was created. Table 5.6 shows the number of incidents, percentage of the jail population with no disciplinary reports, average number of incidents per inmate and the top 20 disciplinary offenses. A total of 2,927 disciplinary charges have been logged against the 2,316 inmate population or an average of 1.3 charges per inmate overall. However, only 29% (672 inmates) of the population has one or more charges, an average of 4.4 charges per inmate.

There are a wide variety of offenses ranging from low to high severity. The four most frequent charges that count for about half of the infractions are not violent actions but more disruptive management issues (Refusal to Follow Written or Oral Direction, Disrespect to Staff, Excessive Noise, and Disruption of Any Jail Activity).

TABLE 5.6. SUMMARY OF DISCIPLINARY INFRACTIONS FOR CURRENT JAIL POPULATION

Key Attributes	N	%
Inmate Population	2,316	
Number in Custody Less Than 60 days	1,416	
Average Time in Custody Thus Far	75 days	
% With No Disciplinary Infractions	71%	
Average Number Per Inmate	1.3 charges	
Total Disciplinary Charges Issued	2,927	100%
Average Number Per Inmate w one or more	4.4 charges	
Top 20 Infractions		
Refusal To Follow Writ Or Oral Direct	571	20%
Disrespect To Staff	345	12%
Excessive Noise	226	8%
Disruption Of Any Jail Activity	222	8%
Ent/Be Pres/Exit Area W/O Perm(Major)	139	5%
Ent/Be Pres/Exit Area W/O Perm(Minor)	127	4%
Fighting	77	3%
Violation Of Writ Or Posted Rule	77	3%
Possession Of Contraband (Minor)	71	2%
Impeding Inmate Headcounts	64	2%
Malingering	59	2%
Possession Of Contraband (Major)	54	2%
Inciting A Fight	48	2%
Threatening Staff	48	2%
Possession Of Unauth Clothing, Linen, Bedding	46	2%
Disorderly Cell Or Bunk Area	43	1%
Interference W/Security Operations	41	1%
Disrespect To Other Inmates	39	1%
Viol Of Medical Consumption Procedures	38	1%
Recklessness	35	1%
<i>Source: TCSO Snapshot Data File</i>		

More serious infractions only account for about 18% of all of the infractions. The most frequent serious charge is for inmates who have entered or exited a housing unit without permission (Table 5.7).

TABLE 5.7 SUMMARY OF VIOLATION CHARGES

Violation Charge	Charge	%
Ent/Be Pres/Exit Area W/O Perm(Major)	139	4.7%
Fighting	77	2.6%
Possession Of Contraband (Major)	54	1.8%
Inciting A Fight	48	1.6%
Destruction Of Property (Major)	33	1.1%
Threatening Inmates	26	0.9%
Assault On Inmate	22	0.7%
Throw-Propel Objects Or Substances	22	0.7%
Trafficking (Major)	20	0.7%
Theft (Major)	18	0.6%
Sexual Activity	14	0.5%
Assault On Staff	12	0.4%
Poss Of Altered Items (Major)	11	0.4%
Acts Class As Offenses Under Texas Law	9	0.3%
Possession Of Stolen Property (Major)	8	0.3%
Pos Manf Use Inh,Chem Ag,Unauth Drugs	5	0.2%
Poss Manuf Weapons Or Escape Tools	2	0.1%
Riotous Behavior	3	0.1%
Sexual Solicitation	3	0.1%
Total	523	17.8%

Source: TCSO Snapshot Data File

Classification Scores

In the following sections, the populations are separated into two major groups – those that only have an initial classification and those that have at least one re-classification record. In so doing, the relative effects on the overall classification system by initial and reclassification can be assessed separately. All of the analysis is further separated by gender.

Initial Classification

Table 5.8 summarizes the initial classification scores for the current inmate population by gender. There are several trends to note. First, the number of inmates charged or convicted for a “high severity” offense crime is relatively small whereas a large number is assigned to the moderate group. Further, women tend to be charged with less severe offenses and are far more likely to have either no prior record or a low offense record. For both males and females few have an escape or a record of prior institutional violence. Alcohol and substance abuse percentages are about the same for males and females with 40% reporting no prior problems.

Finally, a significant number have points deducted due to their age (26 years or older), employment and/or stable residence.

Few inmates are scored for having prior institutional disciplinary problems. This may be due to the short time frames used to score such behavior. Specifically, TCSO only retains serious misconduct for up to four years. Other jail classification systems typically retain prior institutional violence for 7-10 years. But it is also true that because 1) many people booked into a jail are experiencing their first jail experience and thus have no prior conduct, and, 2) most people who are released from jail do not get involved in violent behavior, the number of inmates being scored for such conduct is quite low. The specific offenses that can be counted and time frames for counting them are shown in Table 5.7.

5. Classification Analysis

TABLE 5.8. INITIAL CLASSIFICATION SCORES BY SCORING ITEM BY GENDER

Initial Scoring Item	Score	Males		Females	
		N	%	N	%
Total		1,140	100%	192	100%
Severity of Current Offense					
Low	0	297	26%	56	29%
Moderate	2	689	60%	115	60%
High	5	19	2%	5	3%
Highest	7	135	12%	16	8%
Serious Offense History					
None or low	0	378	33%	101	53%
Moderate	1	609	53%	81	42%
High	4	23	2%	1	1%
Highest	7	130	11%	9	5%
Escape History					
None or low	0	1,118	98%	189	98%
Unauthorized absence from CCF /program	3	8	1%	1	1%
Offense for escape	7	14	1%	2	1%
Institutional Disciplinary History					
None or minor	0	1,032	91%	176	92%
One or more major	3	108	9%	16	8%
Prior Felony Conviction					
None	0	502	44%	115	60%
One	2	187	16%	28	15%
Two or more	4	451	40%	49	26%
Alcohol and/or Drug Abuse					
No problems	0	473	41%	78	41%
Social, economic, legal problems	1	546	48%	94	49%
Assaultive behavior	3	121	11%	20	10%
Stability Factor Points					
-3		195	17%	21	11%
-2		371	33%	73	38%
-1		458	40%	79	41%
0		116	10%	19	10%

Source: TCSO Snapshot Data File

Reclassification

The reclassification scores show a similar pattern in that few inmates have a 1) “high severity” level for the current and prior offense rating and 2) prior escape histories. Higher proportions of the inmates at reclassification receive points due to their prior convictions and alcohol and drug/alcohol abuse.

The number and severity of disciplinary infractions are relatively low at reclassification. This is due to the internal policy of TCSO that any infraction that results in a 4 – 23 hour cell restriction lock down, a verbal warning or some other informal sanction is not to be counted for reclassification purposes. The two scoring items that measure the number and severity of disciplinary conduct are based only on the past 60 days or since the last reclassification. Consequently an inmate can quickly have his/her custody level lowered if one’s conduct is satisfactory.

Association with Misconduct

Simple bivariate analyses were first done on the existing classification instruments. Initially there are few items that are associated with subsequent misconduct if one uses all of the misconducts that inmates have received on the current incarceration. But that is to be expected since many of the scoring items are not designed to be predictive but rather are used to be more restrictive simply for other considerations.

When the criteria of the more significant and serious offenses as outlined in Table 5.10 are used, the associations become much stronger (Figure 5.2). This is expected since two of the major scoring items for the reclassification instrument are the number and severity of recent serious misconducts. It should also be noted that large proportions of the inmates assigned to medium and maximum custody have not received any disciplinary reports at all or have no serious misconducts. This would suggest some level of over-classification.

5. Classification Analysis

TABLE 5.9 DISCIPLINARY INFRACTIONS TO BE COUNTED FOR INITIAL CLASSIFICATION

4 Year Retention
Acts Classified As Offenses
Assault On Staff/Inmate
Falsely Reporting An Emergency
Fighting
Habitual Disrupter
Inciting A Fight
Inciting Riotous Behavior/Riot Behavior
Interference W/Security Operations
Poss/Manufacture Weapons Or Escape Devices
Setting Of Fires
Sexual Abuse
Threatening Staff/Inmates
Throw/Propel Objects Of Substances
Under The Fed Law/Texas Law
2 Year Retention:
Smoking
1 Year Retention
Destruction Of County Property
Disrespect To Staff
Entry/Be Present/Exit Area W/O Perm
Feigning Injury To Illness
Refusal To Follow Written/Oral Directive
Trafficking

TABLE 5.10 RE-CLASSIFICATION SCORES BY SCORING ITEM BY GENDER

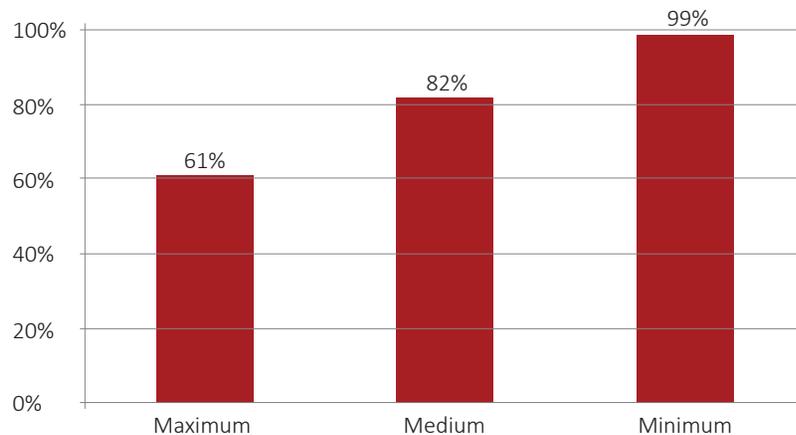
Reclass Scoring Item	Score	Males		Females	
		N	%	N	%
Total		826		86	
Severity of Current Offense					
Low	0	86	10%	11	13%
Moderate	1	416	50%	45	52%
High	4	39	5%	4	5%
Highest	6	285	35%	26	30%
Serious Offense History					
None or low	0	275	33%	33	38%
Moderate	1	421	51%	41	48%
High	4	22	3%	1	1%
Highest	6	108	13%	11	13%
Escape History					
None or low	0	807	98%	55	64%
Unauth. absence from CCF/program	2	4	0%	30	35%
Offense for escape	6	15	2%	1	1%
Number of Disciplinary Convictions					
None	0	658	80%	84	98%
One	2	165	20%	1	1%
Two	4	2	0%	1	1%
Three or more	6	1	0%	0	0%
Most Serious Disciplinary Conviction					
None	0	658	80%	55	64%
Low	1	0	0%	0	0%
Moderate	2	49	6%	10	12%
High	5	56	7%	14	16%
Highest	7	63	8%	7	8%
Prior Felony Conviction					
None	0	316	38%	36	42%
One	1	137	17%	15	17%
Two or more	2	373	45%	35	41%
Alcohol and/or Drug Abuse					
No problems	0	410	50%	39	45%
Social, economic, legal problems	1	339	41%	41	48%
Assaultive behavior	2	77	9%	6	7%

5. Classification Analysis

TABLE 5.11 SUMMARY OF ASSOCIATIONS BETWEEN RISK FACTORS AND SERIOUS MISCONDUCT

Initial Classification	Predictive?	Reclassification	Predictive?
Offense Severity	Yes	Offense Severity	Yes
Prior Offense Severity	No	Prior Offense Severity	No
Escape History	Yes	Escape History	Yes
Past Jail Behavior	Yes	Number of Disciplinarys	Yes
Prior Convictions	No	Severity of Disciplinarys	Yes
Substance Abuse	Yes	Substance Abuse	Yes
Stability Factors	Yes	Stability Factors	NA
Current Age	Yes	Current Age	Yes
Gender	Yes	Gender	Yes

FIGURE 5.2 PERCENT WITH NO MAJOR DISCIPLINARY- RECLASSIFICATION



The inmate's current age is one of the more consistent and stronger predictors of misconduct. Currently, age is only used for the initial classification instrument and is scored as a dichotomous variable (26 years and older = -1 pt. else zero points). As shown in Table 5.12, using four categories for age, and using it on both the initial and reclassification instruments, would make the overall classification system more predictive.

TABLE 5.12 RELATIONSHIP BETWEEN CURRENT AGE AND MISCONDUCT RATE

Current Age Category	% No DR
21 or younger	60%
22-27	66%
28-37	71%
38 above	80%

FINDING 5.4

There are a number of inmates who are scoring maximum custody on both the initial and reclassification instruments because they are receiving 7 points or higher on the first three scoring items. This is causing a higher number of inmates to be assigned to maximum custody whose disciplinary conduct is similar to medium and minimum custody inmates.

RECOMMENDATION

Alter the threshold for maximum custody inmates for the top section of the initial classification instrument to 8 points. Increasing the threshold to 8 points would require an inmate to score points on at least two top four scoring items rather than just scoring on a single item with 7 points.

FINDING 5.5

Age appears to be one of the more consistent and stronger predictors of misconduct.

RECOMMENDATION

Create a separate age factor that is more refined than the current dichotomous age score. Using four categories for age, and using it on both the initial and reclassification instruments would make the overall classification system more predictive.

Summary Classification Recommendations

In summary, the consultant proposes the following recommendations. These recommendations are based on the results of the validation study and are consistent with best practices in objective jail classification systems that have been implemented in other jurisdictions.

- Require Face to Face Interviews for both Initial and Reclassification Events.
- Develop a formal listing of all over-rides and separate them into the categories of mandatory and discretionary over-rides.
- Restore the ten year time limits on prior criminal conviction scoring factors.
- Alter the threshold for maximum custody inmates for the top section of the initial classification instrument to 8 points.
- Create a separate age factor that is more refined than the current dichotomous age score.

Simulations of Current and Adjusted Classification Criteria

The final section of this chapter presents the overall custody and special management populations based on the current classification criteria and the impact that the recommended changes to the classification instrument listed above could have on the current custody distribution of the inmate population.

Table 5.13 shows how the current jail population (as of May 2014) is classified taking into account special management populations. About 17% of the males and 15% of the females will require placement in a special housing unit/location.

TABLE 5.13 CLASSIFICATION DESIGNATIONS FOR MAY 2014 INMATE POPULATION BY GENDER

Grand Totals	Males		Females	
	Inmates	%	Inmates	%
Total	2,036	88%	290	13%
General Population				
Minimum	663	33%	120	41%
Medium	545	27%	70	24%
Maximum	481	24%	56	19%
General Population Totals	1,689	83%	247	85%
Special Populations				
Unclassified	61	3%	9	3%
Mental Health	200	10%	29	10%
Medical/Infirmary	30	1%	2	1%
Discip/Ad Segregation	61	3%	3	1%
Total Special Populations	352	17%	43	15%
<i>Note: Numbers do not always total due to rounding</i>				

If the recommendations listed above were adopted, there would be no changes in the number of inmates in the special management categories, but there would be a change in the proportion of inmates in the three key custody levels. In particular, the number of maximum custody inmates would decline.

5. Classification Analysis

Simulation 1: Restore the ten year time limits on prior criminal conviction scoring factors.

The first simulation (Table 5.14) shows what the effects of reinstating the 10-year time limits for prior felony convictions would be. This reform alone produces a modest but significant reduction in the number and percentage of maximum custody inmates and associated increases in the numbers and percentages of medium and minimum custody.

TABLE 5.14 ESTIMATED EFFECTS OF REINSTATING 10 YEAR TIME LIMITS FOR PRIOR FELONY CONVICTIONS

General Population	Males		Females	
	Current	Revised	Current	Revised
Minimum	33%	37%	41%	45%
Medium	27%	26%	24%	26%
Maximum	24%	20%	19%	14%
General Population Totals	83%	83%	85%	85%

Note: Numbers do not always total due to rounding

Simulation 2: Alter the threshold for maximum custody inmates for the top section of the initial classification instrument to 8 points.

The recommendation that the threshold for maximum custody on the initial classification instrument be changed from 7 points to 8 points would also serve to reduce the number of maximum custody inmates. This recommendation would slightly lower the male maximum custody population from 24% to 19% and increase the medium custody population by the same amount (Table 5.15). The female maximum custody population would also decline from 19% to 14% and the medium custody population would increase by the same amount. It is assumed that there would be no change in the minimum custody population due to scoring and/or over-ride decisions.

TABLE 5.15 ESTIMATED EFFECTS OF INCREASING THE THRESHOLD FOR MAXIMUM CUSTODY FROM 7 TO 8 POINTS

General Population	Males		Females	
	Current	Revised	Current	Revised
Minimum	33%	33%	41%	41%
Medium	27%	32%	24%	29%
Maximum	24%	19%	19%	14%
General Population Totals	83%	83%	85%	85%

Note: Numbers do not always total due to rounding

Although the consultant is also recommending a modified age factor, at this time it was not possible to estimate the effect that the implementation of this recommendation would have on the overall classification levels. This change is designed to improve the level of prediction and not necessarily alter the custody levels.

Simulation 3: Recommendations 1 and 2 combined

Attempting to combine the collective effects of the two primary recommendations is difficult due to the uncertain effects of mandatory and discretionary over-rides. Nonetheless, one can assume that the collective effects would serve to modify the current general population custody levels by the levels shown in Table 5.16. These figures assume a 75% compliance effect with the computer-generated simulations.

TABLE 5.16 COMBINED EFFECTS OF MODIFYING THE TIME LIMITS AND MAXIMUM CUSTODY THRESHOLDS

General Population	Males		Females	
	Current	Revised	Current	Revised
Minimum	33%	37%	41%	45%
Medium	27%	30%	24%	29%
Maximum	24%	16%	19%	11%
General Population Totals	83%	83%	85%	85%

Note: Numbers do not always total due to rounding

The recommended changes to the classification instrument and the simulated effects of implementing them were presented to County staff in a Webex meeting held on October 21, 2014. Representatives from TCSO were in agreement with the recommended changes and indicated a desire to accept the recommendation to modify both the time limits and the points for the maximum custody threshold. However, it was noted that any changes to the instrument would have to be sanctioned by the Texas Commission on Jail Standards (TCJS).

On January 30, 2015 a meeting was held with the TCJS in Austin, Texas. Also in attendance were representatives from TCSO. The purpose of the meeting was to present the findings of the validation study of the inmate classification system and to make a formal recommendation that the time limits for prior criminal record scoring factors be reinstated. Based on the data presented, TCJS instructed the Sheriff’s Office to submit a formal request and that upon receipt TCJS will grant the Sheriff’s request. On February 9, 2015 TCSO received a letter from the Texas Commission on Jail Standards approving the change to the instrument and authorizing TCSO to begin utilizing the new system immediately. A copy of the letter appears in Appendix E1.

TCSO has reported an increase in the number of maximum security inmates since the Commission required them in March 2014 to count the full criminal history on the severity of prior convictions score. This, coupled with a recent TCSO policy to provide double escort for maximum security inmates, may have contributed to the parallel increase in custody staff overtime. Reinstating the time limits for prior criminal record scoring factors will reduce the number of maximum custody inmates, which will reduce escort requirements and may help to stabilize some of the associated overtime costs.

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6. Inmate Population Projections

6. Inmate Population Projections

The Master Planning process included an analysis of the inmate population as well as the development of detailed baseline booking projections and inmate population forecast volumes through 2035.

This chapter provides a descriptive overview of the current TCSO forecast model, describes the Wizard simulation model employed by the consultants, and provides 20-year inmate population projections and forecast of bed needs for the Travis County correctional system.

Approach and Methodology

For the analysis of the inmate population and forecast of bedspace needs, the services of the JFA Institute (JFA) were engaged by the CGL team. In producing the forecast, JFA reviewed current jail population trends (admissions, releases and the daily population) and analyzed computer extract files provided by Travis County. This chapter contains a general overview of the trends that were used to produce the Travis County Correctional system projections through the year 2035 and an explanation of the primary assumptions on which the projections are based. More detailed tables of the data analyzed are included in *Appendix D1 Existing Programs*.

It should be noted that for the purposes of this report, the term “jail” refers to both the Travis County Jail (TCJ) and the Travis County Correctional Complex (TCCC).

Background

The cost of any county’s criminal justice system is driven in large part by its jail population. Although the nation’s jail population is about one half the size of the prison population (744,500 jail inmates versus 1,483,900 million prisoners¹) jail bedspace requirements and the related operational costs continue to strain many jurisdictions’ fiscal resources and budgets. Decision-makers need sound research, comprehensive analysis and reliable forecasting techniques available in order to make educated policy decisions about their local correctional system. Just answering the question of, “What will the future jail population be?” is not enough. Decision-

makers need to also answer the questions of, “What are the reasons behind the jail population trends, what kinds of beds are needed, how will future changes affect the system, and how can the forecasted population be influenced?”

One area of particular importance in forecasting the jail population is the impact of recently enacted sentencing laws, judicial decisions and other criminal justice policy choices. These factors vary from jurisdiction to jurisdiction and are usually very complex in nature. A complete understanding of these complex influences and assumptions regarding potential impact on the jail population is essential to any planning and forecasting effort.

In the most basic of terms, the jail population is the product how many individuals are received (admissions), and how long they are incarcerated (length of stay). Minor changes in either or both of these two factors can have an impact on the daily or “stock” population. For example, there were approximately 53,768 bookings into the Travis County jail system in 2013. With an average length of stay (ALOS) of approximately 15.5 days, the daily population is approximately 2,300. If the number of admissions remained constant, but the ALOS was reduced by an average of 3 days, the average daily population (ADP) would drop by over 400.

Conversely, if the ALOS was increased by three days, the jail population would increase by the same amount. These two examples illustrate just how sensitive jail systems are to court processing and local sentencing practices. Of course, if the number of admissions increased or decreased with no change in LOS, the population would also increase or decrease, respectively. As such, a careful and comprehensive examination of the interplay between the various factors that affect population is crucial to understanding correctional population dynamics and to be able to reasonably project future jail populations.

The Wizard Simulation Model

The Wizard projection software was utilized in this project for Travis County. The Wizard model is a stochastic entity simulation model as it mimics the flow of persons through the county’s system. In order to build a simulation to mimic the county’s pretrial, court and sentencing structure and the flow of inmates to and from the jail, a wide array of data that have both a direct and indirect impact on inmate population growth is analyzed. These data can be separated into two major categories – external and internal.

1. Lauren E. Glaze and Erinn J. Herberman, Ph.D., “Correctional Populations in the United States, 2012”, Bureau of Justice Statistics, December 2013

6. Inmate Population Projections

External factors reflect the interplay of demographic, socio-economic and crime trends that produce arrests, and offenders’ initial entry into the criminal justice system. Criminologists have long noted that certain segments of the population have higher rates or chances of becoming involved in crime, being arrested and being incarcerated. This is known as the “at-risk” population, which generally consists of younger males. The high crime rate ages are 15 through 25, while the high adult incarceration rate is between the ages of 18 and 44. When the at-risk population is expected to increase in a jurisdiction, one can also expect some additional pressure on criminal justice resources, all things being equal.

Internal factors reflect the various decision points within the criminal justice system that cumulatively determine jail admissions and length of stay. These decisions begin with police and end with correctional officials who, within the context of the court disposition process (for pretrial offenders) and court-imposed sentences, have the authority to release, recommit, give and restore a wide array of release paths, and offer programs that may reduce length of stay and/or recidivism.

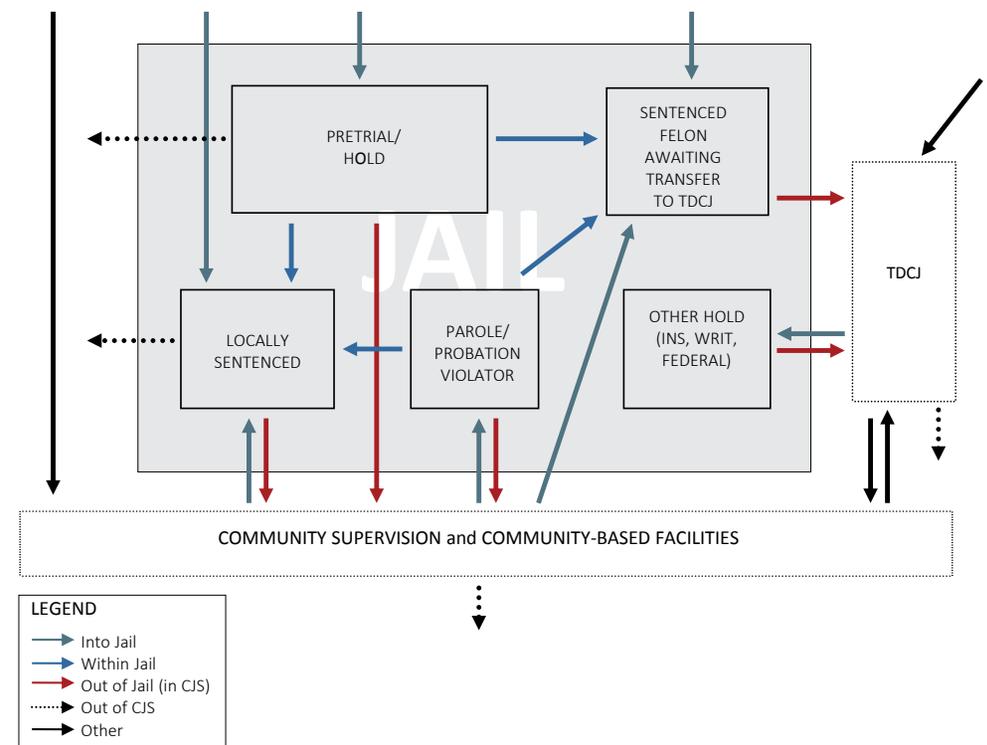
The Wizard model designed and utilized for Travis County took into account a number of factors and offender descriptors including: gender, most serious booking charge, legal status, bail status and special needs of the offender. There are two offender “traits” that drive the average jail stay (and thus bedspace usage) in Travis County in a higher proportion. First is most serious booking charge. This is the primary driver of jail length of stay. On average, a serious violent charge will require much longer machinations within the court system and is less likely to lead to a speedy bail release than a non-violent offense such as drunk in public. In the simulation model, the most serious charge is ranked above all other charges and the offender is placed in that charge category.

The second important driver is the type of release/legal status at release. The legal status at release often dictates the type of release per offender. The simulation model places offenders into four legal statuses at release groups: sentenced, pre-trial, hold and Immigration and Customs Enforcement’s (ICE) detainees. Each category has an average length of stay associated with it. Combining legal status at release with the type of release methods associated with those legal statuses provides a very detailed breakdown of LOS within the jail. Coupling those results with most serious charge gives a framework in which to build the simulation model to accurately show movement of groups through similar criminal justice processes.

Corrections data discussed in this report are presented along two main divisions: (1) aggregate inmate counts as reported by Travis County Justice & Public Safety and used for historical trends, and (2) statistical analysis of a detailed individual level 2013 release extract file and a one-day jail snapshot extract data file.

Although the data for both analysis divisions are essentially generated from the same source, the reader will see a much more in-depth presentation of the one year extract file because it represents the baseline for all future populations. It is also important to note the analysis provided on the 2013 extract files is not a sample and represents all offenders processed and released in Travis County in 2013.

FIGURE 6.1 DEMOGRAPHICS, CRIME RATES, ARRESTS, CONVICTIONS



6. Inmate Population Projections

Analysis and Findings

External Trends

The following section describes the external trends relative to the Travis County jail population. All data were provided at an aggregate level by the Travis County Justice & Public Safety Planning Division.

County Population

Table 6.1 provides resident population estimates for Travis County from 2005 through 2013 and projections from 2015 to 2035. Estimate data is provided by the US Census Bureau. Projections for Travis County total are provided by the Austin City Demographer and the at-risk projections are extrapolated from the Texas State Demographer's 1.0 percent growth scenario for Males ages 15-34.

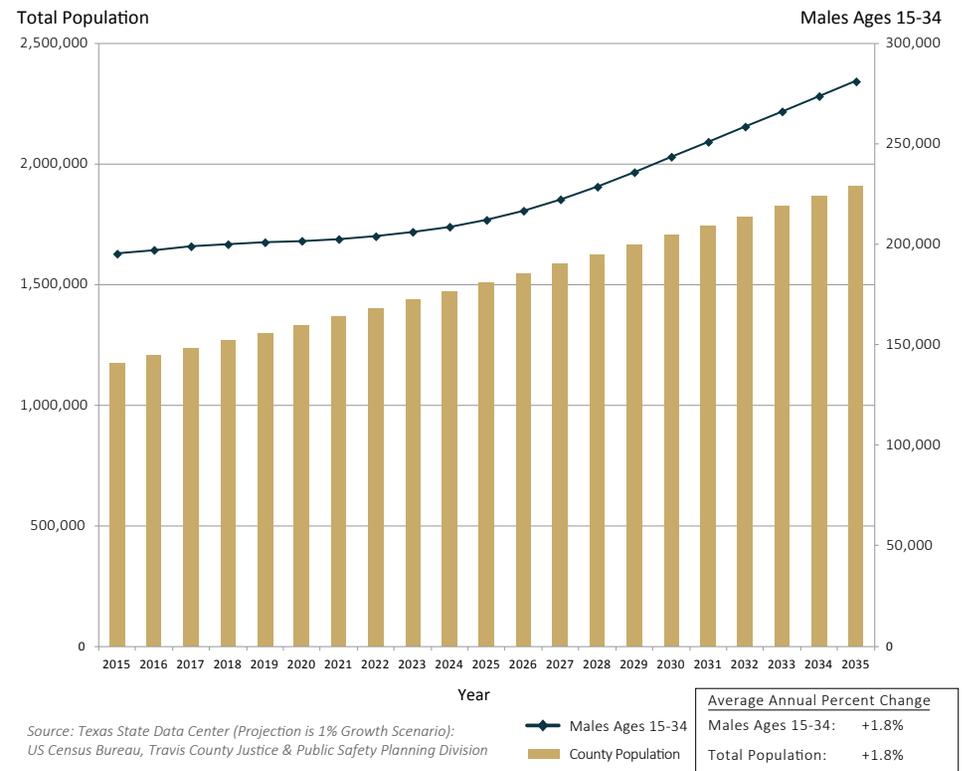
TABLE 6.1 TRAVIS COUNTY ACTUAL & PROJECTED COUNTY POPULATION 2005-2035

Year	At-Risk Population (Males 15-34)	Total County Population
2005	169,493	895,432
2010	184,034	1,069,198
2011	190,663	1,079,093
2012	186,792	1,113,744
2013	192,948	1,120,954
2014	n/a	n/a
2015	195,362	1,173,051
2020	201,754	1,333,681
2025	212,159	1,508,938
2030	243,622	1,707,225
2035	281,117	1,908,127
Actual Average % Change 2005-2013	1.6%	2.9%
Projected Average % Change 2015-2035	1.8%	2.5%

Source: Austin City Demographer; Texas State Data Center; US Census Bureau; 2014 Travis County population estimates are not available from the US Census Bureau as of this reports submission date.

As shown in Table 6.1, Travis County's population grew by 25.2 percent between 2005 and 2013 while the at-risk population grew by 13.8 percent. Larger growth in the overall population versus the at-risk population is an indicator that population growth has been driven by increases in the populations of persons over 35 and under 15. Both of these groups have, historically, low crime profiles. This indicates that the population growth in Travis County will not increase reported crime and thus will not have a significant impact on future jail bedspace. It is important to note this distinction, because there is generally a public assumption that as county population grows, there will be a corresponding increase in crime and jail bedspace demand.

FIGURE 6.2 TRAVIS COUNTY PROJECTED POPULATION 2015-2035 (1% GROWTH SCENARIO)



6. Inmate Population Projections

Figure 6.2 details projections for Travis County’s resident populations by single year through 2035. As seen in Figure 6.2, Travis County’s at-risk population is projected to increase at a slower pace than the general population, 1.8 percent per year through 2035.

Crime and Arrests

Crime data as discussed in this section refer to serious crimes reported by law enforcement agencies. The crimes tracked consist of eight crimes that are separated into crimes of violence (murder, rape, robbery, and assault) and property crimes (burglary, theft, motor vehicle theft and arson). Universally known as index crimes, these events are reported nationally and generally categorized to provide a common definition for crime comparison. Arrest data are delineated by the same offense groups.

Although, historically, there has been no strong or consistent association between crime rates and jail admissions, observing these data can provide some anecdotal evidence that allows some insight into county jail admission trends. Part of the reason for this is that the list of offenses tracked does not account for two of the major crime categories for which people are admitted to jail – drug and alcohol related crimes.

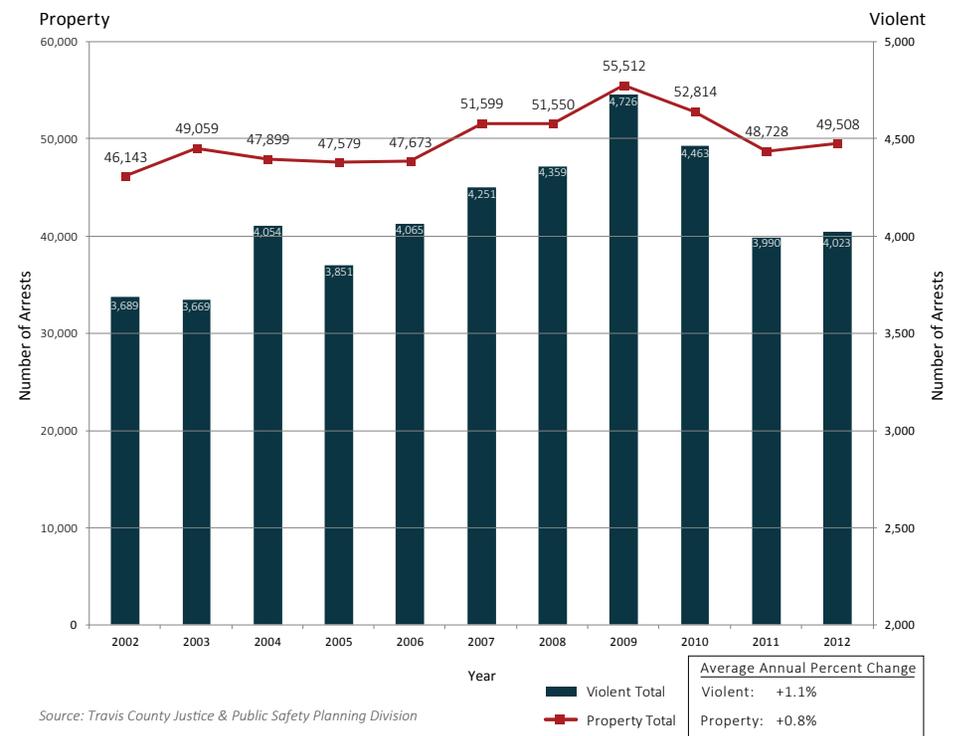
The crime data in Figure 6.3 and arrest data in Figure 6.4 both reflect reporting from all of the county’s law enforcement entities.

With the exception of a spike in 2009, reported property and violent crimes in Travis County have both experienced static growth since 2002. (Figure 6.2.) Violent crime has increased an average of 1.1 percent per year while property crime has seen an average growth of only 0.8 percent. These trends are similar to nationally observed jail trends.

There is a much stronger relationship between arrests and the number of persons admitted to a jail system since a high proportion of arrests result in a jail booking. Figure 6.3 details historical arrests in Travis County since 2004. Property arrests trends have been flat (none to low average annual growth) while violent offense arrests have decreased 9.8% during the study period, from 1,282 in year 2004, to 1,156 in year 2012 (declining an average of -0.9% annually).

As will be shown later in this report, this static growth in arrests mirrors the static growth in jail bookings in Travis County.

FIGURE 6.3: TRAVIS COUNTY HISTORICAL REPORTED OFFENSES 2002-2012



6. Inmate Population Projections

FIGURE 6.4: TRAVIS COUNTY HISTORICAL ARRESTS 2004-2012

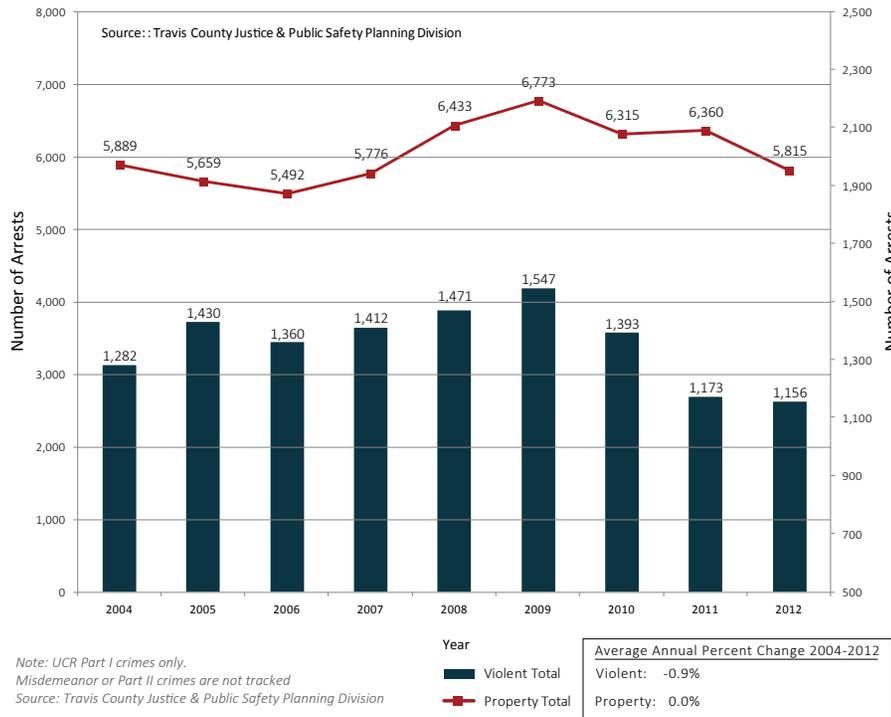
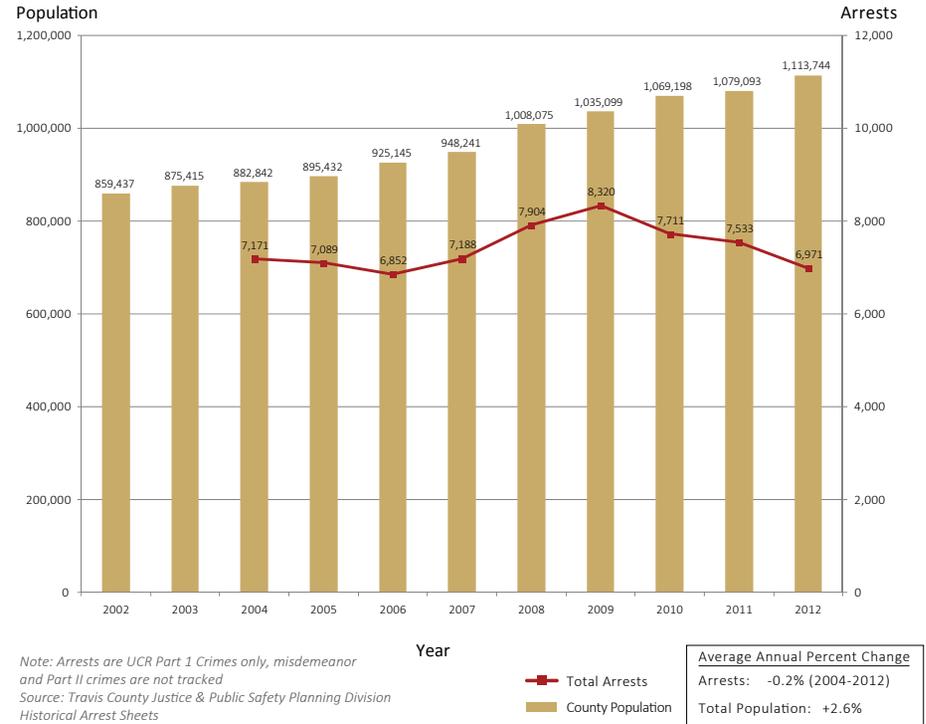


FIGURE 6.5: TRAVIS COUNTY HISTORICAL ARRESTS VERSUS POPULATION 2002-2012



Putting Population and Crime Together

Figure 6.5 graphically compares historical arrests and resident population for Travis County. There has been static growth in reported crime while the resident population has increased. The decline in arrests over the past several years has occurred even as Travis County's resident population has continued to increase; on average, between 2004 and 2012, total arrests have decreased by 0.2 percent. Consequently, one would not expect to see a remarkable increase in reported crime or arrests – or related jail demand, into the future.

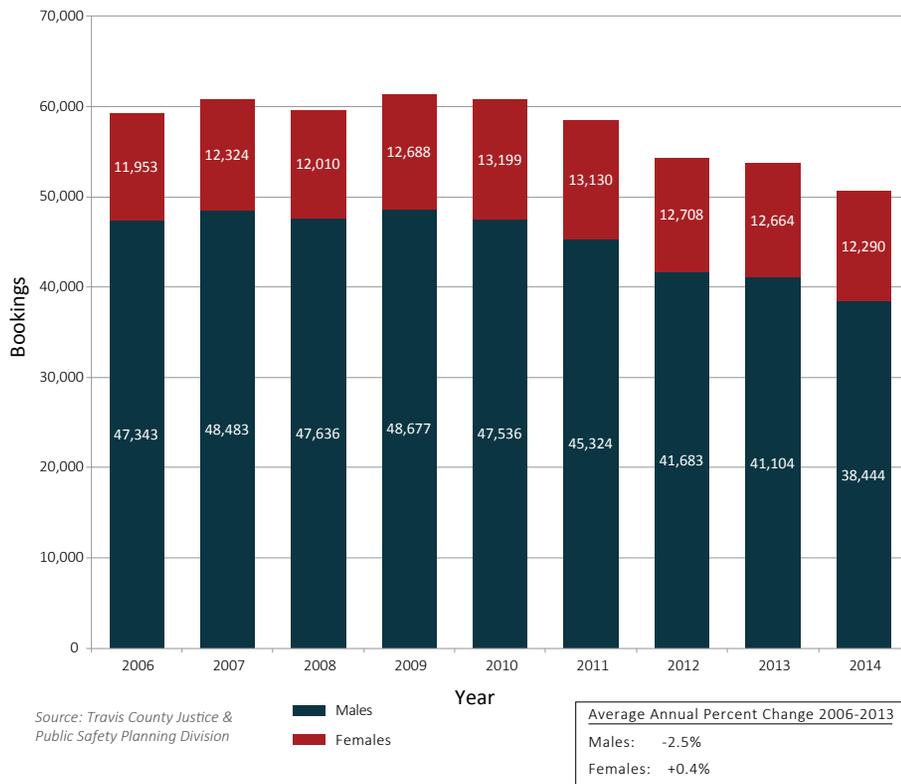
Internal Trends

Historical Jail Population

Analysis of historical jail trends such as number of bookings, length of stay and average daily population, assist in providing valuable background information used for projecting future trends.

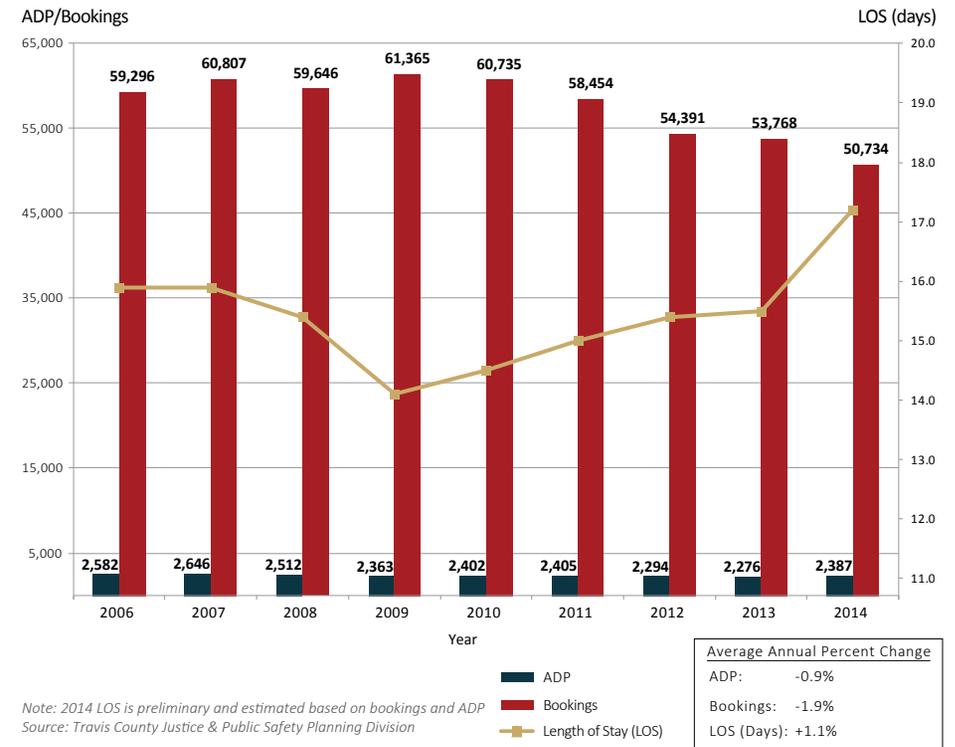
Figure 6.6 presents bookings by gender each year to the Travis County jail from 2006 through 2014. Bookings of females have been static since 2006, growing only 0.4 percent per year. Male bookings have seen a decline of 2.5 percent per year.

FIGURE 6.6: JAIL BOOKINGS BY GENDER 2006-2014



As seen in Figure 6.7, there were 50,734 bookings to the Travis County jail in 2014, down from 53,768 total bookings in 2013 (a decrease of 5.6 percent), and down from 59,296 in 2006, a decrease of 14.4 percent for the four year period. The average daily population (ADP) of the jail also decreased for the same period, falling by an average of 0.9 percent per year since 2006. The average length of stay for jail inmates has remained static since 2006, averaging approximately 15 days. The static average length of stay combined with the decline in bookings is directly responsible for the drop in the ADP.

FIGURE 6.7: JAIL BOOKINGS/ADP/LENGTH OF STAY (LOS) 2006-2014



6. Inmate Population Projections

Table 6.2 shows the peaking factor associated with the Travis County jail population since 2009. For the purposes of this report, peaking factor is defined as the maximum variance in the county population compared to the mean daily count. The peaking factor is a rough estimate of maximum bedspace needs based on the actual ADP. Within the simulation model, the average peaking factor for 2009-2014 is projected to continue across the twenty year forecast horizon.

The average peaking factor for 2012 – 2014 was 14.5 percent for females and 4.0 percent for males. The peaking factor for females is higher because smaller populations can produce a higher percentage variance.

TABLE 6.2 JAIL ADP BY GENDER WITH PEAKING FACTOR 2009-2014

FY	Total Average Monthly Population	Total Peaking Factor	Female Average Monthly Population	Female Peaking Factor	Male Average Monthly Population	Male Peaking Factor
2009	2,363	10.3%	270	14.1%	2,093	8.7%
2010	2,402	4.7%	253	11.9%	2,149	4.2%
2011	2,405	6.6%	286	n/a	2,119	n/a
2012	2,294	5.4%	262	16.4%	2,032	0.9%
2013	2,276	7.3%	279	13.6%	1,997	5.7%
2014*	2,387	6.1%	310	12.9%	2,077	6.0%
2015**	2,391	1.9%	332	6.6%	2,059	2.1%
Average (2009-2014)		6.8%		13.8%		5.1%
Average % Change (2009-2014)	0.3%	-	3.2%		-0.1%	
Average % Change (2009-2015)	0.2%	-	3.8%		-0.2%	

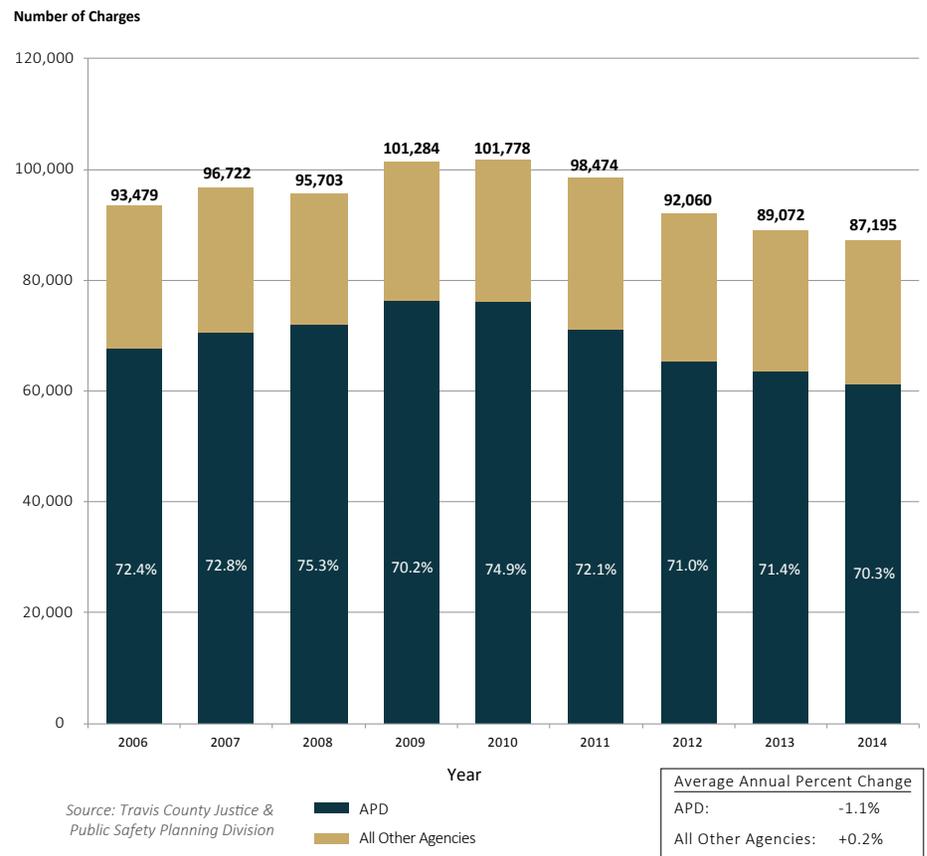
*Note: Updated using one day counts for 9/2014 and monthly averages for all other months; missing gender data for 1/2014, 2/2014, 5/2014, 6/2014, 9/2014

** For 10/2014- 1/2015 only; averages calculated using one day counts

Source: Travis County Justice & Public Safety Planning Division

Figure 6.8 details the historical charge counts against bookings in the Travis County jail. Number of charges is an ancillary trend that helps link arrests with crimes committed. The Austin Police Department (APD) is, historically, the driver of the number of charges in the County. The APD averages over 70 percent of charges annually. Since 2006, the number of charges from the APD has declined by 1.1 percent per year. This trend is in line with historical decreases in bookings and arrests.

FIGURE 6.8: HISTORICAL CHARGES FILED 2006-2014



6. Inmate Population Projections

Releases and Length of Stay

The following section describes the internal trends of the Travis County jail population and provides more detailed analysis of the FY 2013 jail releases extract and end of FY confined file. Data for this section was in two extract datasets; all FY 2013 jail releases and all confined offenders on the day the extract was taken. It should be noted for this analysis; FY refers to the Travis County jail fiscal year which runs from October 1 – September 30 of any given year.

Presented first is the analysis of all releases from the Travis County jail system in FY 2013. Analysis is limited to the key findings and those that impacted the Wizard simulation model construction and the jail population forecast produced. As noted earlier, more complete and detailed tables follow in *Appendix F* of this report.

Analysis of FY 2013 Releases

As shown in Table 6.3, 76% of jail releases in FY 2013 were males with an average length of stay (ALOS) of 18.6 days. Persons of ages 35 and younger comprised 66 percent of releases and had an average LOS of 15.3 days. Combining these it can be determined that the majority of releases from the Travis County Jail are male and under age 35. By analyzing general demographics for a cohort, researchers can establish if a jail system has any outlier population characteristics compared to national trends. Travis has very similar characteristics to most jail populations across the country.

Similar to gender and age highlighted above, no other demographics were unusual in the release cohort for October 2012 – September 2013.

TABLE 6.3 RELEASE DEMOGRAPHICS OCT. 2012-SEPT. 2013

Characteristic	N	%	Avg. LOS (days)
Base	55,224		16.4
Gender			
Female	13,060	24%	9.5
Male	42,164	76%	18.6
Race			
Asian	527	1%	5.3
Black	12,807	23%	20.7
Hispanic	18,306	33%	16.5
American Indian	11	0%	23.9
Unknown	26	0%	17.4
White	23,547	43%	14.3
Age at Release			
25 and younger	18,045	33%	13.3
26-35	18,288	33%	17.3
36-50	13,529	24%	18.5
51 and older	5,362	10%	18.9
<i>Source: Data extract files generated by Travis County Sheriff Dept. and Justice & Public Safety Planning Division</i>			

Turning from general descriptive characteristics to length of stay of offenders, Table 6.4 details the method of release for the FY 2013 Travis County jail release cohort and the legal status of offenders at release. As discussed previously, the Wizard simulation model mimics the flow of offenders through the jail system and relies heavily on method of release and length of stay to release for different groups of offenders.

A key driver of bedspace usage in jail systems is the proportion of offenders that are released pre-trial versus offenders that remain in jail until sentencing. In FY 2013, 67 percent of offenders in Travis County were released from the jail after an average of 4.4 days. Conversely, sentenced offenders accounted for 26 percent of releases, having a much longer average LOS of 45.0 days.

6. Inmate Population Projections

TABLE 6.4 RELEASES BY RELEASE REASON AND LEGAL STATUS OCT. 2012-SEPT. 2013

Characteristic	Number	%	Avg. LOS (days)
Base	55,224		16.4
Release Reason			
Bond-Personal Recognizance/Released to appear	25,508	46%	2.2
Other bond	5,768	10%	3.3
Transfer to TDCJ	1,813	5%	120.0
Transfer to State Jail	725	1%	70.8
Sentence complete	9,205	17%	28.8
Court action	5,706	10%	23.1
Manual labor credit	2,082	4%	31.8
Pay fine	1,983	4%	9.1
Received probation	379	1%	65.0
Transfer to ICE	713	1%	11.2
Released to other agency	1,073	2%	16.3
Other	63	0%	21.0
Unknown	46	0%	20.1
Legal Status at Release			
Pre-trial	37,008	67%	4.4
Sentenced	14,305	26%	45.0
Hold	1,658	3%	5.9
ICE	2,253	4%	41.5
<i>Source: Data extract files generated by Travis County Sheriff Office and Justice & Public Safety Planning</i>			
<i>Note: a release reason of "Transfer to ICE" indicates a person is transferred to the federal agency's custody while legal status at release of "ICE" does not necessarily indicate transfer of custody.</i>			

Persons with the longest lengths of stay were those released to the Texas Department of Criminal Justice. As state prison offenders are typically detained on serious felony charges and are detained until transfer, this is not unexpected. This release cohort had an average LOS of 120.0 days and comprised 5 percent of total releases in FY 2013.

The majority of releases exited via bond-personal recognizance; this group comprised 46 percent of releases and averaged a length of stay of 2.2 days.

Table 6.5 displays the release profile in terms of legal status and most serious charge. The majority of releases from the Travis County jail in FY 2013 were pre-trial DWI cases with an average LOS of 1.6 days. Other large groups of pre-trial releases included drug possession with an average LOS of 2.9 days and traffic offenses/violations with an ALOS of less than 1 day.

Sentenced offenders released were primarily DWI cases as well. This group comprised 18 percent of sentenced releases with an average LOS of 39.2 days. Probation violators also made up a large portion of sentenced releases (12 percent) and had an average LOS of 30.2 days. ICE holds accounted for 2,253 releases (4%) from the Travis County jail in FY 2013 and had an average LOS of 41.5 days.

6. Inmate Population Projections

TABLE 6.5 RELEASES BY LEGAL STATUS & MOST SERIOUS OFFENSE OCT. 2012-SEPT. 2013

Legal Status at Release & Most Serious Offense	N	%	Avg. LOS (days)
Pre-trial	37,008	100%	4.4
DWI	6,639	18%	1.6
Traffic	5,329	14%	0.6
Drug possession	5,175	14%	2.9
Assault	4,166	11%	13.0
Public Intoxication	4,016	11%	0.4
All other	11,683	32%	6.6
Sentenced	13,935	100%	45.0
DWI	2,474	18%	39.2
Probation violation	1,662	12%	30.2
Drug possession	1,541	11%	35.7
Assault	1,245	9%	83.8
Theft/fraud/forgery	1,095	8%	37.3
All other	5,918	42%	47.7
Hold	1,658	100%	5.9
ICE	2,253	100%	41.5
<i>Source: Data extract files generated by Travis County Sheriff Dept. and Justice & Public Safety Planning Division</i>			

As the majority of County bookings and charges originate from the Austin Police Department (APD), Table 6.6 briefly examines the APD FY 2013 release population. APD releases had an average length of stay of 15.2 days, slightly less than the County as a whole. As the driver of the county jail population (comprising 70 percent of releases in FY 2013), it is not surprising that the APD releases mimicked the County as a whole with respect to release reason and most serious booking charge.

6. Inmate Population Projections

TABLE 6.6 RELEASES – AUSTIN POLICE DEPARTMENT BOOKINGS ONLY OCT. 2012-SEPT. 2013

Characteristic	N	%	Avg. LOS (days)
Base	38,411		15.2
Booking Reason			
Probation revoked	343	1%	53.9
Bond forfeit/increase	1,524	4%	27.7
Class C warrant	3,836	10%	1.0
Commitment/sentenced	602	2%	37.2
Community court	3,677	10%	0.4
ICE	1,609	4%	39.9
Hold-Parole	682	2%	44.3
Hold-Other	903	2%	6.7
New arrest/warrant	25,176	66%	15.4
Other	59	0%	124.6
Most Serious Charge			
DWI	5,575	15%	7.3
Drug Possession	4,709	12%	11.2
Traffic	4,612	12%	2.2
Assault	3,980	10%	33.5
Public Intoxication	3,756	10%	1.1
All other	15,779	41%	22.2

Characteristic	N	%	Avg. LOS (days)
Base	38,411		15.2
Release Reason			
Bond-ROR	19,324	50%	3.5
Other bond	3,337	9%	2.2
Transfer to TDCJ	1,119	3%	135.7
Transfer to State Jail	484	1%	81.0
Sentence complete	5,905	15%	27.7
Court action	3,989	10%	18.7
Manual labor credit	1,335	3%	33.8
Pay fine	1,325	3%	0.6
Received probation	244	1%	78.5
Transfer to ICE	547	1%	10.9
Rel. to other agency	641	2%	13.7
Other	40	0%	23.6
Unknown	26	0%	19.4

Source: Data extract files generated by Travis County Sheriff Dept. and Justice & Public Safety Planning Division

Analysis of Current Jail Population

The TCSO and Office of Justice & Public Safety generated a snapshot of the County jail population for May 29, 2014. While the release cohort provides the Wizard simulation model with a baseline of how a population will change over time, a point-in-time description of the recent jail population sets the starting line for the number of all groups to be forecasted. Further, as with analysis of release cohort demographics and criminal characteristics, looking at the general characteristics of the current jail population allows identification of any trends that could be seen as extraordinary. The snapshot also illustrates that the overall profile of inmates staying in the jail (daily population census) can be very different from those entering the jail (admission profile).

The “typical” Travis County Jail inmate, based on the snapshot analysis, can be described as:

- A pre-trial male,
- aged 35 or younger,
- booked on a new arrest or warrant,
- just as likely to be of either Caucasian, Black, or Hispanic ethnicity.

Further, the following statistics are presented as an establishment of who is in the jail on any given day:

- The jail population was 87 percent male and 13 percent female.
- 62 percent of the jail population was age 35 and younger.
- 67 percent of the jail population was booked for a new arrest/warrant; another 11 percent were booked for bond forfeit/increase.
- 78 percent of the jail population was pre-trial status.
- Only a small number of jail beds were occupied by ICE holds (3 percent).

6. Inmate Population Projections

FIGURE 6.9 JAIL POPULATION 5/29/2014 BY GENDER

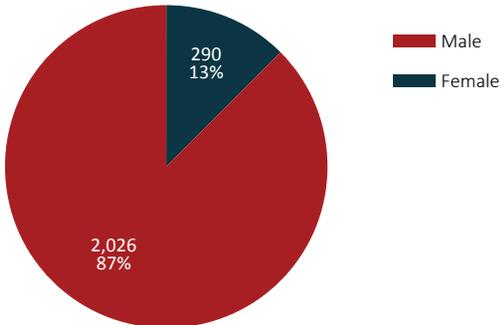


FIGURE 6.10 JAIL POPULATION 5/29/2014 BY RACE

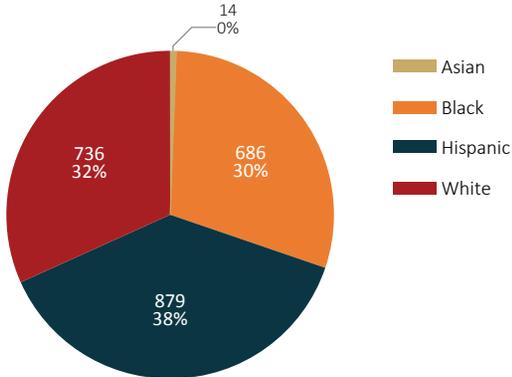


FIGURE 6.11 JAIL POPULATION 5/29/2014 BY AGE

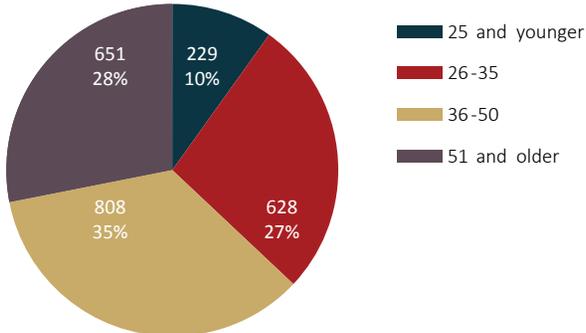


FIGURE 6.12 JAIL POPULATION 5/29/2014 BY BOOKING REASON

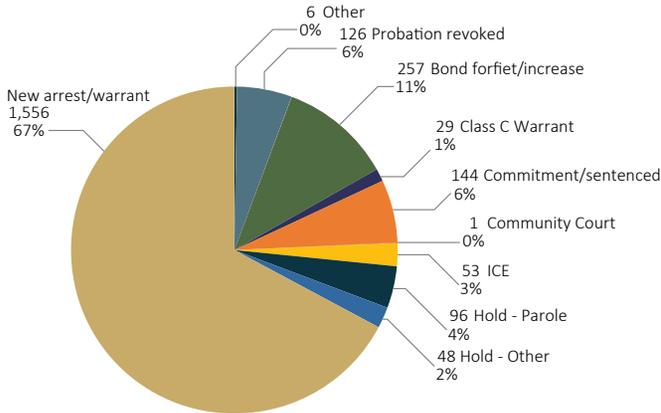
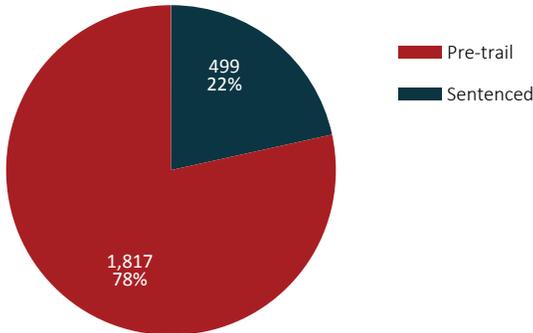


FIGURE 6.13 JAIL POPULATION 5/29/2014 BY LEGAL STATUS



6. Inmate Population Projections

Review of Current TCSO Forecast Model

Prior to generating inmate population projections the consultants were tasked with reviewing the Travis County Sheriff’s Office’s forecast model currently used for generating jail bookings and bedspace projections, and to make recommendations on methodology for future forecasting efforts.

The Travis County Sheriff’s Office utilized a cycle model to determine its most recent jail population projections, issued March 2010. A forecast was not produced in 2011 or 2012. Three projections models were produced and projection model “C” was selected.

The cycle model can be best described as a monthly ADP model that utilizes three distinct growth patterns, or trend lines, in Travis County jail population history; FY1998-FY1994, FY1995-FY2005 and FY2003-FY2010. Each of these cycles was determined based on the average ADP growth observed in each time frame. It was observed that the growth patterns in these three periods were distinct and independent from each other. Within each cycle, researchers attempted to correlate growth patterns to both the official Texas State Data Center Demographic Projections as well as County jail population management initiatives such as the Jail Reduction Docket, Rocket Docket, Missile Docket and Federal immigration initiatives. Three projection models were derived, each a different combination of the cycle’s relation to the historical observed population counts and its projection of the jail population. The Cycle Model was expected to have a projected accuracy of +/-5% of future observations.

In summary, Travis County’s Cycle Model is made up of the following components:

1. Compilation of 15 years of monthly jail ADP
2. Usage of Texas Data Center Demographic Projections
3. Establishment of statistical correlations and significance between demographic projections and jail ADP
4. Analysis and back casting fit of 3 projection models produced by relating 3 cycle models to each other and the jail ADP.

Annual projections were generated for years 2011 and beyond and as a result, annual projected ADP by the selected model could be compared with actual observed jail ADP. Table 6.7 below presents the accuracy results of this model for the past 4 years.

As can be seen in the Table 6.7 and Figure 6.14, the previous projection assumed a flattening of the adult jail population for the first two years and then a marked increase in the third forecast year. While the projected flat period initially provided accurate projections, the increases the model forecasted in year 3 did not occur. As a result, the overall 4 year accuracy of this forecast is outside the acceptable range and the accuracy in the most recent two year period is particularly poor –approximately +/- 14%. Total average annual error rate was 6.4% for the 4 year tracking period. The average monthly error was 5.9 percent over the tracking period. National standards set acceptable error at +/- 5 percent.

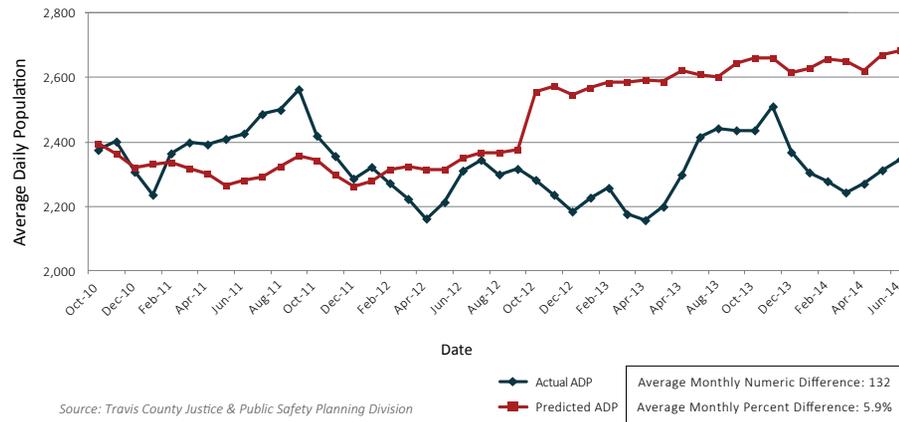
TABLE 6.7 ADP ANNUAL TRACKING OF TRAVIS COUNTY JAIL FORECAST APPROVED MODEL

FY	Actual ADP	Projected ADP	# Difference	% Difference
2011	2,405	2,324	-81	-3.4%
2012	2,294	2,325	31	1.4%
2013	2,276	2,589	313	13.8%
2014*	2,387	2,668	281	11.8%
Average			136	5.9%

**Note: partial year data used to generate actual ADP*

6. Inmate Population Projections

FIGURE 6.14: “MARCH 2010” JAIL FORECAST ACCURACY



Given the poor accuracy and lack of complex analysis of the underlying jail populations, the cycle model is not recommended for future forecasts.

FINDING 6.1

The model currently used by TCSO does not provide an accurate forecast of future jail bedspace requirements. An examination of the County’s projection model revealed poor accuracy levels outside acceptable ranges and a lack of complex analysis of the underlying jail populations.

RECOMMENDATION

Replace the current projection model with a more robust and sophisticated simulation model to complete jail population projections. The County will be receiving the consultant’s forecast model and will be trained for its use and implementation.

Simulation Model Jail Population Projections

Using the Wizard simulation model customized for Travis County using the data described above, the following section details the additional assumptions and results of this simulation model. Figure 6.15 below provides the total jail population projections (ADP) produced along with a high and low range utilizing the +/- peaking factor by gender as described in the preceding section.

Two additional assumptions were made to arrive at the baseline Travis County Jail forecast:

1. A flat admissions assumption of just under 54,000 bookings per year is assumed each year of the simulation model. Given past trends and no established significant correlation between the total county or at-risk demographic population, bookings to the jail are assumed to remain constant over the forecast horizon.
2. The make-up of bookings and average length of stay of jail offenders is also assumed to remain constant over the forecast horizon.

FIGURE 6.15 TRAVIS COUNTY JAIL PROJECTIONS FY 2015 – 2035

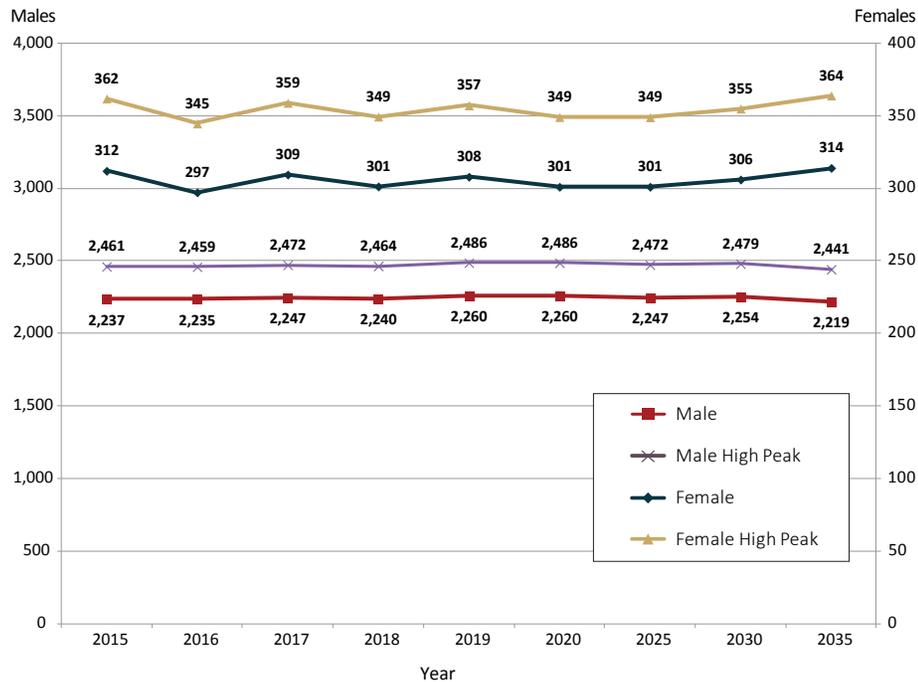


6. Inmate Population Projections

Based primarily on assumptions 1 and 2, the baseline future jail population is projected to remain relatively stable over the forecast horizon. Applying the peaking factor, the ADP forecast is relatively stable across the 20 year projection horizon—ranging from a low of 2,803 in year 2016 to a high of 2,843 in year 2019.

The “high” peak forecast represents the highest point the jail ADP is forecasted to be in any given future year. This high forecast is typically used for bedspace planning purposes. As such, all disaggregated estimates that follow in this report are based off of the “high” forecast.

FIGURE 6.16 TRAVIS COUNTY JAIL PROJECTIONS BY GENDER 2015- 2035



The bedspace forecast presented in Figure 6.16 represents the anticipated highest peak in average daily population for each respective year plus a classification factor to account for additional fluctuations and peaks in classification, calculated by gender. This factor was determined through a separate classification validation and bedspace analysis, representing an additional 6 percent for males and an additional 1.5 percent for females.

Bedspace Requirements

General Population

The resulting bedspace forecast requirements of the general population were disaggregated according to the distribution percentages identified in *Chapter 5 Classification Analysis* (see Table 5.16 – Combined Effects of Modifying the Time Limits and Maximum Custody Thresholds). The classification forecast is based on the current system without any adjustments made to the future master plan.

Tables 6.8 and 6.9 show the projected forecast disaggregated by gender and classification status and custody level, respectively. For Table 6.8, Pre-classification is defined as the total beds required to house average daily jail bookings for the first 48 hours. Table 6.10 presents the high forecast by status.

TABLE 6.8 TRAVIS COUNTY JAIL HIGH FORECAST PRE-CLASSIFICATION BY GENDER

FY	Male	Female	Total
2014	95	35	130
2015	83	30	113
2016	83	35	118
2017	91	37	128
2018	86	34	120
2019	86	33	119
2020	83	36	119
2025	86	36	122
2030	80	34	114
2035	98	32	130

6. Inmate Population Projections

TABLE 6.9 TRAVIS COUNTY HIGH JAIL CLASSIFICATION FORECAST BY GENDER

FY	Minimum			Medium			Maximum		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
2015	1060	176	1,236	859	113	972	459	43	502
2016	1060	164	1,224	858	106	964	459	40	499
2017	1062	170	1,232	859	110	969	459	42	501
2018	1061	167	1,228	859	108	967	459	41	500
2019	1071	171	1,242	866	111	977	463	42	505
2020	1072	166	1,238	867	107	974	464	40	504
2025	1064	166	1,230	862	107	969	460	40	500
2030	1070	170	1,240	866	110	976	463	41	504
2035	1045	175	1,220	846	114	960	452	43	495

TABLE 6.10 TRAVIS COUNTY HIGH JAIL FORECAST BY STATUS

Year	48-Hour Housing		Post Classification		Total Beds		Grand Totals
	Male	Female	Male	Female	Male	Female	
2015	83	30	2,378	332	2,461	362	2,823
2020	83	36	2,403	313	2,486	349	2,835
2025	86	36	2,386	313	2,472	349	2,821
2030	80	34	2,399	321	2,479	355	2,834
2035	98	32	2,343	332	2,441	364	2,805

6. Inmate Population Projections

Incorporation of Special Risk/Special Need Populations

Beyond the custody levels of the general population, TCSO recognizes that certain inmates within the jail population have special management needs, and due to behavioral or security reasons must be kept separate from the rest of the general population. The following categories were noted as fitting this segment of the population: administrative segregation, disciplinary segregation and protective custody.

In addition, medical and mental health populations present unique and typically more complex service needs and supervision challenges than the general inmate population. As discussed in *Chapter 3 Inmate Healthcare Analysis*, these populations require heightened observation, specific treatment and assistance, and various levels of supportive living. For this reason, establishing the specific bedspace needs with regards to these special populations is a central consideration for the development of future facility requirements in Phase 2.

Since historical snapshots for these populations were not available, a one-day inmate snapshot (5/29/14) was used to establish a preliminary percentage of special management and special needs beds (medical, mental health, administrative segregation, disciplinary, and protective custody beds). The one-day snapshot revealed that 3% of the population was designated as special management, and about 15% was identified in medical/mental health housing.

A workshop was held with key criminal justice stakeholder agencies to present and discuss these findings. A description of the Criminal Justice System Workshop and a list of participants can be found in *Appendix F2 Criminal Justice System Workshop*. Based on feedback from the participants, including additional data provided by TCSO, the percentage of beds designated for medical and mental health housing was increased from 15% to 18%.

Table 6.11 provides the future bedspace requirements for all general population and special risk/need categories, by gender, through the 20-year forecast horizon. These bedspace requirements form the foundation for the development of physical master planning options in Phase 2.

TABLE 6.11 BEDSPACE DISTRIBUTION SUMMARY

General Population	2015		2020		2025		2030		2035	
	M	F	M	F	M	F	M	F	M	F
48-hr Pre-Class	83	30	83	36	86	36	80	34	98	32
Minimum	829	133	830	134	825	133	832	134	810	143
Medium	672	93	673	93	668	92	674	94	656	92
Maximum	358	32	359	32	356	32	359	32	350	35
SUB-TOTALS	2,230		2,240		2,228		2,239		2,216	

Special Populations	2015	2020	2025	2030	2035
Medical	85	85	85	85	84
Mental Health	423	425	423	425	421
AdSeg./Disc/PC	85	85	85	85	84
SUB-TOTALS	593	595	593	595	589
TOTALS	2,823	2,835	2,821	2,834	2,805

FINDING 6.2

Forecasts generated by the consultant indicate that the County's jail population will remain relatively stable over the 20-year projection horizon, resulting in a need for 2,805 beds. There is no significant correlation between County population growth and jail population trends; and jail usage indicators such as admissions, average daily population, and average length of stay have stabilized or declined in recent years.

The Needs Assessment also revealed the following bedspace capacity requirements for gender, special risk/need, and general custody classification designations:

- 130 beds are required for pre-classification housing (48-hour housing)
- 14% of the beds are required for female housing
- 21% of the beds are required for special risk/special need populations
- The remaining capacity is designated for minimum, medium, and maximum custody housing

RECOMMENDATION

Provide for a total system capacity of 2,805 beds in Phase 2: Physical Master Plan. This will accommodate the 20-year projected need, taking into account inmate population peaks and a classification margin. Incorporate the above classification bedspace distributions into the development of future facility master planning scenarios in Phase 2.

Simulation Model Scenarios for Separate APD Booking Facility

TCSO currently operates a Central Booking Facility (CBF) for Travis County, where all arrests are received, processed and magistrates after arrest. Because the bulk of bookings are generated by the Austin Police Department (APD), the County and the City currently have an inter-local agreement that specifies the services to be provided by Travis County and the cost to be paid by the City of Austin for these services.

Over the last year or so, Austin has been exploring the possibility of operating their own booking and magistration center. At the same time, Travis County must plan to replace its downtown CBF to make way for growth within the Criminal Justice Complex. This Needs Assessment and Master Plan will need to establish the requirements for the new CBF. The impact of a separate City facility could be significant, as Austin generates about 70% of the bookings received in the County's central booking facility. There may also be a residual effect on the overall number of correctional system beds required downtown (48-hour housing) and at TCCC. As such, the consultant was tasked with developing a series of projection scenarios that would assess the impact of a separate City booking facility on the Travis County correctional system.

Methodology

In order to complete the scenarios requested, a series of analyses and assumptions were made on the two requested scenarios. These analyses and assumptions were then applied to the Travis County Wizard simulation model in order to obtain the necessary bedspace impacts. All bedspace impacts are presented as compared with the high peak forecast (incorporating daily and classification peaking).

There are two distinct populations under the scenario: class C misdemeanors booked from APD and non-class C misdemeanor offenders referred by APD. Analysis, assumptions and bedspace impacts are presented for each population.

6. Inmate Population Projections

Analysis of APD Bookings

As stated previously, the majority of Travis County charges and bookings originate from the Austin Police Department (APD)- approximately 70%. APD releases mimic the County as a whole with respect to release reason and most serious booking charge. Table 6.12 breaks down all APD bookings/releases into the two distinct populations listed above.

TABLE 6.12 TRAVIS COUNTY JAIL RELEASES BY BOOKING AGENCY

All FY 2013 Releases	Number	Percent	Percent Total APD
Total All Releases	55,224	100%	
APD Releases	38,411	70%	
APD Class C Misdemeanor	10,098	18%	26%
Avg. LOS	0.5 days		
Max. LOS	40.7 days		
APD Non Class C Misdemeanor	28,275	51%	74%
Avg. LOS	20.5 days		
Max. LOS	974.0 days		
<i>Note: 38 releases were excluded from analysis because their most serious charge could not be verified</i>			

APD Class C Misdemeanors

In order to determine the exclusive class C bookings/releases, a detailed look at all active charges per offender was completed. If an offender had a class C misdemeanor charge but also had other charges or holds above a class C, they were excluded from this analysis. Table 6.13 further breaks down the 10,098 cases released in FY 2013 and as can be seen in the table, the majority of all APD booked class C misdemeanor cases are released on Bond/ROR for non-violent crimes after an average of 12 hours

TABLE 6.13 TRAVIS COUNTY JAIL: APD CLASS C MISDEMEANOR RELEASES

APD Class C Misdemeanor Releases	N	Percent	Avg. LOS (days)
Base	10,098		0.5
Gender			
Female	2,029	20%	0.5
Male	8,069	80%	0.5
Age at Release			
25 and younger	3,052	30%	0.4
26-35	2,869	28%	0.5
36-50	2,746	27%	0.4
51 and older	1,431	14%	0.5
Release Reason			
Bond-ROR/Released to appear	5,759	57%	0.4
Other bond	22	0%	0.5
Sentence complete	1,448	14%	0.8
Court action	1,604	16%	0.4
Pay fine	1,256	12%	0.4
Release to other agency	4	0%	0.3
Other	5	0%	0.4
Most Serious Charge			
Violent	138	1%	0.5
Drug	682	7%	0.5
Property	465	5%	0.5
Other non-violent	8,813	87%	0.5

Analysis of this population shows that the vast majority of cases are released within 24 hours. As it is improbable that pure class C misdemeanor offenders are held beyond 24 hours, all cases held beyond this timeframe were excluded from the bedspace impact. These cases are most likely held for other reasons that are not included in the consultants' data capture.

6. Inmate Population Projections

TABLE 6.14 TRAVIS COUNTY JAIL: APD CLASS C MISDEMEANOR RELEASES BY LOS

Length of Stay Category	N	Percent	Avg. LOS (days)
APD Class C	N=10,098		
Less than 12 hours	8,551	85%	0.3
12-24 hours	1,286	13%	0.6
24-48 hours	73	1%	1.3
49-96 hours	92	1%	2.9
4 days- 30 days	93	1%	9.2
Over 30 days	3	0%	35.5

Based on the analysis and assumptions presented above, Tables 6.15 and 6.16 present the booking impact and bedspace reduction associated with APD holding all pure class C misdemeanor cases.

TABLE 6.15 TRAVIS COUNTY JAIL: BOOKINGS FORECAST AND APD CLASS C MISDEMEANOR IMPACT

Year	Baseline Bookings	Bookings without APD class C Misdemeanor
2015	53,768	43,670
2020	53,768	43,670
2025	53,768	43,670
2030	53,768	43,670
2035	53,768	43,670

Simulating these 9,837 cases as no longer admitted to the TCJ results in a reduction of just under 10,000 fewer bookings and a bedspace savings of just over 10 beds.

TABLE 6.16 TRAVIS COUNTY JAIL: BEDSPACE FORECAST AND APD CLASS C MISDEMEANOR IMPACT

Year	Bedspace Forecast w/ Peaking	Savings with no APD Class C Misdemeanor	Revised Bedspace Forecast w/ Peaking
2015	2,823	11	2,812
2020	2,835	12	2,823
2025	2,821	12	2,809
2030	2,834	13	2,821
2035	2,805	13	2,792

APD Non-Class C Misdemeanors

If an offender was not identified as a class C misdemeanor referred by APD, they were placed into a second category. Under the assumption provided by the County, APD would be able to house these offenders for up to 12 hours before transfer to the Travis County Jail. Table 6.17 below provides a breakdown of these roughly 28,000 bookings by length of stay observed during FY 2011-2012.

6. Inmate Population Projections

TABLE 6.17 TRAVIS COUNTY JAIL: APD NON- CLASS C MISDEMEANOR RELEASES BY LOS

Length of Stay Category	N	Percent	Avg. LOS (days)
APD Non Class C	N=28,275		
Less than 12 hours	4,491	16%	0.2
12-23 hours	7,458	26%	0.7
24-48 hours	3,112	11%	1.4
49-96 hours	1,768	6%	2.9
4 days- 30 days	6,699	24%	11.6
Over 30 days	4,747	17%	102.4

As seen in Table 6.17, under this scenario, 4,491 cases would no longer be brought to the Travis County CBF, bringing the total number of bookings forecasted down to 49,277 (Table 6.18). It is important to note that the remaining 23,784 cases referred by APD would be “double booked” –first into APD and then into the Travis County jail.

TABLE 6.18 TRAVIS COUNTY JAIL: BOOKINGS FORECAST AND APD NON-CLASS C MISDEMEANOR IMPACT

Year	Baseline Bookings	Bookings with APD Holding cases for first 12 hours
2015	53,768	49,277
2020	53,768	49,277
2025	53,768	49,277
2030	53,768	49,277
2035	53,768	49,277

Simulating that both 4,491 cases would no longer go to the TCJ and that there would be a 12-hour shortened length of stay for the remaining 23,784 cases, results in a bedspace savings of approximately 37 beds.

TABLE 6.19 TRAVIS COUNTY JAIL: BEDSPACE FORECAST AND APD NON-CLASS C MISDEMEANOR IMPACT

Year	Bedspace Forecast w/ Peaking	Savings with APD Holding cases for first 12 hours	Revised Bedspace Forecast w/ Peaking
2015	2,823	37	2,786
2020	2,835	37	2,798
2025	2,821	36	2,785
2030	2,834	37	2,797
2035	2,805	39	2,766

6. Inmate Population Projections

Cumulative Impacts

Both of the categories of offenders referred by APD are mutually exclusive and in order to gauge the full impact, they must be combined. A combination of these results in a revised bookings forecast of just under 40,000 offenders per year (Table 6.20) and bedspace savings of approximately 45 over the forecast horizon (Table 6.21).

TABLE 6.20 TRAVIS COUNTY JAIL: BOOKINGS FORECAST AND CUMULATIVE APD IMPACT

Year	Baseline Bookings	Bookings with APD Holding cases for first 12 hours
2015	53,768	39,440
2020	53,768	39,440
2025	53,768	39,440
2030	53,768	39,440
2035	53,768	39,440

TABLE 6.21 TRAVIS COUNTY JAIL: BEDSPACE FORECAST AND CUMULATIVE APD IMPACT

Year	Bedspace Forecast w/ Peaking	Savings with APD Holding cases for first 12 hours	Revised Bedspace Forecast w/ Peaking
2015	2,823	44	2,779
2020	2,835	45	2,790
2025	2,821	44	2,777
2030	2,834	46	2,788
2035	2,805	48	2,757

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7. Capacity Analysis

7. Capacity Analysis

*The population projections task of this study (Chapter 6 Inmate Population Projections) provided the overall **number** of beds required in the Travis County correctional system over a twenty year planning horizon. The next step in the needs assessment analysis was to establish the **type** of beds required in order to respond to gender, classification custody requirements, and the risk and needs presented by the population to be served at both the Travis County Jail and the Travis County Correctional Complex, as described in the classification analysis chapter (Chapter 5 Classification Analysis). Finally, the classification housing analysis was used to assess future bedspace requirements against existing housing unit resources and to identify gaps to be addressed in the Phase 2: Master Plan of this study.*

Approach and Methodology

As a foundation for facility planning and campus development, the 2035 projection population of 2,805 beds was disaggregated according to the specific number and type of beds needed for the two jail facilities' population categories. It was established that the TCJ replacement facility would include Central Booking and 48-hour pre-classification housing only; all long term housing will be provided at TCCC.

Comparing future classification needs with available resources first required a documentation of current classification and bedspace utilization. To that end, Travis County Records & Classification Unit staff provided the consultant with a Housing Unit Assignment Plan currently used by TCSO.

The Housing Unit Assignment Plan was used as the foundation for evaluating the current use of beds from a custody classification perspective; exploring challenges, opportunities, and future goals regarding the management and housing of the various populations; and then identifying any gaps inherent in the current bedspace inventory. The process included several on-site and web-based meetings supplemented by e-mail and telephone correspondence between the consultant team and Records & Classification Unit and other TCSO staff.

Existing Capacity Analysis

In Travis County, the Sheriff's Department Corrections Bureau encompasses three separate facilities in two buildings: the Central Booking Facility (CBF) and the Travis County Jail (TCJ) located in downtown Austin, and the Travis County Correctional Complex (TCCC) located in Del Valle, approximately 10 miles from the downtown jail.

The CBF represents the 'gateway to the criminal justice system in Travis County', being the first correctional facility where all arrested individuals are brought by the arresting agency for magistration and booking. After magistration, arrestees unable to be released on a bond are transferred from the CBF into the custody of TCJ to await court action. Pre-trial detainees who have to remain under correctional supervision for more than 48 hours and those for which a classification decision has been already made are transferred to the correctional facility located at Del Valle for more permanent housing. The largest portion of the Travis County jail population is at TCCC.

Within the Travis County corrections system, TCSO is required to house a wide variety of inmates with different charges, backgrounds, gender and needs. To accommodate these many variables, each facility encompasses several housing units as follows:

Travis County Jail

TCJ opened in July of 1986 with a capacity of 267 inmates. The facility consists of two components under the direct control of the Sheriff, the Central Booking Facility (CBF) designed primarily for the purpose of intake processing and built in 2001 as a new addition to the TCJ, and the 1982 TCJ facility mainly used for general booking purposes (pre-classification).

TCJ is made up of four floors accommodating a total of 35 housing units plus a total of 8 medical/mental health beds available for males and females with medical observation needs located on the first floor. All housing units at TCJ consist of single cells and provide housing for up to 359 inmates, both male and female.

Central Booking Facility

At TCJ, there seemed to be a general shortage of holding capacity available within the central booking area downstairs. As reported by jail representatives, every weekend during the summer months, overcrowding at the CBF forces the utilization of some of the booking units available on the second floor to accommodate the overflow of arrestees, which in turn results in having to conduct “de-population runs” and transfer unclassified inmates to the TCCC. This has a significant impact on staffing deployment and transportation activity.

Pre-classification Units

At present, a total of 11 pre-classification units (referred to as “booking units”) provide up to 167 beds (129 male and 38 female) for pre-classification purposes. At this time in the process, inmates are not yet classified by security risk and needs and so the mix of populations in these units is quite diverse. The current length of stay in these units is up to three days (72 hours). It should be noted that the Texas Jail Commission standard is 48 hours from booking to a permanent bed. TCSO is currently operating under a variance that extends that period to 72 hours, due to current constraints in the CBF and in available housing at TCCC¹.

Potential needs such as medical observation or evident mental health behavioral issues are identified for any special housing, referral or services, with the possibility of an immediate transfer to TCCC if an inmate is deemed in need of special housing. However, some of the mentally ill inmates that should be transferred to TCCC are kept at TCJ due to a lack of available specialty beds at the complex. Aggressive or violent behaviors are also assessed as part of the booking process and accommodations for housing made as needed to accommodate these special needs/ risk populations.

TABLE 7.1 TCJ PRE-CLASSIFICATION UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
CBF	P1	45	Booking
CBF	P2	52	Booking
TCJ-2 Fl.	NG	8	Booking & Booking Psych
TCJ-2 Fl.	NH	8	Booking & Booking Psych
TCJ-2 Fl.	NK	8	Booking
TCJ-2 Fl.	NL	8	Booking
TOTAL		129	
TCJ - 2 Fl.	SA	8	Booking & Booking Psych
TCJ - 2 Fl.	SB	8	Booking
TCJ - 2 Fl.	SD	6	Booking
TCJ - 2 Fl.	SE	8	Booking
TCJ - 2 Fl.	SF	8	Booking
TOTAL		38	

Jail representatives reported a general shortage of pre-classification beds at TCJ, particularly true in regards to the female population. As a result, inmates have to be moved to TCCC more often than scheduled while pending classification.

1 It should also be noted that the existing CBF/TCJ is being demolished to make way for the new Criminal Court building on the site. Any replacement facility will have to operate in compliance with the 48-hour mandate.

7. Capacity Analysis

Medical Hallway

The Medical Hallway (co-ed) area located on the first floor provides housing to inmate patients with acute mental health needs as follows (post conversion of 3 cells to FSP):

- 5 Full Safety Precaution (padded) cells
- 8 beds (single cells, shared with medical patients)

Post-classification Housing

Although TCJ was originally built to provide short-term housing for pre-trial detainees, in addition to pre-classification housing, the downtown jail also currently provides long term housing for a variety of classifications. This includes general population inmate workers and inmates participating in the TCSO canine program, as well as special needs populations such as mentally ill females, high risk, protective custody inmates and the elderly.

There appeared to be an excess of beds for inmate workers. Out of 464 beds available, about 100 were empty. As reported by staff, this is due to the fact that there are not enough inmates that meet the set criteria by TCSO.

Regarding special needs populations, TCSO officials indicated that high risk inmates and those in need of separation (i.e. protective custody) are currently housed at TCJ, rather than transferred to TCCC, due to a lack of small size units on the TCCC campus to manage this segment of the inmate population. The downtown facility contains smaller housing units that are more conducive to the management and supervision than the preponderance of 60/48-bed units at TCCC. The proposed demolition of the CBF/TCJ will require that some or all of this capacity be replaced at TCCC.

TABLE 7.2 TCJ POST-CLASSIFICATION HOUSING UNITS

Floor	Unit	Design Capacity	Current Unit Designation
2	SC	4	PSYCH OVER 72 HRS
2	NI	6	PSYCH OVER 72 HRS
2	NJ	3	Inmate Workers
2	NSEP	1	Separation Cell
3	SA	16	JRDC / GP
3	SB	4	DISC LKDN / AD SEP
3	SC	6	PROTECTIVE CUSTODY
3	SD	16	GP
3	NE	16	GP
3	NF	6	INMATE WORKERS
3	NG	4	INMATE WORKERS
3	NH	16	INMATE WORKERS
3	NSEP	1	SEP CELL
4	SA	16	INMATE WORKERS
4	SB	4	INMATE WORKERS
4	SC	6	PROTECTIVE CUSTODY
4	SD	16	INMATE WORKERS
4	NE	16	GP
4	NF	6	GP
4	NG	4	PSYCH OVER 72 HOURS
4	NH	16	GP
4	NSEP	1	SEP CELL
TOTAL		191	

FINDING 7.1

In addition to pre-classification housing, TCJ provides long term housing for a variety of classifications. The County has indicated that the replacement downtown jail will accommodate pre-classification housing only.

RECOMMENDATION

Replace TCJ post-classification bedspace capacity at TCCC. The number and type of beds to be provided will be determined in Phase 2 of this project.

Travis County Correctional Complex

The first facility opened at Del Valle in 1977 was a minimum security facility with an original capacity of 96 inmates. The site, now known as the Travis County Correctional Complex (TCCC), has grown to encompass more than 19 buildings organized in a campus-style setting, with a physical design capacity of approximately 2,800 beds. The TCCC housing component is made up of twelve buildings covering multiple classification categories. However, Buildings 5 through 9 (288 beds) have been decommissioned and are not considered bedspace capacity for master planning purposes. TCSO staff have reported that these buildings are offline, but are continuously maintained so they would be available for activation as an emergency measure in the event the inmate population surges. In the long-term these buildings are not ideal due to their small size and age.

The majority of the buildings’ housing units are podular, direct supervision design, allowing staff to pro-actively manage inmate behavior in a safe and secure environment.

Community Corrections Building (CCB)

Originally built in 1989 as a community corrections unit with a capacity of 48 beds, the CCB building is now operating at 24 beds and used to house pre-release parolees and civil commitments, as contracted by the State. For planning purposes, this building will not be included in the available bedspace inventory since, as per TCSO representatives, the location of this building outside of the secure perimeter does not make it suitable for housing inmates under the sheriff’s custody.

Building 1

Built in 1992, this building consists of 8 direct supervision, mezzanine style units providing a total of 432 *male beds*. The building currently accommodates *minimum and medium security, general population* inmates. Available beds consist of a combination of open cubicle beds (48-bed units A through D), and a mix of single and double cells (60-bed units E through H).

TABLE 7.3 TCCC BUILDING 1 HOUSING UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
1	A	48	GP 1-46 / INMATE WORKERS 47-48
1	B	48	GP 1-22 / INMATE WORKERS 23-48
1	C	48	GP 1-46 / INMATE WORKERS 47-48
1	D	48	GP 1-46 / INMATE WORKERS 47-48
1	E	60	GP 1-42 / INMATE WORKERS 43-44
1	F	60	GP 1-6 / INMATE WORKERS 7-44
1	G	60	GP 1-11 / INMATE WORKERS 12-44
1	H	60	GP 1-6 / INMATE WORKERS 7-44
TOTAL		432	

To maintain compliance with the “1:48 staff to inmate ratio” Texas Jail Commission standard, all housing units in Building 1 are each operated at 48 beds. If more than 48 inmates were to be housed in any of these units, this would require deployment of a second correctional officer to maintain compliance with Texas Jail Standards.

7. Capacity Analysis

Building 2

Built in 1987 and expanded in 2002 (units G and H), Building 2 consists of 8 indirect supervision housing units of linear design providing a total of *168 male beds*. The building accommodates maximum security general population inmates in single cells (units A and D) and in a combination of single and double occupancy cells (newest units G and H), as well as special need populations such as administrative segregation, disciplinary lockdown and protective custody inmates in single cells (units B, C and E).

TABLE 7.4 TCCC BUILDING 2 HOUSING UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
2	A	16	GP
2	B	16	DISC LKDN
2	C	16	LEVELS / ADMIN SEP / PC / PRE-DISC LKDN OVERFLOW
2	D	16	GP
2	E	16	PRE-DISC LKDN
2	F	16	GP
2	G	36	GP
2	H	36	GP
TOTAL		168	

Building 3

Built in 1989 and expanded in 2001, Building 3 consists of 12 indirect supervision housing units of podular design providing a total of *180 female beds*. The building accommodates almost all female custody levels. In addition, unit A1 in building 12 accommodates an additional 48 medium and maximum security females in double occupancy cells.

General population: *minimum and medium security inmates* are housed in 12-beds units A through D configured as open cubicles. In addition, the overflow of minimum and medium security females is housed in units A3 and A4 of building 12, each providing 64 beds organized in open cubicles of 4 beds. *Medium and maximum security inmates* are housed in 12-beds units G and H comprised of single cells.

Special needs populations (i.e. administrative segregation, lockdown, and protective custody) are housed in 12 and 21-bed units comprised of a combination of single and double occupancy cells. However, as reported by jail staff representatives, due to the nature of the high risk/high need female population, most of the 21-bed units are operated at 12 beds. If these units were to serve a general population classification, all 21 beds could be fully utilized, although it appears that the dayroom design of those units may not be adequately sized for 21 inmates.

TABLE 7.5 TCCC BUILDING 3 HOUSING UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
3	A	12	INMATE WORKERS
3	B	12	INMATE WORKERS
3	C	12	GP 1 - 6 INMATE WORKERS 7 -12
3	D	12	GP
3	E	12	TRANSITIONAL PSYCH
3	F	12	OPEN Y
3	G	12	GP
3	H	12	GP
3	I	21	ALL "Y" OVERFLOW
3	J	21	ALL "Y" HOUSING
3	K	21	ALL "Y" HOUSING
3	L	21	AD SEP, LKDN, LEVEL, PC & Y OVERFLOW
TOTAL		180	

Female patients with medical and/or mental health conditions are currently housed in Post C of Building 3, providing a total of 24 beds (4 units with lower tier double occupancy cells). This is remote from the Health Services clinic. Additionally, Post C Hallway has 2 padded safety cells for females requiring suicidal watch. The usage of these cells is extremely fluid, and is dependent on classification of inmates and housing availability on a daily basis.

As reported by jail staff, these medical/mental health female units use the majority of the restraining chairs available within the facility. And, although the use of chairs has prevented women from self-harm, they should not be used as a matter of routine. The frequent use of these chairs is indicative that appropriate jail housing resources for high level mental health female inmates are lacking.

Buildings 5-9

The opening of Building 12 resulted in the decommissioning of Buildings 5 through 9 on the campus. Each stand-alone building is comprised of 48 beds, except building 9 which has 96 beds. These buildings were reported as being in poor physical condition, as well as inefficient to operate due to size. As such, it was established that for Master Planning purposes, these facilities would not be included in the available bedspace capacity. The long-term future and use of these buildings will be further evaluated in Phase 2.

Building 11

Built in 1989, Building 11 consists of 4 24-bed indirect supervision housing units providing a total of 96 *male beds*. Due to its grade of construction and dormitory-style configuration, this building can only accommodate minimum security inmates.

TABLE 7.6 TCCC BUILDING 11 HOUSING UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
11	A	24	INMATE WORKERS
11	B	24	INMATE WORKERS
11	C	24	INMATE WORKERS
11	D	24	INMATE WORKERS
TOTAL		96	

7. Capacity Analysis

Building 12

Opened in October 2009, Building 12 is the newest building on campus. It is also the largest single facility within the TCSO.

The inmate living area consists of six (6) mezzanine style, direct supervision pods providing housing for 1,336 inmates, both male (1,160) and female (176), and covering all classification custody levels through a combination of single, double, open cubicles and quad cells. Each pod is comprised of 4 housing units ranging between 48 and 64 beds. Pods include a multi-purpose program room and other support spaces shared by the 4 units contained within.

There is also one Special Housing Unit (lockdown disciplinary unit) that houses 24 inmates. The building also comprises administration offices, a pharmacy and a commissary.

At present, there is no dedicated youthful offenders' unit to keep 17 year old inmates (ranging from 30 to 50 male youth and 1 to 3 female youth) separate from the adult population, as required by PREA standards. Absent this, TCSO reported that 17 year olds are presently assigned to Building 12, as the direct supervision nature of the housing units provides the best available housing alternative because it affords "eyes on" direct officer supervision of common areas at all times.

TABLE 7.7 TCCC BUILDING 12 HOUSING UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
12	A1	48	GP 101-210
12	A2	48	GP 101-222
12	A3	64	GP & PRIDE 101A-207D
12	A4	64	GP & PRIDE 101A-207D
12	B1	48	GP & PRIDE 101A-211B
12	B2	48	GP 101A-211B
12	B3	48	GP 101A-211B
12	B4	48	GP 101A-211B
12	C1	64	GP 101A-207B
12	C2	64	GP 101A-208B
12	C3	64	ELDERLY GP 101A-208B
12	C4	64	GP 102A-207B
12	D1	56	GP 101A-207B
12	D2	56	GP 101A-207B
12	D3	56	GP 101A-207B
12	D4	56	GP 101A-207B
12	E1	56	GP 101A-107D
12	E2	56	GP 101A-207B
12	E3	56	GP 101A-207B
12	E4	56	TRANSITIONAL/SPECIAL NEED/GP
12	F1	48	GP 101A-211B
12	F2	48	GP 101A-211B
12	F3	48	GP 101A-211B
12	F4	48	GP 101A-211B
12	G	24	DISC LOCKDOWN
TOTAL		1336	

FINDING 7.2

Current housing does not adequately address classification and/or operational considerations for females and youthful offenders.

RECOMMENDATIONS

- Explore a housing response in Phase 2 that allows for the proper separation of females by risk and need.
- Explore a housing response in Phase 2 that provides for sight and sound separation of 17 year olds.²

Health Services Building

Built in 1999, the Health Services Building provides housing for up to 249 inmates, both male and female of all classification levels requiring close observation or specialty housing due to their special medical or mental health condition. The building also comprises the clinic, health care administrative offices and inmate program spaces (e.g. 14 classrooms on the second level of the building). The center section of the HSB is so isolated that the original offices are being used as storage rooms.

TABLE 7.8 HSB HOUSING UNITS

Bldg	Unit	Designed Capacity	Current Unit Designation
HSB	B	56	TRANSITIONAL/SUBSTANCE ABUSE
HSB	C	51	Y LKDN / OPEN Y / FSP
HSB	D	16	NORTH: MED OBS
HSB	D	15	EAST: Y OBS / FSP
HSB	D	7	WEST: MED OBS
HSB	E	48	Y LKDN / OPEN Y / FSP
HSB	F	56	Y LKDN/OPEN Y
TOTAL		249	

Medical Housing

The section of the HSB building that houses the acute medical beds has a circular design and is comprised of D North, D East and D West units, providing a total of 22 medical observation beds, most of which consist of single cells, distributed as follows:

- *HSD North Three of the single cells are negative air pressure cells.*
- *HSE West consists of 3 single cells and 2 double occupancy cells providing a total of 6 beds for the female population. At the time of this report, this unit was reportedly closed, and rarely used “due to low census and staffing barriers”.³*

TCSO has seen a reported increase in the number of inmates suffering from chronic health conditions requiring more intensive level of medical supervision. While the medical treatment cells are adequate for their current use, they are inadequate for more intensive medical treatment required for some of the conditions being presented by the current population. While many acute conditions will continue to be treated at the hospital, the current level of care provided at TCCC has continually increased.

TCSO also noted an increase in the number of elderly inmates and those with mobility issues who cannot be housed in large, mezzanine housing configurations and/or require a lower bunk bed/lower tier housing assignment. As noted by Health Services staff, while not in need of acute medical housing, a growing percentage of the general inmate population has mobility issues or other conditions that make it difficult to house them in an upper bunk (in a double bunk cell) or on the upper tier of a mezzanine style housing unit.

During one of our site visits (October 29, 2014), TCSO reported that there were 473 males and 122 females designated by medical staff as requiring lower bunk and/or lower tier cell assignment. When the demand outpaces the available number of these beds, TCSO must shuffle housing assignments to accommodate this demand. This causes both disruption at TCCC and backlog at TCJ, as previously noted.

² Texas is considering legislation that would raise the age of juvenile jurisdiction to 17 years old, removing this population from the adult system.

³ Source: TCSO Memo to CGL: Infirmary Capacity and ADP, April 1, 2014

7. Capacity Analysis

Mental Health Housing

Within the HSB, housing for mentally ill inmates is divided into three levels –full safety precautions cells (FSP), inpatient treatment units, and transition units.

Full Safety Precaution Cells: Unit E Hallway provides up to 8 single bed cells, 4 of which are FSP padded cells. FSP cells are used for suicide and self-injurious behavior prevention. Designed to eliminate almost all opportunities for inmate suicide or self-injurious behavior, the cells contain padded walls, no furniture or elevated surfaces and a floor drain toilet controlled from outside the cell. Inmates placed in these cells are dressed in suicide gowns and given a sealed mattress.

Located within a segregation wing that is remote from the larger housing unit, FSP cells are configured along a narrow double-loaded corridor that is not in direct view of the officer. Monitoring and supervision is achieved through intermittent patrol of the officer on duty supplemented by CCTV.

The current design of the FSP cells is problematic. The FSP environment is not conducive to sanitation or mental stabilization, let alone therapeutic improvement, with the floor toilet design being dehumanizing. In fact, feces catching on the floor grates are almost unavoidable. One alternative is a toilet, low to the floor, that does not include the sink combination portion.

At the time of this report, four cells at TCCC- HSB D East and the E Hallway were being converted to padded safety cells. While adding FSP cells will reduce some pressure and unscheduled inmate movement from TCJ to TCCC these cells are not a substitute for mental health professionals. The use of these cells should be limited and tightly controlled, and policies and procedures regarding the use of these cells (i.e. target population, approval, length of stay and supervision requirements) should be reviewed and updated.

Inpatient Treatment Units: Units C, E and F are used as in-patient mental health units for the most acute male patients exhibiting symptoms such as paranoia, depression, anxiety and mania who cannot function properly in the general population. All of these housing units are direct supervision, have a mezzanine configuration and provide between 48 and 56 beds in a combination of single and double occupancy cells as follows:

- Unit C (51 beds): 7 single cells, 8 double, 2 quad cells and 3 violent
- Unit E (48 beds): all single cells
- Unit F (56 beds): 32 single cells and 12 double occupancy cells

In addition to these units, due to an increase in the acuity of the mentally ill patients, a mini-pod of 12 single cells (Unit D East) was recently opened to accommodate the seriously ill.

While in this units, inmate patients have access to open dayrooms and outside recreation. Units E and F have railings as well as mesh on the mezzanine level for protection against intentional injury from jumping or pushing. Originally built as a female unit, Unit C also has mesh. However, according to jail staff, this unit is difficult to manage since it was never designed to serve special management populations but rather a general population.

Transition Units: Unit B is an additional male mental health unit primarily used as a transitional unit and also for those inmates with co-occurring substance use disorders. This unit provides a total of 56 beds in a combination of 4 single cells and 13 quad cells.

Shortage of this type of bed at TCCC is forcing TCSO to keep mental health inmates downtown at TCJ until a specialty bed can be freed up at TCCC. Regarding the type of bed, smaller units are desirable for mental health patients, preferably of a single level configuration. As per the Mental Health Director, the current size of these units does not provide the right environment for this segment of the population. A parallel deficit for effective mental health therapy is the lack of one-on-one counseling space at either location. Some housing units have activity rooms available and some do not.

FINDING 7.3

Current housing capacity does not adequately address the growing number and acuity level of inmates with medical and mental health conditions.

- There is an overall shortage in the number and type of acute medical beds available at TCCC.
- The current HSB units do not provide the appropriate continuum of mental health housing. Most of the housing units are large, 64-bed units with mezzanine style configuration, appropriate for general population but challenging for inmates suffering from mental illness.
- The Full Safety Precaution (FSP) cells are difficult to observe, do not lend themselves to therapeutic interaction, and do not provide a humane environment for highly suicidal inmates.

RECOMMENDATION

Explore the development of a medical and mental health housing plan in Phase 2 that responds to the full continuum of need.

- Acute medical housing (3% of total bedspace capacity).
- Mental Health housing (15% of total bedspace capacity)
- An alternative to the current FSP cells

Current Capacity Analysis

There are three major considerations regarding the “fit” between current capacity, bedspace projections and classification housing requirements.

First, inmate population projections indicate the need for 2,805 correctional beds by year 2035, and the system currently has a combined inventory of 2800 beds. At face value, it might appear that TCSO has “sufficient capacity” to meet current and future housing needs. However, while the **number** of beds may be sufficient, the system does not currently have the **type** of bed required to meet the challenges of a changing inmate population. As previously noted, this is particularly true for special risk populations that require separation; a growing number of inmates with medical and mental health conditions – with increasing acuity of conditions; ensuring compliance with PREA standards; and inadequate housing for special risk/need females.

Second, certain housing unit configurations are generally more appropriate for certain classifications, e.g. dormitory for minimum security inmates and single/double cells for maximum classifications. The table below illustrates the current distribution of beds by type.

TABLE 7.9 CURRENT DISTRIBUTION OF BEDS BY TYPE

	Type of Beds						Total beds
	Open Cubicle	Dorm	Single Cell	Single/Double Cell	Double Cell	Quad Cell	
TCJ	0	0	359	0	0	0	359
TCC	624	96	307	396	538	500	2,461
Total System Beds	624	96	666	396	538	500	2,820
Total Percentage	22%	3%	24%	14%	19%	18%	100%

Source: Data provided by TCSO, compiled by CGL, October 2014

A key objective of the Phase 2 study will be the development of a Master Plan that takes the above into account, including the **number** and **type** of beds by custody classification; the existing bedspace inventory (number, type and building condition); and the new CBF (both the number of 48-hour beds to be located there and the number of beds that will be demolished and replaced at TCCC).

Third, Texas Jail Standards permit co-location of Maximum and Medium inmates, and Medium and Maximum inmates in the same housing unit when certain conditions are present, such as direct supervision design, or an interlocking entry vestibule. This provides TCSO with flexibility in housing unit assignment.

Table 7.10 shows the current distribution of beds by classification and location. TCSO is co-locating Minimum/Medium and Medium/Maximum inmates, compliant with the Texas Commission on Jail Standards. However, according to TCSO, the co-location of maximum and medium inmates poses operational challenges, due to different management policies and procedures. For example, only medium inmates leave the housing unit for centralized programs at the HSB; and escort of maximum security inmates requires two officers.

7. Capacity Analysis

TABLE 7.10 CURRENT DISTRIBUTION OF BEDS BY CLASSIFICATION AND LOCATION

Custody Level and Gender	Facilities, Buildings and Beds												HAVE	
	Travis County Jail (TCJ)						Travis Co. Correctional Complex (TCCC)						TCJ	TCCC
	CBF	MOO	1st	2nd	3rd	4th	HSB	1	2	3	11	12		
Pre-classification	97						32						129	
G.P.	151						96						1728	
Minimum							432						113	1080
Minimum/Medium	3						74						0	0
Medium							38						0	0
Medium/Maximum													192	192
Maximum													120	240
S.N.													29	
LXDN/AD.SEG./PC	1						11						19	72
MEDICAL/MH	6						4						10	298
Pre-classification	38												38	
G.P.													248	
Minimum													0	0
Minimum/Medium													0	176
Medium													0	0
Medium/Maximum													24	48
Maximum													0	0
S.N.													4	
LXDN/AD.SEG./PC													0	21
MEDICAL/MH	4						7						4	94
MOO*	8												8	
TOTALS	97	8	0	84	85	85	249	432	168	180	96	1336	359	2461

FINDING 7.4

While co-locating medium and maximum inmates in the same housing unit is compliant with the Texas Commission on Jail Standards, it poses operational challenges for TCSO staff.

RECOMMENDATION

Explore a capacity housing plan in Phase 2 that supports TCSO's preference for housing maximum security inmates separate from medium inmates.

Summary Capacity Recommendations

In summary, the consultant team's assessment proposes the following capacity recommendations for the corrections system:

- Replace TCJ post-classification bedspace capacity at TCCC.
- Explore a housing plan in Phase 2 that allows for the proper separation of females by risk and need, and sight and sound separation of 17 year olds.
- Explore a housing plan in Phase 2 that provides adequate and appropriate housing for medical and mental health inmates.
- Explore a capacity housing plan in Phase 2 that supports TCSO's preference for housing maximum and medium security inmates separately.



Appendices