Mentally III in Segregation Correctional Institution Inspection Committee

February 2, 2016

Mentally III in Segregation

- ➤ Both "segregation" and "restrictive housing" refer to a security control status which imposes 23 hour confinement.
- An individual with a mental illness is more likely to have a longer duration in segregation than an individual not on the caseload.
- > The conditions of segregation can exacerbate an individual's mental illness.

Use of Restrictive Housing Across the U.S.

A studyⁱ by the Bureau of Justice reported the following findings from a National Inmate Survey:

- Younger inmates are more likely to spend time in restrictive housing than older inmates;
- Inmates without a high school diploma were more likely to spend time in segregation and;
- Black inmates were a little more likely than white inmates to spend time in restrictive housing.
- i Retrieved from www.bjs.gov/content/pub/pdf/urhuspj1112.pdf, on January 6, 2016.

DRC Restrictive Housing Reform

- Length of stay will be determined by the nature of the rule infraction and overall threat to operational safety, with efforts made to reduce time held in restrictive housing.
- Inmates will have increased access to programming with a priority placed on services for individuals on the mental health caseload.
- Any individuals classified as seriously mentally ill who are held in restrictive housing more than 14 days will be out of cell more than two hours per day.
- Emphasis will be placed on shorter segregation stays.

DRC Mental Health Services

- > All inmates receive a detailed mental health screening.
- ➤ Inmates may be referred to mental health services by institutional staff or at the inmate's request while in segregation.
- Mental health staff must conduct weekly mental health rounds in segregation.
- Any inmate that is confined in segregation for more than 30 days must be personally interviewed by mental health staff and have a 30 day review report conducted.
- Any seriously mentally ill inmate in segregation for greater than 30 days shall have a new multidisciplinary treatment plan developed that identifies new interventions related to the extended placement.

Key Statistics

In the past five years, the total rate of inmates in the segregation population has progressively decreased to 462.9 per 1,000 inmates.

The number of individuals on the mental health caseload in segregation is only **slightly disproportionate at 27% compared to 21%** of individuals on the mental health caseload in the total DRC population.

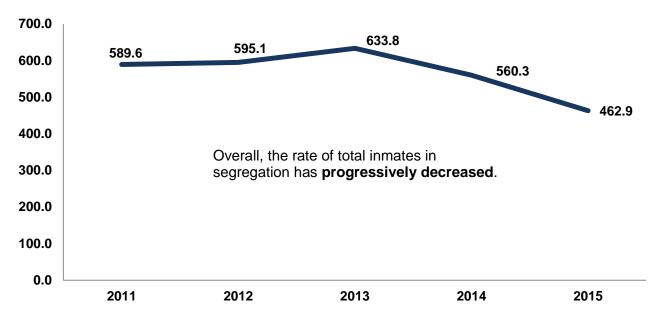
Overall, the **female institutions** had the **highest percentage** of individuals on the mental health caseload in segregation.

23 facilities have a greater percent of inmates who are on the mental health caseload in segregation compared to the mental health caseload of the institutional population.

The **Dayton Correctional Institution** reported the **most disproportionate** difference between their mental health caseload in segregation and the mental health caseload in general population.

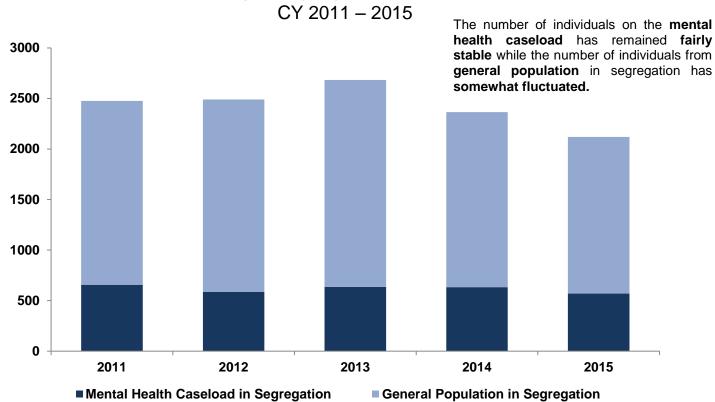
Segregation Population Rate per 1,000 Inmates

CY 2011 - 2015



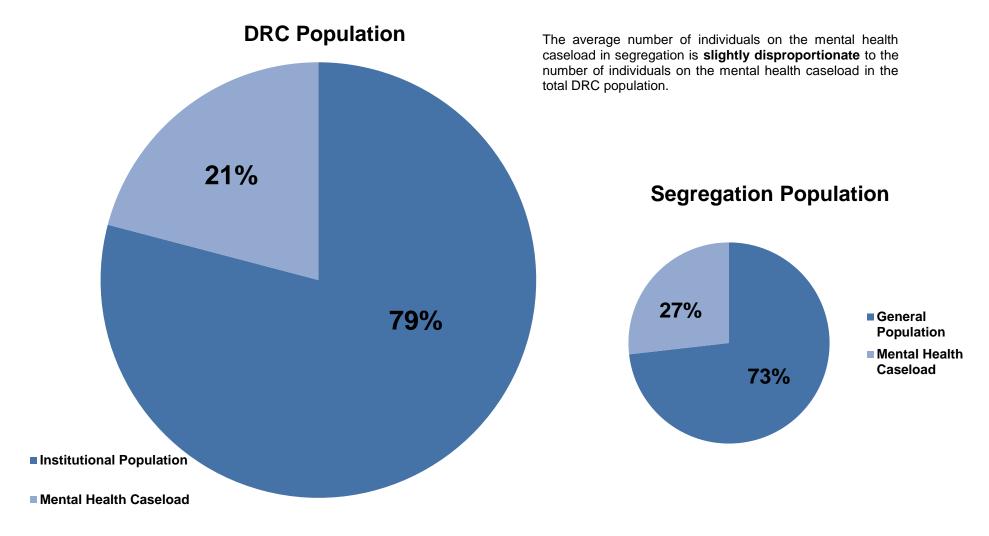
^{*} Data provided by the Ohio Department of Rehabilitation and Correction. Data reflects the total number of inmates in segregation over the past five years. December 2015 segregation data is not included.

Average Segregation Population



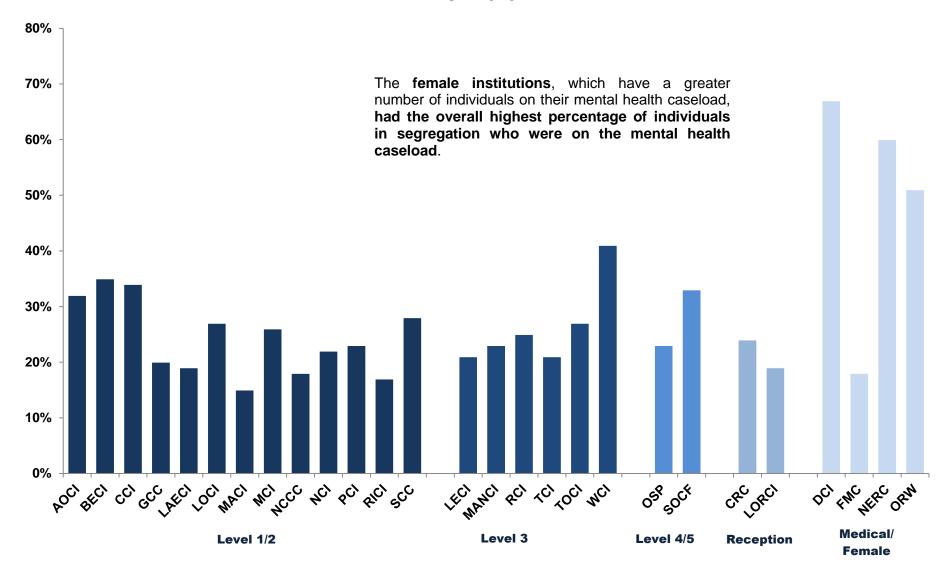
^{*}Data provided by the Ohio Department of Rehabilitation and Correction. December 2015 segregation data is not included.

Overrepresentation of Mentally III in Segregation CY 2015

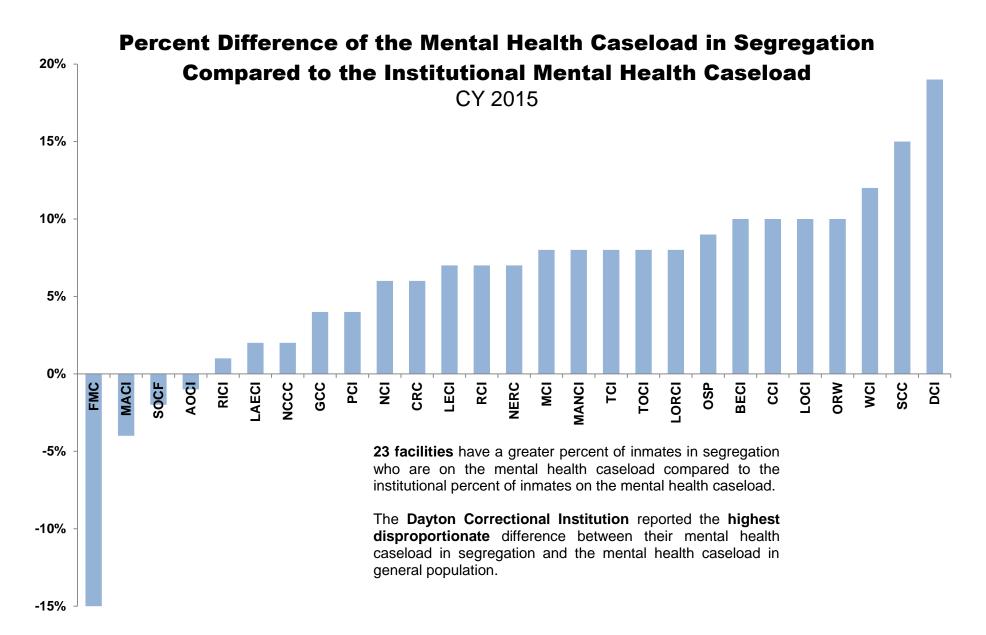


^{*}Data provided by the Ohio Department of Rehabilitation and Correction. Data was calculated using the average monthly numbers for institutional population, mental health caseload and segregation populations for CY 2014. December 2015 is not included.

Percent of the Segregation Population on the Mental Health Caseload CY 2015



^{*}Data provided by the Ohio Department of Rehabilitation and Correction. Data reported is an average of the total number of individuals on the mental health caseload and the average monthly segregation population but does not include December 2015 data.



^{*}Data provided by the Ohio Department of Rehabilitation and Correction. The above chart reflects the difference in the percent of inmates on the mental health caseload in segregation compared to the percentage of inmates on the mental health caseload for the entire institutional population. Additionally, the percentages were rounded prior to coming up with the difference. December 2015 data is not included.

Average Mental Health and Segregation Caseload

CY 2011 - 2015

Institution	MH SEG	Total SEG								
	2011	2011	2012	2012	2013	2013	2014	2014	2015	2015
AOCI	13	52	20	48	19	52	16	56	15	46
BECI	36	120	25	100	29	107	35	97	25	73
CCI	45	137	36	106	39	133	42	106	32	92
CRC	12	34	15	64	19	56	19	52	11	47
DCI	3	22	10	20	14	23	17	24	14	22
FMC	2	4	1	4	1	7	1	6	2	10
GCC	8	41	4	41	10	49	7	37	6	28
LAECI	21	81	15	98	10	108	13	83	11	57
LECI	85	339	59	291	69	368	41	237	51	246
LOCI	24	90	26	84	23	89	20	77	21	77
LORCI	10	54	14	59	13	57	13	58	6	32
MACI	21	73	12	50	14	48	10	50	9	56
MANCI	44	167	44	189	34	222	50	221	47	205
MCI	33	89	19	117	17	114	18	100	19	74
NCCC	25	123	11	83	19	115	17	108	20	89
NCI	22	138	22	139	25	128	27	120	17	97
NERC	6	9	5	9	6	10	3	5	2	4
ORW	36	68	28	50	57	114	74	139	70	138
OSP	5	31	2	18	1	10	2	11	2	7
PCI	21	102	23	137	25	123	22	103	21	93
RCI	35	163	37	161	52	165	50	166	15	89
RICI	24	100	16	111	14	92	15	87	40	161
SCC	19	78	18	88	20	93	22	85	19	67
SOCF	25	89	25	78	20	71	19	72	24	71
TCI	29	69	32	82	17	87	20	88	20	75
TOCI	21	92	37	146	20	103	16	72	16	76
WCI	33	111	31	117	49	139	45	105	35	87
Totals	658	2,476	587	2,490	636	2,683	634	2,365	570	2,119

^{*}Data provided by the Ohio Department of Rehabilitation and Correction. These numbers were rounded to the nearest whole number. Data does not include December 2015 nor does it include data from Hocking Correctional Facility for 2011 and 2012.