### **IDOC ADULT ADVISORY BOARD MINUTES**

## TUESDAY, MARCH 22, 2022

#### VIRTUAL – WEBEX

Attendance: IDOC - Director Rob Jeffreys, Chief Hammers, Chief Brunk, Chief Eilers, Chief Hughes, Chief Lindsay, Chief Williams, Chief Garnett, Shelith Hansbro, James Pagano and Jennifer Parrack

Adult Advisory Board: David Olson, Phillip Whittington and Nneka Jones Tapia

Guest: Gerry Brown, California Department of Corrections

### Good to see all.

Individuals introduce themselves and the meeting was started by Phillip Whittington and seconded by Ms. Jones Tapia.

Mr. Whittington thanked everyone for attending and wished them a good morning.

First item on the agenda was approval and review of the minutes, 2<sup>nd</sup> given, so moved minutes are accepted

Next up is Director Jeffreys......Thank you everyone for attending. It's been a while and it is good to see everyone. We have one new board member and two returning members.

What we want to do is just give you guys an update as to what has been going on over the last couple of years. I looked at our timeline and went through some old documents and this all began on March 22, 2020, it was a report of our first positive Covid, the individual was at North Lawndale ATC.

We had been in Incident Command for 8 days, we locked everything down, when you look back over it, it was all about shutting down the facilities and containing Covid. We stopped everything, visitations, movement and just started dealing with it.

The response for Covid was new for everybody. Now, the interesting part back then was we were dealing with 2 pandemics, well 2 issues at the same time, we were dealing with the flu. Influenza was running rapid through our agency, we had to deal with both. Not knowing the difference between the 2 at that particular time. So, when we look at the numbers, we had over 3912 people in quarantine for exposure to the flu. If we are testing back then, then we probably would have realized those folks would probably be part of Covid exposure. At the time we only had 21 confirmed cases of symptomatic individuals. We had to decide how are we responding? What were we dealing with?

With everything we have learned through Covid our robust testing strategy, vaccination education, quarantine, and protocols we put in place at our instant command post helped control things. We had 19 staff and 61 individuals in custody that were positive to start the outbreak. We have completed over 1 million plus testing coming from mitigation outbreak. We are still testing twice a week based on the productivity rate of the community where the facilities are or located at. We have completed 4.50,00

which includes out staff. Unfortunately, we had 9 individuals in custody passed away and 5 staff members due to Covid.

So, it's been a long year, but I would say Covid has shown us in a way we can operate better as well. There is a silver lining that we like to say we learned a lot about ourselves through Covid. Some of the strategy we put in place because of Covid was our population management task force, which was part of our objective to reduce the population because that was one of CDC guidelines to create social distance. So, we created the task force, streamlined a lot of our processes to get people out passed on programming and it showed us what we need to do better with programing. We needed to provide programing and install more programs too.

As I spoke earlier it showed us that correctional settings are a whole lot different than what the community setting are when it's about mitigation the risk for exposure for Covid. We grew up quick because of it and we made some very drastic changes to the way we operate our agency. We used Covid to get a lot of things accomplished, such as a robust policy review process, included ACA accreditation into all our policies we have completed. For facilities that have been through ACA accreditations. We reformed our restrictive housing policy, we created incentives population management strategy based on rewards and good behavior. We made changes to our classification process, so it puts us in a better position to manage our agency in a more holistic approach. We wanted to be not so punitive and a lot of that is a result of our response to Covid, because we were able to see everything right in front of us.

I can't say enough about this team on this call right now. Some of the work they have done and continue to do as we respond to Covid and knowing that we responded to the need for change in this agency. Some of the work we have done in parole, Covid exposed a lot of stuff. We didn't have a policy in place for parole. So, now we have a policy which deals with case management and risk management and what individuals in custody must do to get people off based on good behavior. We reward people for good behavior and get them out through re-entry program, risk and needs assessment. The same application applies for those out on supervision too.

So that is just some on the work by everyone on this team working collaboratively to improve IDOC. As we continue to move forward....one of the things Covid has done is we have been able to reduce our population and we have been able to sustain based on the mechanisms that we put in place. So, with the reduction in population, we have also been able to reduce the footprint our agency.

Sometimes you don't have to just continue to hold open a building just for the sake of ability if we don't have enough individuals and capacity to populate the building. It helps us reduce capacity of the facility along with reduction in staff. We are struggling just like the rest of the country with retaining staff and recruiting staff to work in today's society. Correction is not immune but with reduction of the population and with the shortages in vacancies we were able to reduce the footprint, condense our resources and be able to operate our facilities in a safe manner.

We have created 3 facilities for re-entry, so every facility can't do everything all the time. So, we specialized certain facilities to be mission driven based on our streamline re-entering process to get folks who are doing shortest amount of time out quicker. If those facilities provided us the resources for rapid time it made us look at some of our management strategies for maximum facilities as well. Our goal is

to reduce our maximum-security status and mange folks in the least number of restrictions as possible. This something new for Illinois, but everyone can't be locked up 23 hours a day.

For 25 years this has been the way, so with our change to our classification system, we have been able to reduce our maximum security, take some of the subjectivity out of why people are staying at maximum security and get them down to a lower-level facility, so, they can have access to more programming.

So, that brings up the state bill...we all know the conditions of confinement and the lawsuits. It is past its relevancy as far as managing people at high security. So, based on our reorganization and everything the Stateville is going to be now a multi-level re-entry. It is important because most resources in Stateville return to Cook County. We released over 2000 people to Cook County or Chicagoland area. So, we looked at how and where our new maximum facilities will be, one is Pontiac with a smaller population, and Menard will be the other maximum facility. Lawrence will be new maximum so hopefully with it being a newer facility, better conditioned, better access to daylight and outside activity. It is a newer facility will be an improvement.

We have moved our administrative detention population down to Lawrence now and have not heard anything negative because of the move. Everything is still a work in progress. There are some procurement issues and some equipment issue that has slowed the process, with some contentious back and forth as reducing the footprint at Pontiac.

Toyia, Hammers or John can you talk about the intricacies of footprint reduction at these facilities in the mission changes at the facility?

When we presented our facility operation overview, we identified Lincoln Correctional Center as the agency's rapid re-entry facility, individual's there will come from the NRC and must have a minimum of 3 months, then a maximum of 18 months or 1 to 1 ½ half years. Jacksonville Correctional Center was identified as a Central region re-entry facility. Individuals go to that facility have a holding conviction from 49 counties that we identified, kind of collar counties and must have a minimum of 18 months and then a max of 5 years. Murphysboro LSRC was identified as the Southern region re-entry. Individuals from holding convictions from 34 counties.

Stateville and Stateville farm will kind of be the Northern re-entry region, individuals having 4 years or less. So, with the reclass, incentive base management and population management having Stateville a multi-level facility will give folks an opportunity to work their way back up to the Northern area, the area they are from.

To do that we changed Lawrence Correctional Center to a maximum facility, which will help us move the maximum individuals out of there and finish our mission. We want to reduce our footprint and make sure we are doing it safely and efficiently. We started the process where we reduced some units at East Moline, that helped us with the workforce and consolidated the population. Obviously when we do this those facilities are already short, they don't need the extra head count. We reduced 5 living units at Dixon Correctional Center and consolidated the population to additional living units at the facility, which reduce their headcount as well. Again, they were short staffed, this provided them relief, overtime issues and helped provide services and supervision to the population.

We identified 4 units at Vandalia, same concept, consolidate the population into other living units, eliminating overtime and able to man those units. Most importantly we are consolidating our resources as it relates to Pontiac and Vandalia. Using this methodology of staff shortage, reduction in capacity to better guard the population.

The third variable is deferred maintenance like how much it cost to fix things as opposed to quickly pouring money into a bad product. So, those are some of the 3 variables we use to decide and pretty much our agenda and everything we do.

Now we will go ahead with James, Alyssa and Jennifer presentation of our strategic plan.

The success pf our agenda, keeping in mind our biggest thing is turning this into a rehabilitative environment, more holistic. Incentive population management, as opposed to punitive and locking folks up for 23 hours a day and how that applies to our mental health strategies. Its also about quality of life and quality of care being fielded through our medical side of the house. We can have questions right now, or we can go through the PowerPoint presentations.

Dr. Jones or Dr. Olson...do you have any questions for the Director?

Just really quick with the consolidation you described in a number of facilities. Are you able to achieve cost savings by not needing to fill or is it kind of a cost neutral change? It's just to keep people in a smaller number of the housing units. We can look at those 22 ways. 1, we can look at staffing aspect of it, we can look at the individuals in custody. We can talk bout how the savings are based on the commodities with the population, you know not having to fill this unit up and pay all the electricity and stuff like that. 3<sup>rd</sup> its maintenance that goes along with populating particular units, then we can look at how we are saving. It is probably cost neutral. I'll leave that to Jared to tell me different or explain over time, I mean, it's we are running over time. Exceeding our allotment, over 100 already in some facilities. So, reducing the resources to concentrate on a particular smaller footprint is definitely going to save us in the long run with the overtime and everything. We still need to hire staff, it doesn't get us out of the need for staff. We need to hire more staff at most facilities. Jared is there anything else.

Sure, thank you Director.

The first thing I would say is that just by eliminating the overtime an officer on straight pays the average officer will stay on straight pay as compared to overtime, which is approximately 15 dollars an hour savings. So that adds up very quickly and then Chief Hammers point in regard to reducing the number of roster spots, which lowers our liability and not actually causing anyone to lose a job. If you add that up across our plan that totals 14.7 million included within the figure is some operational efficient as you mentioned Director for things like less utilities and drop in population. Of course, plus commodities and other consumables. So, another way too say it is how do we not take these measures?

The departments FY23 introduced budget would have had to be even more money to accommodate running the old antiquated system and the facilities impacted.

Thank you, Mr. Brunk. Thank you, Director for the overview.

I am wondering is there a mechanism in place or being considered for staff and people incarcerated to be a part of the pathway toward more holistic and rehabilitative corrections approach understanding that staff and people incarcerated can be the biggest challenge. Just wondering how you can mitigate that by having their voice embedded in this well needed and appreciated shift.

That is a great point and something that takes us back to Covid and some of the things Covid afforded us the ability to communicate directly with the population. Believe or not we never did these4 type of things with corrections. These zoom meetings or WebEx or what else is available. So, we did that with the population, we included the population with vaccination education and then we had ambassadors for each facility and our team along with Dr. Bowman and his team trained ambassadors through a platform which kept the population included on vaccination education. So, they could go share with the population. So, we are building off that.

Chief Lindsay runs the committee for the agency, and she also communicates with the population monthly regarding some diversity equity inclusions initiatives and hears from the population about what they can be included in, their voice is included in some of the decisions we are making as it relates to policy.

We have a newsletter, and we provide information to the population through that. I've been interviewed several times with the newsletter from the population, you know they ask me questions, so we can get that information out there. We put memos out, we try to include them as much as possible with a platform like this. We can always be most just like you know, it can always be more if we communicate more with the staff as well.

Thank you very much Director. Like to move into re-entry services update.

The Director asked James Pagano, Jennifer Parrack, Chief Williams, and Chief Garnett to bring you up to date on the re-entry side. Some of the information is included in the Strategic plan.

Population trends and changes to community supervision front.

Population since July 2019 has declined 30%, our numbers are closer to 27,000 than 28,000 and women's population down closer to 50% since July 2019, largely due to what leads women to prison.

Community supervision population is close to 20% since July 2019.

Looking at the chart the first number is technical violations being issued is 45% lower than it was in the final 6 months of 2019. The lower level is due to supervision level has almost quadrupled in the same timeframe. More people are being supervised at a lower level of intensity, resulting from good work and changes. Looking at early discharge the numbers are a bit skewed in April and May of 2020, but over the last 6 months the early discharge is closer to 50% compared to 2019, this is due to reduction in technical violations as well as overall community supervision.

Director Garnett stated one of the biggest changes was the pandemic. We took this opportunity during pandemic to not expose our staff. We implemented video conference for our staff, we still had some face to face, but this slowed down us going into people's home and transmitting back and forth. Also, we introduced our risk assessment tool, even including our sex offenders, which was huge. We worked with other states and some good ideals were brought, which lead to re-writing our administrative director on case management. Prior we were paroling our supervising based on crime, not risk. We changed the number of days that we go between, use to be 30, 60 90 or 180, but now 30, 60 and 90. Due to the new crime bill we are lowering the standard when we will submit you or you are eligible to

be submitted for early release. PRB loves the positive change, and it has been a positive tool for them too. It's a tool for them to see individuals are doing everything they are supposed to be doing. Let's move them down a level and that way we can focus on those individuals that are high risk or high to moderate risk. Let's try and get them off parole early because the more we supervise them, the more it is setting them up to fail if they are low risk. Parole has really upped our game and during this process have added a lot of wraparound services. The numbers for our day reporting center have been at an all time high. WebEx and video access has been more convenient for your clients to be able to participate.

# Re-Entry Initiatives:

Positive data trends have been the agency's Medicaid efforts, in 2021, IDOC revamped how it was getting folks enrolled in Medicaid or providing them the opportunity to enroll in Medicaid, the charts show the clear positive change. In January of this year, 99% of exits were provided or already enrolled in Medicaid. The team will continue to work to get more people leaving with active benefits.

Staff at facilities works to provide all the vital works before discharge. Each facility has established a reentry counselor to help facilitate these documents. Training is provided on a regular basis to ensure they know the process and can provide documents upon release.

We have partnered with the Secretary of State for state ID and making sure they have other documents such as birth certificate, and social security card. We purchased blue backdrops for each facility and clinical works with individuals in custody and SOS to make sure the process works. We have established a contact with SOS and one individual in Springfield is dedicated to DOC. They are then released with an ID in hand. The whole process can be handled securely within each facility. We have issued roughly around 600 and there is another batch waiting to be processed, so we will continue the process at each facility. We did a big push in April and partnered with county clerk's offices to obtain birth certificates as well.

We have established re-entry resource rooms, which include computer labs and resources and continue to make our way around to facilities to ensure each is functioning properly. Each facility has its own challenges. We are tracking access and making sure individuals are getting the tools they need. We continue to refine and get more resources on the computers

We have found that each facility mission changes and geographics plays a role too, so, we are working more toward regional re-entry to make sure we are using other state agencies and community-based organizations that matches the region. Working closely with the local workforce allows us to really connect with funding, support, and training. Then these employers reach out to us and say they want to work with us and explore options for hiring.

Clinical side of re-entry will be focused potentially at Stateville since it will be a multi-level facility focusing on vocational and educational training as well as re-entry. Based on the proximity to they city we have university partners, community partners, advocacy partners and many different organizations reaching out to us to provide services to people in custody. Linking these resources and partners provides these individuals with educational and vocation options they can decide to pursue once they are released.

We are getting individuals back into our group rooms and individuals in custody are happy to be back in the classes again.

For female division will be more specialized caseloads and training that will be more gender responsive and focus on specific kind of re-entry for our female population.

The department recently won a grant awa5rd from the Bureau of Justice which will assist us in improving adult education services. Better leverage technology in the classroom and introduce assessments and services for individuals which experiences dramatic brain injuries who are assessed to be intellectually or developmentally disabled as well as those with learning disabilities, so this grant money will allow us to expand our learning.

Next, we currently finalizing a comprehensive post-secondary education policy to address some long-standing concerns from partners is higher education.

Board members make sure you are completing your training.

Thank you that's all we have.

We only had 1 joining as public attendance.

No public comment, so we have a motion to adjourn.

Motion to adjourn.

Thank you very much.