



Office of the Inspector General
U.S. Department of Justice



Audit of the Federal Bureau of Prisons' Management of Inmate Placements in Residential Reentry Centers and Home Confinement

AUDIT OF THE FEDERAL BUREAU OF PRISONS' MANAGEMENT OF INMATE PLACEMENTS IN RESIDENTIAL REENTRY CENTERS AND HOME CONFINEMENT

EXECUTIVE SUMMARY

The Federal Bureau of Prisons (BOP) provides a variety of reentry programming to help incarcerated inmates successfully transition back into society. As part of its release preparation, BOP has the authority to place inmates in residential reentry centers (RRC), also known as halfway houses, and/or home confinement while serving the remainder of their sentences. BOP may determine that an inmate should not be placed into either an RRC or home confinement because, for example, the inmate poses a significant threat to the community. An inmate placed in an RRC and/or home confinement remains in BOP custody.

RRCs provide a supervised environment that support inmates in finding employment and housing, completing necessary programming such as drug abuse treatment, participating in counseling, and strengthening ties to family and friends. Home confinement provides similar opportunities, but is used for inmates BOP believes do not need the structure provided by RRCs. Inmates placed in home confinement are monitored and are required to remain at home when not working or participating in release programming and other approved activities.

Pursuant to the *Second Chance Act of 2007*, all federal inmates are eligible for RRC and home confinement placement. However, BOP's placement decisions are supposed to be driven by an individual assessment weighing an inmate's need for reentry services against the risk to the community. Inmates can be placed in RRCs for up to 12 months but can only spend a maximum of 6 months, or 10 percent of the term of imprisonment, whichever is shorter, in home confinement. In fiscal year 2015, the BOP spent \$360 million on RRC and home confinement costs and, as of September 2016, BOP reported having 181 RRCs operated by 103 different contractors.

The Office of the Inspector General assessed BOP's RRC and home confinement programs, including its placement policy and practices, program capacity planning and management, and strategic planning and performance management. The audit covers inmates released from BOP custody from October 2013 through April 2016, either directly from BOP institutions, RRCs, or home confinement. Based on our analysis, we found that 94,252 inmates released from BOP custody during the scope of our audit were eligible for placement in an RRC and/or home confinement. BOP placed 79 percent of these eligible inmates into RRCs and/or home confinement - 75 percent were initially placed in RRCs and only 4 percent went directly into home confinement. The remaining 21 percent were released directly from a BOP institution.

Our audit found that BOP's RRC and home confinement placement policies and guidance, which are designed to identify individual inmate risks and needs

while simultaneously weighing these against the safety of the community and available resources, appear reasonable. In our judgment, the inmate's security level at the time of placement is the best indicator of inmate risk and need for transitional services because it incorporates key recidivism risk factors, as well the inmate's behavior during incarceration. As a result, we analyzed BOP's RRC and home confinement placement practices based on the exit security level of inmates released from BOP custody during the scope of our audit.

Our analysis determined that, contrary to BOP policy, BOP guidance, and relevant research, BOP's RRC and home confinement placement decisions are not based on inmate risk for recidivism or need for transitional services. Rather, we found that BOP is placing the great majority of eligible inmates into RRCs regardless of inmate risk for recidivism or need for transitional services, unless the inmate is deemed not suitable for such placement because the inmate poses a significant threat to the community. As a result, low-risk, low-need inmates are far more likely to be placed in RRCs than high-risk, high-need inmates. Specifically, we found that of the 94,252 inmates released between October 2013 and April 23, 2016, 90 percent of minimum security and 75 percent of low security inmates are placed in RRCs and/or home confinement. However, only 58 percent of high security level inmates were transitioned into the community through RRCs, while 42 percent were released into the community directly from a BOP institution.¹ We recognize this may be a result of the fact that many of the high security inmates were considered a public safety risk. Nonetheless, at the time they would be placed in an RRC, on average these inmates are within 4 months of being released into the community upon completion of their sentence. Thus BOP must weigh the immediate risk of placing high-risk inmates in RRCs against the risk of releasing them back into society directly from BOP institutions without transitional reentry programming.

It also appears that BOP is underutilizing direct home confinement placement as an alternative to RRC placement for transitioning low-risk, low-need inmates back into society. This underutilization of direct home confinement placement was evident when we reviewed data on placement of minimum and low security inmates and found that BOP placed only 6 percent of even those lower risk inmates directly into home confinement, despite BOP policy and guidance stating that direct home confinement placement is the preferred placement for low-risk, low-need inmates. This is particularly concerning given that BOP guidance, as well as the research cited in the guidance, indicates that low-risk inmates do not benefit from and may in fact be harmed by RRC placement because, among other things, of their exposure to high-risk offenders in those facilities. Moreover, the underutilization of direct home confinement for low-risk, low need inmates results in fewer RRC resources being available for high-risk, high-need inmates since the RRC inmate population is already at or in excess of BOP's contracted capacity. In addition, this

¹ During the scope of our audit, 11 high security inmates were placed directly into home confinement.

practice may also further strain high security BOP institutions that are already well above capacity.

We found that, from October 2013 through March 2016, the RRC population has remained at about 101 percent of contracted capacity, while the home confinement population averaged nearly 159 percent of contracted monitoring capacity, despite BOP's apparent underutilization of it as an alternative to RRC placement. The home confinement capacity issues resulted, at least in part, from BOP's policy to aggressively pursue transitioning inmates from RRCs to home confinement as soon as possible in an effort to increase RRC capacity. This reduces the capacity for direct home confinement placements and, additionally, may result in inmates being transitioned from RRCs to home confinement too early, as evidenced by the fact that 17 percent of inmates were placed back into RRCs for violating home confinement program rules.

We also found that BOP lacks adequate performance measures to evaluate the success of its RRC and home confinement programming. Although BOP has RRC and home confinement placement targets, these targets do not measure the effectiveness of RRC and home confinement programs. Additionally, the placement targets – 85 percent from minimum, 75 percent from low, 70 percent from medium, and 65 percent from high security level institutions – appear to encourage institutions to maximize the number of inmates placed in RRCs or home confinement, regardless of transitional need. In fact, the issues we identified with BOP's current placement practices may be driven, in part, by its RRC and home confinement placement targets.

The success of BOP's RRC and home confinement programs relies on the quality of programming provided by its RRC contractors, all of whom also provide services to and monitor inmates in home confinement. However, we found that BOP's policy for monitoring its RRC contractors focuses on assessing compliance with the contractual Statements of Work, rather than assessing the quality of services provided by the RRC contractors. Specifically, we did not identify any requirement that RRC contractors or BOP collect, retain, and report any statistics pertaining to RRC or home confinement program performance or success or failure rates. If these measures were available, BOP could then incorporate these figures into its strategic planning, which might assist it in assessing its programs and RRC contractors based on measurable qualitative achievements as opposed to simply trying to meet numerical quotas.

Our report makes five recommendations to improve BOP's management of inmate placements in RRCs and home confinement.

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MANAGEMENT OF INMATE PLACEMENTS IN
RESIDENTIAL REENTRY CENTERS AND HOME CONFINEMENT**

TABLE OF CONTENTS

INTRODUCTION	1
Reentry Initiatives and Research.....	3
Office of the Inspector General Audit Approach	5
FINDINGS AND RECOMMENDATIONS.....	6
BOP’s RRC and Home Confinement Placement Policy and Practices.....	6
RRC Placement Policies and Guidance	7
Summary of Release Data.....	11
Analysis of Inmates Eligible for RRC or Home Confinement Placement.....	13
Summary of RRC and Home Confinement Data.....	22
BOP’s RRC and Home Confinement Capacity Planning and Management.....	24
BOP’s Performance Management and Strategic Planning for RRC and Home Confinement Utilization.....	28
Strategic Planning.....	28
Monitoring of RRC and Home Confinement Service Providers.....	31
Conclusion	33
Recommendations.....	34
STATEMENT ON INTERNAL CONTROLS.....	35
STATEMENT ON COMPLIANCE WITH LAWS AND REGULATIONS.....	36
APPENDIX 1: OBJECTIVES, SCOPE, AND METHODOLOGY	37
APPENDIX 2: SUMMARIES OF RELEVANT RESEARCH	39
APPENDIX 3: DETAILED DATA ANALYSIS	42
APPENDIX 4: BOP’S RESPONSE TO THE DRAFT AUDIT REPORT	45
APPENDIX 5: OFFICE OF THE INSPECTOR GENERAL ANALYSIS AND SUMMARY OF ACTIONS NECESSARY TO CLOSE THE REPORT	48

AUDIT OF THE FEDERAL BUREAU OF PRISONS' MANAGEMENT OF INMATE PLACEMENTS IN RESIDENTIAL REENTRY CENTERS AND HOME CONFINEMENT

INTRODUCTION

The Federal Bureau of Prisons (BOP) provides reentry programming to help inmates successfully transition back into society once they are released from incarceration. BOP's philosophy is that preparing inmates for successful reentry back into society begins on day one. Therefore, BOP's reentry programming spans the cycle of custody from intake, through incarceration, to release. BOP offers a variety of reentry programming, including work, education and vocational training, drug and mental health treatment, and release preparation. The OIG recently released a report on the BOP's Release Preparation Program for inmates incarcerated in its facilities.² In this report, we look at the use of residential reentry centers (RRC) and home confinement as part of BOP's effort to transition inmates from incarceration back into society.

As a part of its release preparation programming, BOP contracts with RRCs, also known as halfway houses, to provide federal inmates who are nearing release with assistance in transitioning back into society. Inmates placed in RRCs remain in federal custody while serving the remainder of their sentences. At the same time, these inmates are allowed to work, visit with family members, and engage in a limited range of activities. According to BOP, RRCs provide a structured, supervised environment that supports inmates in finding employment and housing, completing necessary programming such as drug abuse treatment, participating in counseling, and strengthening ties to family and friends.

BOP utilizes home confinement as an extension of its release preparation for inmates who it believes do not need the structure provided by RRCs. Home confinement provides an opportunity for inmates to assume an increased level of responsibility, while at the same time providing sufficient restrictions to promote community safety. Inmates placed in home confinement are allowed to work and participate in release programming and other approved activities, but otherwise are required to remain at home. These inmates also remain in federal custody while serving the remainder of their sentences.

Pursuant to the *Second Chance Act of 2007: Community Safety Through Recidivism Prevention* (Second Chance Act), all federal inmates are statutorily eligible for pre-release RRC and home confinement placement.³ The Second Chance Act also required BOP to expand its use of RRCs and home confinement,

² U.S. Department of Justice Office of the Inspector General, *Review of the Federal Bureau of Prisons' Release Preparation Program*, Evaluation and Inspections Report 16-07 (August 2016).

³ 18 U.S.C. §3624 (2014).

and report utilization rates annually. However, BOP is also responsible for ensuring public safety. This means that while all inmates must be considered for RRC and home confinement placement, under the Act, BOP's placement decisions are supposed to be driven by an individual assessment of each inmate. This assessment weighs an inmate's need for reentry services against the risk to the community from housing the inmate in a transitional setting outside of a BOP institution. BOP must also consider what resources are available to an inmate in an RRC and/or home confinement near the inmate's release community.

An inmate's release preparation may consist of RRC placement only, RRC placement followed by transition to home confinement, or placement directly from an institution into home confinement. BOP's inmate eligibility policies for RRCs and home confinement placement are generally the same, although direct home confinement placement is the preferred placement option for low-risk, low-need inmates. Pursuant to federal law, as amended by the Second Chance Act, while inmates can be placed in RRCs for up to 12 months, they can only spend a maximum of 6 months, or 10 percent of the term of imprisonment, whichever is shorter, in home confinement.

BOP's Reentry Services Division located in BOP's headquarters and 24 Residential Reentry Management (RRM) field offices oversee RRC contractors. As of September 2016, BOP reported having 181 RRCs operated by 103 different contractors nationwide. Supervision under home confinement may also be provided by RRC contractors or through the Federal Location Monitoring (FLM) program, which is operated under an interagency agreement with the Administrative Office of the U.S. Courts, Office of Probation and Pretrial Services.⁴

BOP reported RRC and home confinement costs totaling \$368 million in fiscal year (FY) 2014, \$360 million in FY 2015, and \$193 in the first 6 months of FY 2016. According to BOP's population statistics, approximately 6 to 7 percent of inmates were in RRCs or home confinement between October 2013 and March 2016, as shown in Table 1.

⁴ Under the FLM program, the U.S. Probation Office supervises the inmate while in home confinement. Participation is contingent on whether the U.S. Probation Office accepts BOP's home confinement referral.

Table 1
RRC and Home Confinement Utilization

Period	Average Daily Population For BOP as a Whole	Average Daily Population in RRC/Home Confinement⁵	Percentage of BOP Population in RRC/Home Confinement
FY 2014	215,964	12,723	5.9%
FY 2015	206,800	13,813	6.7%
OCT 2015 – MAR 2016	198,339	12,510	6.3%

Source: BOP

Reentry Initiatives and Research

In April 2016, the Department of Justice (DOJ) published the Roadmap to Reentry, which outlines reforms meant to improve reentry outcomes by supporting and strengthening reentry programs and resources at BOP.⁶ This includes the express goal of using RRCs to reduce recidivism.⁷ In order to look at the relationship between RRCs and recidivism, we reviewed the existing body of research on both recidivism and the effectiveness of RRCs in terms of reducing recidivism. Appendix 2 includes a complete list of the studies we reviewed as part of this audit.

We identified five particularly relevant studies that address recidivism that included either federal inmate data or multi-state inmate data that covered more than half of the United States. The studies looked at inmates released from custody at various times between 1987 and 2010. This includes BOP's last comprehensive recidivism study, *Recidivism Among Federal Prisoners Released in 1987*, which was issued in August 1994. We were not able to limit our review to more recent studies because of the limited number of studies available. We summarized the work by looking at the recidivism risk factors in each study and noting commonalities among the studies. Five recidivism risk factors were frequently identified: criminal history, specific offense types, age, sex, and race.

- All five studies identified criminal history as a recidivism risk factor, with the highest risk among inmates with extensive criminal histories.

⁵ This average was calculated using BOP's National Summary of RRC and Home Confinement Census and Utilization reports, which provides month-end population data.

⁶ U.S. Department of Justice, *Roadmap to Reentry, Reducing Recidivism Through Reentry Reforms at the Federal Bureau of Prisons* (April 2016).

⁷ Recidivism is defined as reoffending, which can be measured in more than one way. Common measures of recidivism include re-arrest, re-conviction (either felony conviction or any conviction), and re-incarceration, all of which can either relate to a new offense or a violation of parole or probation imposed as a result of a prior conviction.

- Four of the five studies identified specific offense types as a recidivism risk factor, with the highest risk among inmates who committed robbery or larceny. One of the five studies did not assess recidivism risk based on specific offense types.
- All five studies identified age as a recidivism risk factor, with the highest risk among younger inmates.
- Four of the five studies identified sex as a recidivism risk factor, with the highest risk among male inmates. However, BOP's study of inmates released in 1987 found that recidivism rates were almost the same for males and females.
- All five studies identified race as a recidivism risk factor, with the highest risk among black inmates.

We encountered some challenges when identifying studies that address the effectiveness of RRCs in terms of reducing recidivism. For example, in a compendium outlining significant RRC research, the National Reentry Resource Center (NRRRC), an informational source established by the Council of State Governments in part through a grant from DOJ's Office of Justice Programs, concluded that existing research has not determined or even fully explored the overall impact of RRCs on reentry.⁸ This type of research is further limited by a quasi-experimental research design, wherein comparison groups made up of individuals that were not placed in RRCs have to be matched after the fact to the study groups made up of individuals that were placed in RRCs based on a number of similar offender characteristics, because it is not appropriate to generate a randomized control group and then withhold RRC services from those individuals.

Keeping in mind these limitations, we identified seven particularly relevant studies that address the effectiveness of RRCs in terms of reducing recidivism. The studies were all published in 2005 or more recently. Only one of the seven studies looked at federal inmates, while the remaining six studies looked at inmates from four U.S. states. We were not able to limit our review to federal inmates because of the limited number of studies available. The results of the research related to the impact of RRCs on recidivism were extremely mixed. The one study specifically related to federal inmates found that RRCs did not appear to have an impact on the recidivism outcome of offenders, including when their length of stay in the RRCs was increased. Four of the six state inmate studies found that offenders placed in RRCs experienced an 8 to 15-percent reduction in recidivism. However, one of the four studies found that only parole revocations were reduced for offenders placed in RRCs and that there was no significant decrease in re-arrest, re-conviction, and re-incarceration rates. Further, two of these four studies found that the reductions in recidivism were limited to higher-risk offenders, while lower-risk offenders were

⁸ The National Reentry Resource Council, *Exploring Research Gaps in Residential Reentry Centers: A Compendium Guide of Resources for Reentry Professionals and Policymakers*, 6. Council of State Governments Justice Center, "The National Reentry Resource Center," <https://csjjusticecenter.org/jc/category/reentry/nrrrc/>.

either not impacted or actually experienced a 4-percent increase in recidivism.⁹ Conversely, two of the state inmate studies found that offenders placed in RRCs experienced a 5 to 20-percent increase in recidivism. These two studies also found that RRC placements increased recidivism regardless of the offender's risk level.

BOP's 1994 recidivism study of federal inmates released from BOP custody in 1987 found that, when controlled for other recidivism risk factors, placement in RRCs did not reduce recidivism. However, the study also found that RRC placement increased an inmate's chances of obtaining post-release employment, a factor which was found to reduce recidivism. The study also identified a "modest positive effect" from increasing length of RRC placement. However, we were unable to draw any conclusions about the efficacy of RRCs using this study because of the age of the data.

DOJ identifies RRCs as playing a central role in the federal reentry strategy because they are intended to help stabilize inmates as they readjust to life outside of prison.¹⁰ While the relevant, albeit dated BOP recidivism and RRC research generally found that RRCs did not appear to have a direct impact or a significant impact on recidivism, RRC placement generally was found to be beneficial for high-risk offenders and facilitate an inmate's transition back into society.

Office of the Inspector General Audit Approach

The Office of the Inspector General (OIG) conducted this audit to evaluate BOP's RRC and home confinement: (1) placement policy and practices, (2) capacity planning and management, and (3) strategic planning and performance management. The scope of our audit generally covers inmates released from BOP custody from October 2013 through April 2016. To accomplish our objectives, we interviewed BOP personnel, including officials from the Residential Reentry Management Branch, responsible for managing BOP's RRC and home confinement programs. We evaluated BOP's policies and guidance regarding RRCs and home confinement, as well as the forms and reports used to document and track RRC and home confinement placements and capacity. We also reviewed relevant research on RRCs and recidivism identified above. Finally, we reviewed and analyzed BOP's release, RRC and home confinement, and current population data. Appendix 1 contains a more detailed description of our audit objectives, scope, and methodology.

⁹ The two studies that differentiated outcomes by high and low-risk did not define high and low-risk using all of the same factors, but common high-risk factors included being young, a history of substance abuse, employment problems, and an extensive criminal history.

¹⁰ DOJ, *Roadmap to Reentry*, 5.

FINDINGS AND RECOMMENDATIONS

We found that contrary to its policy, guidance, and the relevant research, BOP is placing the great majority of eligible inmates into RRCs regardless of inmate risk for recidivism or need for transitional services, unless the inmate is deemed not suitable for placement because the inmate poses a significant threat to the community. As a result, high-risk, high-need inmates are less likely to be placed in an RRC and/or home confinement. However, these inmates will be released upon completion of their sentence and BOP must weigh the immediate risk of placing high-risk inmates in RRCs and/or home confinement against the risk of releasing them back into society directly from BOP institutions without transitional programming. Conversely, most low-risk, low-need inmates are placed in RRCs, which may negatively impact these inmates, and result in fewer available RRC resources for high-risk, high-need inmates. We also found a strong indication that BOP is underutilizing direct home confinement placement as an alternative to transitioning low-risk, low-need inmates back into society through RRCs. Additionally, our analysis indicates that in an effort to increase RRC capacity, BOP may be transitioning inmates from RRCs to home confinement too early, as evidenced by the number of inmates who were placed back into RRCs for violating home confinement program rules. In our judgment, this practice significantly impacts RRC and, to a greater extent, home confinement capacity. Finally, we found that BOP does not have performance measures that evaluate the efficacy of its RRC and home confinement programming, nor does BOP have procedures in place that adequately assess the quality of services provided by RRC contractors.

BOP's RRC and Home Confinement Placement Policy and Practices

We assessed BOP's RRC and home confinement placement policies and guidance, as well as BOP's actual placement practices to determine whether or not placement decisions are based on inmates with the greatest need for transitional services. As noted previously, the relevant recidivism and RRC research generally found that RRCs did not appear to have a direct impact or a significant impact on recidivism. However, RRC placement was found to have a positive impact on high-risk offenders and facilitate an inmate's transition back into society. As a result, incorporating recidivism risk factors into the RRC and home confinement placement policy is useful for identifying inmate needs. We found that while BOP's RRC and home confinement policies and guidance for making placement decisions appear reasonable, BOP does not appear to be making placement decisions based on inmate risk for recidivism or need for transitional services as required by its policy and supported by the relevant research.

RRC Placement Policies and Guidance

As required by the Second Chance Act, BOP policy states that all inmates must be assessed for possible RRC and home confinement placement and that placement decisions must be based on an individual assessment of each inmate. Accordingly, BOP requires that 17 to 19 months prior to an inmate's projected release date, the unit team, which at a minimum consists of the inmate's unit manager, case manager, and counselor, assess the inmate for pre-release RRC and home confinement placement.¹¹ In order to determine if the inmate is suitable for placement and the length of placement, Title 18, Crimes and Criminal Procedure, requires BOP staff to consider the following five factors: (1) the resources of the facility contemplated; (2) the nature and circumstances of the offense; (3) the history and characteristics of the inmate; (4) any statement by the court concerning the purposes for which the sentence to imprisonment was determined to be warranted, or recommending a type of penal or correctional facility as appropriate; and (5) any pertinent policy statement by the U.S. Sentencing Commission (USSC).¹²

According to BOP's most recent RRC and home confinement guidance, which is outlined in a May 2013 memorandum, RRC resources are limited and BOP should focus these resources on inmates with the greatest need and the highest risk of recidivism. The guidance identifies the individual inmate assessment as the primary means by which BOP determines inmate placement in RRCs and home confinement. While all inmates must be assessed for RRC placement, according to BOP policy, inmates that have post-release detainers (i.e., the inmate will be remanded into the custody of a federal, state, or local government agency upon release) and inmates serving sentences of 6 months or less should ordinarily not be placed in RRCs. The assessment weighs an inmate's need for residential reentry services against the risk to the community, as shown in Table 2.

¹¹ Officials from BOP institutions stated that if an inmate's sentence is less than 17 months, the review is completed at intake.

¹² 18 U.S.C. §3621(b).

Table 2
Factors to Consider When Placing an Inmate in an RRC

RRC Placement May Be Appropriate	RRC Placement May Be Inappropriate
<ul style="list-style-type: none"> • High-need (for example, no recent employment, no GED, and poor family ties) • High-risk for recidivism • Demonstrated successful participation in or completion of programming opportunities while incarcerated • Residential Drug Abuse Program (RDAP) graduates who complete the institution based portion of the RDAP • Manageable medical and mental health needs • Community-based treatment available in the vicinity of the placement for inmates with drug, mental health, or sex offender treatment needs 	<ul style="list-style-type: none"> • Low-need and low-risk • Risk deemed too high, pose a significant threat to the community • Unresolved pending charges, or detainers, which will likely lead to arrest, conviction, or confinement • Ordinarily, serving 6 months or less • Decline to participate • Refuse to participate in various programming, including the Inmate Financial Responsibility Program, required Drug Abuse Education Course, or the Institution Release Preparation Program • Assigned a "Sex Offender" Public Safety Factor • Assigned a "Deportable Alien" Public Safety Factor • Medical and mental health needs cannot be managed in the community, require inpatient medical or mental health treatment • Recent, serious, or chronic misconduct • Previously failed an RRC program • History of escape

Source: BOP's RRC and home confinement policies and guidance

If the unit team recommends that the inmate be placed in an RRC and the institution's Warden approves the recommendation, a referral packet is forwarded to one of 24 RRM offices, depending on where the inmate will be released.¹³ The RRM office reviews the referral and considers what resources are available, including bed space and community services. RRM offices can modify referrals; however, the change must be approved by the referring institution's Warden. RRM staff cannot unilaterally deny referrals or delay placement dates unless there are no available beds within a reasonable distance. The RRM office then forwards the referral packet to the selected RRC contractor and works with the RRC contractor to approve or modify the unit team's proposed placement date.

¹³ Inmates are released in their sentencing district, which may not be near where they live, unless BOP requests and receives a relocation acceptance letter from the appropriate U.S. Probation Office.

BOP's current guidance also emphasizes the importance of transitioning eligible inmates placed in RRCs into home confinement. An inmate placed in an RRC is eligible to transition into home confinement if the inmate has a place to live and has demonstrated that he or she no longer requires the level of accountability and services RRCs provide. Pursuant to federal law, home confinement placement is limited to 10 percent of the inmate's sentence and cannot exceed 6 months. According to BOP Reentry Services Division and RRM staff, inmates are transferred from RRCs to home confinement as soon as possible. This practice is supported by BOP guidance, which identifies transitioning inmates from RRCs to home confinement as a way to address RRC capacity issues, and ensure more inmates are afforded RRC services. As such, RRM's are required to assess inmates in RRCs for home confinement placement every 2 weeks and ensure that RRC staff have documented an appropriate plan of action with target dates for home confinement placement. However, the RRM makes the final decision and authorizes inmate transfers from RRCs to home confinement.

Additionally, BOP's 2013 RRC and home confinement guidance states that home confinement placement, rather than placement in RRCs, is the preferred pre-release option for low-need and low-risk inmates. The direct home confinement referral process is the same as the RRC referral process. However, regardless of the individual inmate's need or risk, home confinement placement is contingent on the availability of an appropriate release residence, as shown in Table 3.

Table 3

Factors to Consider When Placing an Inmate in Home Confinement

Home Confinement Placement May Be Appropriate	Home Confinement Placement May Be Inappropriate
<ul style="list-style-type: none"> • Low and minimum security inmates should receive special consideration • Low-need (for example, recent employment, GED, strong family ties) • Low-risk for recidivism • Little to no need for services at an RRC • Excellent institutional adjustment • No recent, major disciplinary issues • No public safety factors • Medical and mental health needs that can be met in the community • Appropriate release residence, which includes: <ul style="list-style-type: none"> ○ Positive environment ○ No criminal activity ○ Less than 100 miles from RRC providing monitoring services (where applicable) ○ Adults sharing residence are aware of, and not opposed to, the inmate participating in the program • Inmates who currently reside in an RRC and are eligible for transfer • Secured employment is <i>not</i> required. 	<ul style="list-style-type: none"> • See items listed under 'RRC Placement May Be Inappropriate' with the exception of being low-need and low-risk • Release residence is not appropriate

Source: BOP's RRC and home confinement policies and guidance

BOP's placement policy and guidance outlined above weighs an inmate's need for RRC and home confinement placement against the risk to the community. BOP uses the inmate security level, which is assessed using its Custody Classification form, as the primary instrument to predict risk. We found that BOP incorporates four of the five commonly cited recidivism risk factors into its Custody Classification form, including criminal history, offense type, age, and the sex of the inmate.¹⁴ According to BOP policy, inmate security levels are reviewed at least annually with the goal of housing an inmate at an institution that is commensurate with the inmate's risk and security level.

¹⁴ Race is the other consistently identified recidivism risk factor. However, BOP properly does not incorporate race into its assessment of inmate security levels.

BOP staff identified inmate security levels as one of many tools used to assist with RRC and home confinement placement decisions. The inmate security level should also be used to help determine whether an inmate is placed in an RRC or directly into home confinement. BOP guidance instructs staff to give special consideration to low and minimum security inmates for direct home confinement placements. This policy is supported by the research that found low-risk inmates do not benefit from and may in fact be harmed by RRC placement because, among other things, of their exposure to high-risk offenders. However, BOP policy requires that placement decisions cannot be reduced solely to classification scores or categorization; rather staff must use their professional judgment for each individual placement.

We assessed BOP's RRC and home confinement placement policies and guidance to determine whether they are designed to identify individual inmate risk, as well as need for transitional services. As noted previously, the relevant recidivism and RRC research for federal inmates found that RRCs did not appear to have a direct or significant impact on the recidivism. However, RRC placement was found to have a positive impact on high-risk offenders and facilitate an inmate's transition back into society. As a result, incorporating recidivism risk factors into the RRC and home confinement placement policy and guidance is useful for identifying an inmate's need for transitional services. We found that BOP's RRC and home confinement placement policies and guidance, which are designed to identify the risks and needs of an individual inmate while simultaneously weighing that against the safety of the community and available resources, appear to employ a reasonable approach. However, as detailed below, while we found BOP's policy was reasonable, we found that its implementation was lacking in a number of respects.

Summary of Release Data

We analyzed BOP's SENTRY data for the 193,381 inmates released from BOP custody from October 2013 through April 23, 2016, either directly from BOP institutions, RRCs, or home confinement, to identify the percentage of inmates who were transitioned back into the community from an RRC and/or home confinement.¹⁵ As discussed previously, BOP policy states that inmates with post-release detainers and inmates serving sentences of 6 months or less should ordinarily not be placed in RRCs. Based on our analysis, we determined that 94,252 inmates (49 percent) were eligible for placement in an RRC or home confinement, of which 74,100 (79 percent) were transitioned into the community through an RRC and/or home confinement - 75 percent were initially placed in RRCs and only 4 percent went directly into home confinement. The remaining 20,152 inmates (21 percent) were released into the community directly from a BOP

¹⁵ SENTRY is BOP's primary mission support database, which collects, maintains, and tracks critical inmate information, including inmate location and release data.

institution.¹⁶ The remaining inmates were excluded from our analysis of RCC and home confinement placement because they had detainers or served sentences of 6 months or less and were not placed in a transitional program; were released from administrative actions, jails, long-term boarder contract facilities, and state concurrencies; or the inmate information provided was incomplete, as shown in Table 4.¹⁷

Table 4
Analysis of BOP Release Data¹⁸

Release Type	No of Records	Percent of All Records	Percent of Subtotal
RRC or Home Confinement	74,100	38.32%	78.62%
Directly From BOP Institution	20,152	10.42%	21.38%
<i>Eligible For Transitional Services</i>	94,252	48.74%	100.00%
Detainer	80,438	41.60%	88.00%
Sentence Length Less than 6 Months	10,971	5.67%	12.00%
<i>Not Eligible For Transitional Services</i>	91,409	47.27%	100.00%
Not included in Analysis	7,715	3.99%	99.94%
Deleted from Universe, incomplete data	5	0.00%	0.06%
<i>Excluded From Analysis</i>	7,720	3.99%	100.00%
Total	193,381	100.00%	

Source: OIG Analysis of BOP's SENTRY data for inmates released from October 2013 through April 23, 2016.

The number of inmates placed in RRCs or home confinement includes 2,532 inmates with sentences of 6 months or less, as well as 77 inmates with detainers. BOP policy states that inmates serving sentences of 6 months or less and inmates with post-release detainers should ordinarily not be placed in RRCs but

¹⁶ We were unable to determine the number of inmates that were not eligible for placement because they failed to meet their financial obligations or did not qualify due to their commitment status because that information was not included in the SENTRY data provided by BOP. However, in our judgment the inclusion of these inmates would not significantly impact the results of our analysis.

¹⁷ Administrative action is a SENTRY code that shows that an administrative change was made to an inmate's record and does not indicate the type of facility from which the inmate was released; as a result, we could not use these records for our analysis. Inmates shown as being released from jail were in a contracted jail facility, generally for a short period of time. Inmates shown as being released from long-term boarding were inmates that could not be housed in a BOP facility; rather, the inmate was housed in a contracted state facility. Inmates shown as having a state concurrency were serving a concurrent state sentence in a state prison and, therefore, were not in BOP custody.

¹⁸ Throughout this report, differences in the total amounts are due to rounding. The sum of individual numbers prior to rounding may differ from the sum of the individual numbers rounded.

does not preclude these inmates from being placed. Therefore, we included these inmates in our analysis of those eligible for RRC or home confinement placement.

Analysis of Inmates Eligible for RRC or Home Confinement Placement

To assess whether or not BOP's RRC and home confinement placement practices were in compliance with its policy and guidance, we further analyzed BOP's Sentry Data for the universe of 94,252 inmates who were eligible for placement in RRCs or home confinement based on recidivism risk factors. Our analysis included the risk factors that research indicates have the most significant impact on recidivism, which are the inmates' criminal history, offense type, age when released from incarceration, sex, as well as the length of incarceration. As discussed in the following sections, we found that BOP does not appear to be making RRC and home confinement placement decisions based on inmate risk for recidivism or need for transitional services, as required by its policy and guidance. Rather, our analysis indicates that BOP is placing the great majority of eligible inmates into an RRC regardless of inmate risk for recidivism or need, unless the inmate is deemed not suitable for placement because the inmate poses a significant threat to the community. Our finding is consistent with statements made by BOP officials indicating it is an organizational belief that all inmates benefit from RRC placement regardless of inmate risk or need. However, as we discuss in more detail, this practice may have a significant negative impact on RRC capacity, as well as certain types of inmates.

BOP Placement Practices by Inmate Security Level

According to BOP's placement policy and guidance, inmates with a high-risk for recidivism and high-need for transitional services should be considered for RRC placement. Whereas, inmates with low-risk of recidivism should not necessarily be considered for RRC placement; rather, placement directly into home confinement is generally considered more appropriate for these types of inmates. As stated previously, BOP uses its Custody Classification form as the primary instrument to predict risk. The purpose of custody classification is to ensure that inmates are placed in the most appropriate security level institution that also meets their program needs and is consistent with BOP's mission to protect society. As stated previously, the BOP incorporates the following four recidivism risk factors into its Custody Classification form.

- Criminal history. The higher the criminal history score, the higher the base score.
- Offense Type. The more severe the current offense, the higher the base score.
- Age. The younger the inmate, the higher the base score. The base score for inmates who are 55 and over does not increase, while the base score for inmates who are 24 or younger increases the most.
- Sex. The form identifies public safety factors with specific consideration for whether the inmate is a male or female.

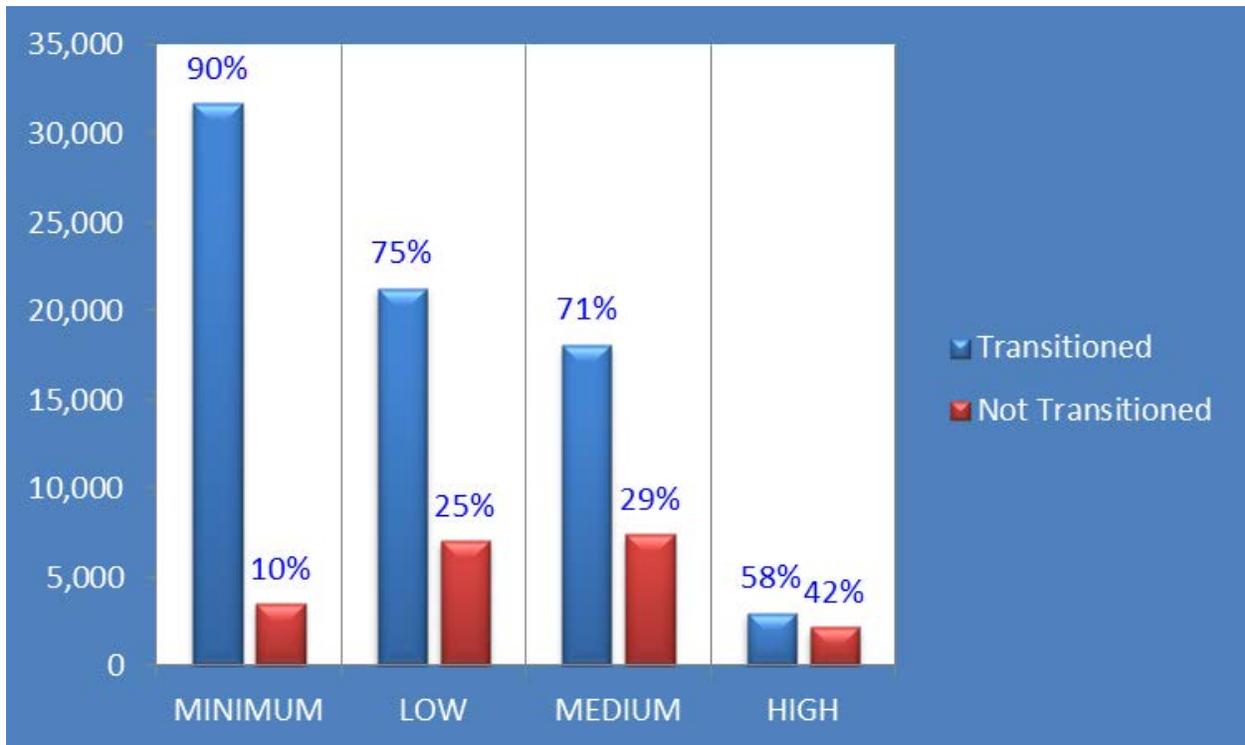
A higher base score translates into a higher recommended inmate security level. In addition to the recidivism risk factors identified above, the score takes into account a number of other factors that the relevant research, to varying degrees, identified as playing a role in recidivism. This includes an inmate's education level, whether or not the inmate has experienced substance abuse, and the inmate's behavior during incarceration.

Pursuant to BOP policy, an inmate's security level is routinely reviewed and may change during incarceration for various reasons, including the inmate's behavior while incarcerated. For the inmates released from BOP custody during the scope of our audit, we compared inmate intake security levels to exit security levels. Our analysis indicated that BOP is reviewing inmate security levels during incarceration and changing the inmates' security designations. Specifically, we found that the number of inmates designated as minimum and low security at exit increased by 16 percent and 7 percent, respectively, while the number of inmates designated as medium and high security at exit decreased by 6 percent and 50 percent, respectively.

In our judgment, the inmate's security level provides a good indication of inmate recidivism risk and need for RRC or home confinement services and placement. While both the inmate intake and exit security level incorporate recidivism risk factors, we believe that the inmate exit security level is a more useful tool for analyzing BOP's placement practices because it incorporates the inmate's behavior during incarceration. As a result, we analyzed the universe of 94,252 inmates who were eligible for RRC and/or home confinement placement using the inmate exit security level. Based on our analysis, we found a strong indication that BOP is not making RRC and home confinement placement decisions based on inmate risk for recidivism or need. Rather, we found that BOP is placing the great majority of eligible inmates into an RRC regardless of inmate risk for recidivism or need for transitional services, unless the inmate is deemed not suitable for placement because the inmate poses a significant threat to the community. Specifically, we found that 90 percent of minimum security inmates and 75 percent of low security inmates were placed in RRCs and/or home confinement. Conversely, only 58 percent of high security inmates were transitioned into the community through an RRC and/or home confinement, while 42 percent were released into the community directly from a BOP institution, as shown in Figure 1.¹⁹

¹⁹ During the scope of our audit, 11 high security inmates were placed directly into home confinement.

Figure 1
BOP RRC and/or Home Confinement Placement Analysis
Based on Exit Security Level



Source: OIG Analysis of BOP's SENTRY data for inmates released from October 2013 through April 23, 2016. Detailed numbers related to our analysis can be found in Appendix 3, Table 5.

As shown above, based on exit security level, our analysis found that the inmates with the highest risk of recidivism and highest need are much less likely to be placed in an RRC and/or home confinement. As stated previously, while RRC and home confinement placement can facilitate an inmate's transition back into society, BOP is still responsible for ensuring public safety. As a result, BOP placement policy and guidance weigh an inmate's need for RRC and home confinement placement against the risk to the community. Therefore, the fact that only 58 percent of inmates designated as high security at exit were placed in an RRC and/or home confinement may be a result of the fact that many of the high security inmates were considered a public safety risk. Nonetheless, at the time they would be placed in an RRC, these inmates are within on average 4 months of being released into the community upon completion of their sentence. Therefore, BOP must weigh the immediate risk of placing high-risk inmates in RRCs and/or home confinement against the risk of releasing them back into society directly from BOP institutions without transitional programming. To this effect, BOP issued guidance in 2013 stating that when making placement decisions, staff should continue to follow its policy of weighing an inmate's need for RRC and home confinement placement against the risk to the community. The BOP guidance also stated that staff should also consider whether receiving reentry services might mitigate public safety concerns in the long run. Therefore, for high-risk inmates

who may initially appear to be inappropriate for RRC placement, BOP requires staff to thoroughly weigh the potential risk of release directly from a BOP institution versus release through an RRC, which may result in a determination that it is, in fact, in the best interest of public safety to place the inmate in an RRC.²⁰ Further, BOP guidance states that for inmates who are truly not suitable for placement in an RRC prior to release, BOP has the option of contacting the U.S. Probation Office to request a public law placement, wherein the judge places the inmate in an RRC as a condition of their supervised release. BOP officials at the Florence Federal Correctional Complex confirmed that this is an option they pursue for inmates that are deemed to be unsuitable for RRC placement prior to release from BOP custody.

Our analysis also found that contrary to BOP's policy and guidance, and the related recidivism and RRC research, inmates with the lowest risk for recidivism and lowest need are far more likely to be transitioned through an RRC and/or home confinement. Pursuant to BOP policy and guidance, inmates who are low-risk for recidivism and low-need should be placed directly into home confinement. BOP guidance, as well as the relevant research cited in its guidance, also indicates that RRC placement can have a negative impact on low-risk, low-need inmates. BOP's extremely low utilization of direct home confinement placement is particularly notable given that only 4 percent (4,120) of all 94,252 eligible inmates were placed directly into home confinement, despite the fact that 63,580 inmates eligible for placement were designated as minimum or low security.²¹ Similarly, only 6 percent (3,984) of eligible minimum and low security inmates were placed directly into home confinement. This analysis provides a strong indication that BOP is placing inmates into RRCs regardless of risk for recidivism and need for transitional services, and underutilizing direct home confinement placement as an alternative for transitioning low-risk, low-need inmates back into society. This practice also may negatively impact low-risk inmates who are placed in RRCs rather than directly into home confinement, given that BOP guidance, as well as the research we reviewed, found that low-risk inmates do not benefit from and may in fact be harmed by RRC placement because, among other things, of their exposure to high-risk offenders in those facilities. The underutilization of direct home confinement placement also has a significant impact on RRC capacity, which may result in fewer resources for high-

²⁰ BOP data did not allow us to determine the number of inmates in Special Housing Units or SHUs (i.e., inmates that are segregated from the general population at BOP institutions) that BOP released during our review period directly from a SHU into the community as opposed to being placed first in an RRC or home confinement. However, beginning in March 2015 (which was in the middle of our review period), BOP executive staff began reviewing on a quarterly basis rosters of SHU inmates that were released directly into the community by type of institution.

²¹ The 4,120 inmates placed directly into home confinement placements includes 1,977 inmates that were placed in an RRC for 10 days or less. According to BOP Central Office officials, inmates placed in RRCs for 10 days or less before transitioning to home confinement are considered direct placements. These inmates are placed in RRCs for a short period of time so that the home confinement residence can be assessed by the RRC contractor that will be monitoring the inmate. Additionally, BOP reports direct home confinement placements as a percentage of the total inmates placed in RRCs and/or home confinement, which is 6 percent of the 74,100 inmates placed in RRCs and/or home confinement.

risk, high-need inmates.²² Therefore, we recommend that BOP reevaluate its RRC and home confinement placement practices, particularly related to minimum and low security inmates, to ensure that they are consistent with BOP's own policies and the relevant research.

We discussed the results of our analysis with BOP Central Office officials, who stated that there are several factors that may limit BOP's ability to utilize direct home confinement placement for low-risk, low-need inmates. BOP cannot place an inmate directly into home confinement if the inmate does not have a suitable release residence, even if the inmate is otherwise considered a good candidate for direct home confinement placement. Additionally, pursuant to federal law, home confinement placement is limited to 10 percent of the inmate's sentence and cannot exceed 6 months. Conversely, RRC placement is not limited by the length of the inmate's sentence and inmates can be placed in RRCs for up to 12 months. BOP officials stated that inmates are aware of the statutory limits on the length of time they can be placed in home confinement. As a result, many inmates request placement in an RRC prior to transitioning to home confinement, which would potentially allow the inmate to serve a longer portion of their sentence outside of a BOP institution.

Nonetheless, in our judgment BOP should not place low-risk, low-need inmates in RRCs when such placement may be inappropriate. As discussed later in our report, given that the research shows that RRCs are not beneficial and may actually be harmful for some inmates, BOP should pursue alternatives to RRC placement, including potentially increasing its home confinement capacity, to accommodate placement of low-risk, low-need inmates with relatively short sentences.

We also analyzed BOP's Sentry data for the universe of 94,252 inmates who were eligible for placement based on several specific risk factors, as well as length of incarceration. However, as discussed in the following sections, we did not find any correlation between BOP's placement practices and specific recidivism risk factors, which is contrary to BOP's placement policy and guidance. Rather, we found that based on specific risk factors and length of incarceration, high-risk, high-need inmates were actually less likely to be placed in RRCs and/or home confinement.

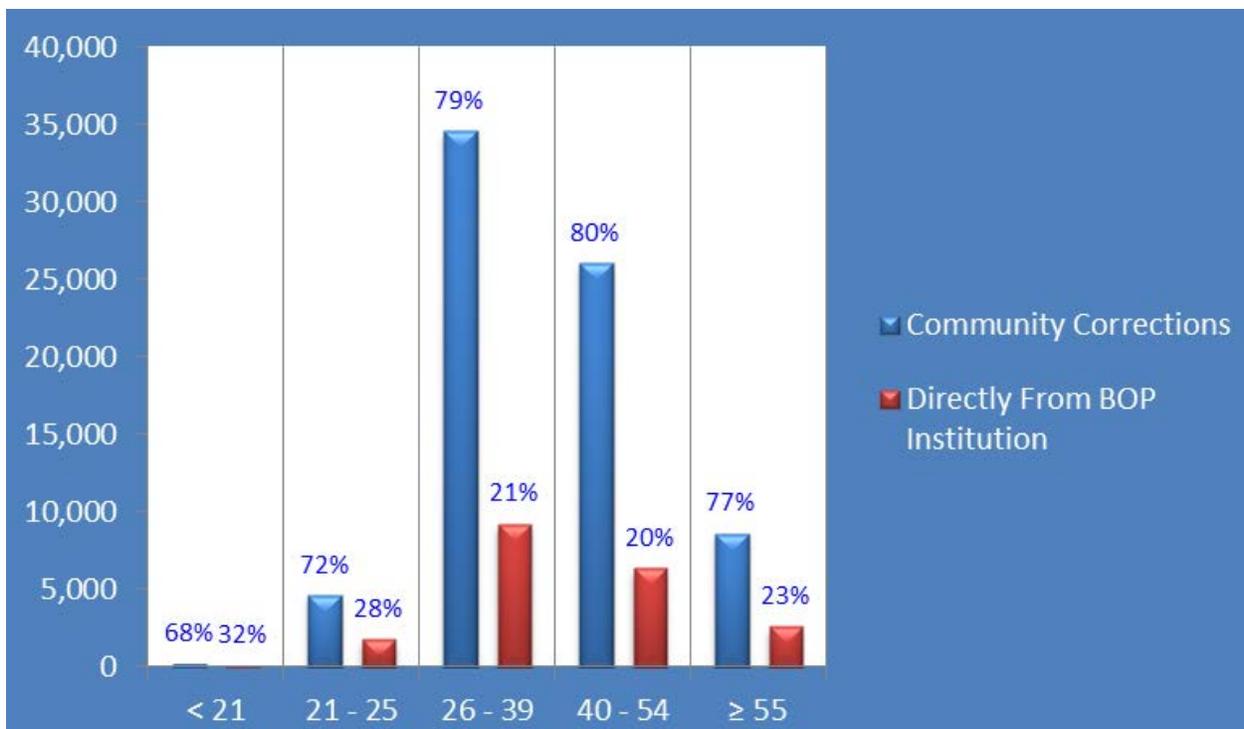
BOP Placement Practices by Inmate Age at Release

Recidivism research has consistently found that inmates under the age of 21 at time of release from incarceration are at the greatest risk for recidivism, while

²² As identified in the OIG's 2015 Top Management and Performance Challenges Facing DOJ, although overall overcrowding decreased from 33 percent in June 2014 to 26 percent in August 2015, overcrowding at high security institutions has actually increased from 42 percent to 51 percent. Therefore, although we did not assess institutional capacity as a part of this audit, BOP's practice of placing low-risk, low-need inmates in RRCs rather than directly into home confinement may also impact overcrowding at its high security institutions.

inmates who were 40 or older were at the lowest risk for recidivism. While dated, BOP's comprehensive 1994 recidivism study similarly found that inmates who were 25 or younger at time of release from incarceration are at the greatest risk for recidivism, while inmates who were 55 or older are at the lowest risk for recidivism.²³ We analyzed the universe of 94,252 inmates released from BOP custody during the scope of our audit who were eligible for RRC and/or home confinement placement using the inmate age at release. Based on our analysis, we found that younger inmates with the highest risk for recidivism were less likely to be placed in RRCs or home confinement than older inmates with the lowest risk for recidivism. Specifically, we found that only 68 percent of the relatively small number of inmates under the age of 21 at time of release and 72 percent of inmates who were 21 to 25 at time of release were transitioned into the community through an RRC and/or home confinement. Conversely, 80 percent of inmates who were 40 to 54 at time of release and 77 percent of inmates who were 55 or older at time of release were placed in RRC and/or home confinement, as shown in Figure 2.

Figure 2
BOP RRC and/or Home Confinement Placement Analysis
Based on Inmate Age



Source: OIG Analysis of BOP's SENTRY data for inmates released from October 2013 through April 23, 2016. Detailed numbers related to our analysis can be found in Appendix 3, Table 6.

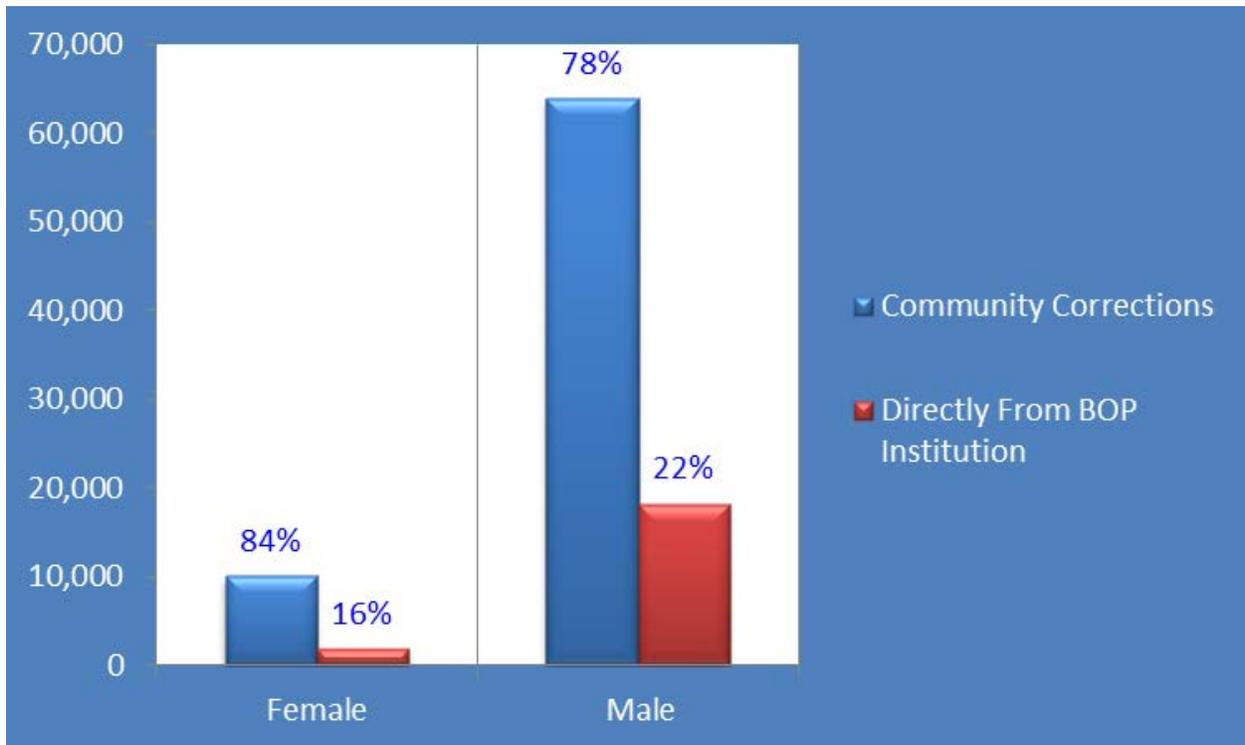
²³ The recidivism research we reviewed consistently found that younger inmates were more likely to recidivate than older inmates; the differences between the various studies are primarily due to the fact that different age ranges were used to conduct the research.

While younger inmates were less likely to be placed in RRCs or home confinement, based on the length of incarceration, there is some indication that these inmates were less likely to need transitional services. Specifically, the average length of incarceration for inmates under the age of 21 at time of release was only about 1 year and for inmates who were 21 to 25 at time of release, the average length of incarceration was less than 2 years. We discussed the results of our analysis with BOP Central Office officials, who stated that the shorter length of incarceration for the younger inmates was most likely the reason fewer of these inmates were placed in RRCs and/or home confinement.

BOP Placement Practices by Inmate Sex

Recidivism research has consistently identified inmate sex as a recidivism risk factor, with the highest risk among male inmates. As a result, we analyzed the universe of 94,252 inmates released during the scope of our audit that were eligible for RRC or home confinement placement using the sex of the inmate. Based on our analysis, we found that male inmates with the highest risk for recidivism were, in fact, less likely to be placed in RRCs or home confinement than female inmates. Specifically, we found that, while there are many more male than female inmates, 84 percent of eligible female inmates as opposed to 78 percent of eligible male inmates were transitioned into the community through an RRC and/or home confinement, as shown in Figure 3.

Figure 3
BOP RRC and/or Home Confinement Placement Analysis
Based on Inmate Sex



Source: OIG Analysis of BOP's SENTRY data for inmates released from October 2013 through April 23, 2016. Detailed numbers related to our analysis can be found in Appendix 3, Table 7.

We discussed the results of our analysis with BOP Central Office officials, who stated that female inmates are more likely to be designated as minimum or low security inmates than male inmates. As a result, female inmates are less likely to pose a risk to the community, which would preclude them from RRC and/or home confinement placement. Additionally, BOP officials stated that while the RRC capacity for female inmates is much less than that for male inmates, there is also less demand because the female inmate population is significantly smaller than the male inmate population.

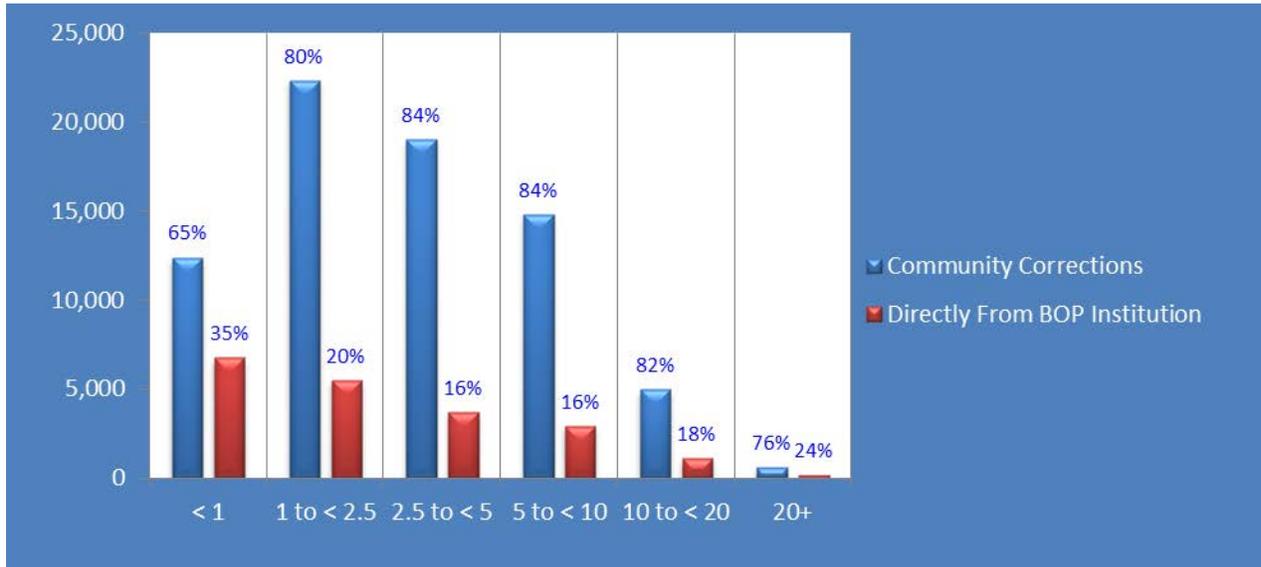
BOP Placement Practices for Native American Inmates

Although race is frequently cited as a recidivism risk factor, BOP does not use race in determining placement decisions, nor do we think using an inmate's race to make placement decisions is appropriate. However, we did find in our review of the data that only 61 percent of Native American inmates were placed in a RRC and/or home confinement. This is noticeably lower than the 79 percent placement rate for the BOP release population as a whole. As a result, we followed up with officials from BOP's Central Office who stated that while BOP continues to refer as many inmates as possible for placement into RRCs to include Native Americans, many RRCs are not located near reservations.

Length of Incarceration

BOP guidance indicates that the longer an inmate is incarcerated, the more likely it is that the inmate will need to transition back into the community through an RRC and/or home confinement. Although it was not specifically stated in BOP's policy or the recidivism research we reviewed, the presumption apparently is that the longer an inmate is incarcerated, the harder it is for the inmate to reintegrate back into society. However, based on our analysis of the release data, we did not find any indication of a significant correlation between the length of incarceration and the percentage of inmates placed in RRCs and/or home confinement, as shown in Figure 4.

Figure 4
BOP RRC and/or Home Confinement Placement Analysis
Based on Length of Incarceration



Source: OIG Analysis of BOP's SENTRY data for inmates released from October 2013 through April 23, 2016. Detailed numbers related to our analysis can be found in Appendix 3, Table 8.

As shown above, inmates who were incarcerated for less than 1 year were the least likely (65 percent) to be placed in RRCs and/or home confinement. While inmates with shorter sentences may be less likely to need transitional services, we do not believe this analysis indicates that BOP's placement decisions were based on need since 67 percent of these inmates were designated as minimum or low security. Conversely, while a smaller group, inmates incarcerated for more than 20 years were less likely to be placed in a RRC and/or home confinement than most inmates who were incarcerated for shorter periods of time.

We discussed the results of our analysis with BOP Central Office officials, who stated that inmates who are incarcerated for long periods of time are generally older when released from incarceration and may have health issues that would

preclude them from being placed in an RRC because the RRC cannot meet their medical needs. Additionally, while inmates incarcerated for long periods of time may be older at the time of release and, according to the related research, less likely to recidivate, they also may be more likely to pose a threat to public safety. Further, given the severity of the crimes that resulted in their longer periods of incarceration and the resulting enhanced risk of recidivism for such serious offenders, these inmates may be unsuitable for RRC placement.

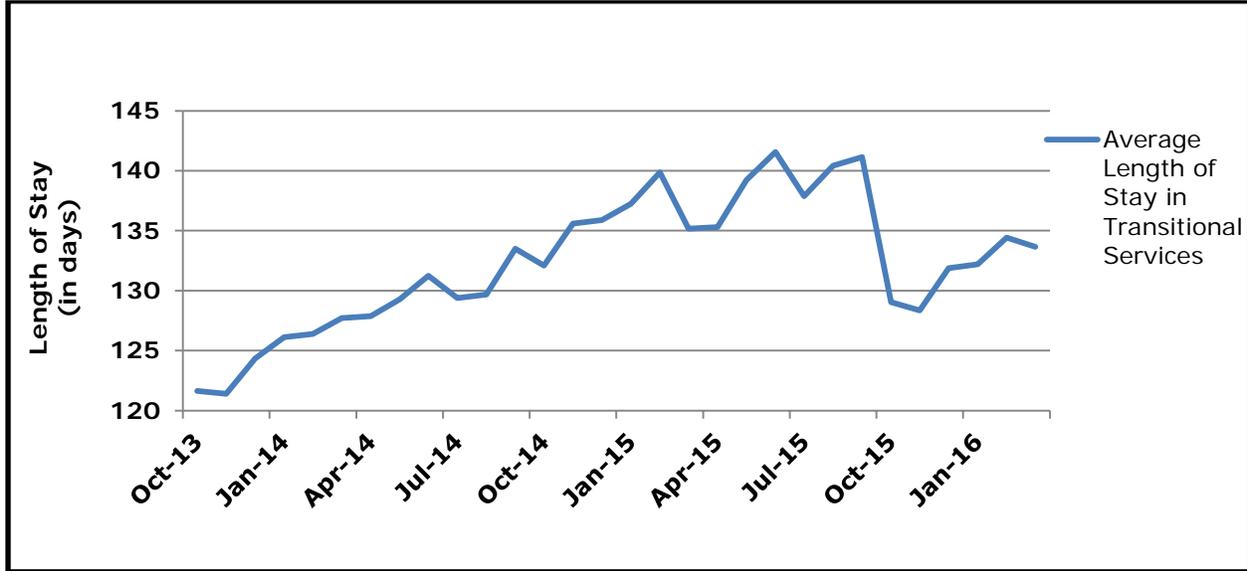
Summary of RRC and Home Confinement Data

We also analyzed the BOP Sentry data related to the inmates who were in an RRC and/or home confinement from October 2013 through April 23, 2016. Our analysis of the RRC and home confinement data excludes 10,327 inmates who were still in transitional services as of April 23, 2016, when the data was provided. Of the inmates that were placed in transitional services, we found that 51 percent of inmates were placed in RRCs only, 44 percent were placed in RRCs and then transitioned into home confinement, and only 5 percent were placed directly into home confinement. We also found that on average inmates were placed in RRCs and home confinement for a total of about 4.3 months (132 days). The average length of time inmates were placed in RRCs was about 3 months (95 days), while the average time in home confinement was about 2.6 months (81 days).²⁴ The average total length of stay in RRCs and home confinement during the period covered by our audit ranged from 4 months (121 days) to 4.7 months (142 days), as shown in Figure 5.

²⁴ The average total transitional time does not equal the sum of the average RRC and home confinement placements because not all inmates are placed in both RRCs and home confinement.

Figure 5

Average Length of Stay in RRCs and Home Confinement



Source: OIG Analysis of BOP's SENTRY data for inmates in RRCs or home confinement from October 2013 through April 23, 2016.

As stated previously, our analysis indicates that BOP was underutilizing direct home confinement placement for inmates with low-risk for recidivism and low-need for RRC placement. However, we also found that it appears that BOP may be transitioning inmates from RRCs to home confinement too early. According to RRM field office officials, once an inmate is placed in an RRC, BOP aggressively pursues transitioning the inmate to home confinement as soon as possible. BOP's guidance specifically states that this practice is used to increase RRC capacity so that more inmates can be placed in RRCs. However, based on our analysis of the RRC and home confinement data, we found a significant failure rate, 17 percent, among the 39,020 inmates who were placed in home confinement (defining failure for this purpose as inmates being placed back into RRCs for violating home confinement program rules).

The home confinement failure rate includes minor offenses, such as inmates who could not be reached during an accountability check and had to return to the RRC for a few days, as well as inmates who experienced more significant issues during home confinement, such as an arrest, a failed drug test, or failure to complete reentry programming and who were placed back in the RRC for a longer period of time. For the purposes of this audit, we considered both minor offenses and more significant offenses as failures in home confinement. However, we further analyzed the inmates who failed in home confinement based on the length of time they were placed back in the RRCs. We found that of the 6,558 inmates who failed in home confinement, 1,538 (23 percent) returned to the RRC for a few days, most likely because of a minor offense, while 5,020 inmates (77 percent) returned to the RRC for a longer period of time, indicating this may be a result of a more significant offense.

Even more concerning is the fact that of the 6,558 inmates who failed at some point during home confinement, we found that 785 (12 percent) were returned to the RRC multiple times, and thus were transferred back and forth between the RRC and home confinement. Of the 785 inmates who failed in home confinement more than once, for 10 percent of these inmates it appears that they were returned to the RRC for multiple minor offenses, while 90 percent appear to have returned to the RRC for one or more significant offenses.

These findings confirm our belief that the overall failure rate we noted was significant, and that, in an effort to increase RRC capacity, BOP may be transitioning inmates from RRCs to home confinement too early. Therefore, we recommend that BOP reevaluate its practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.

BOP's RRC and Home Confinement Capacity Planning and Management

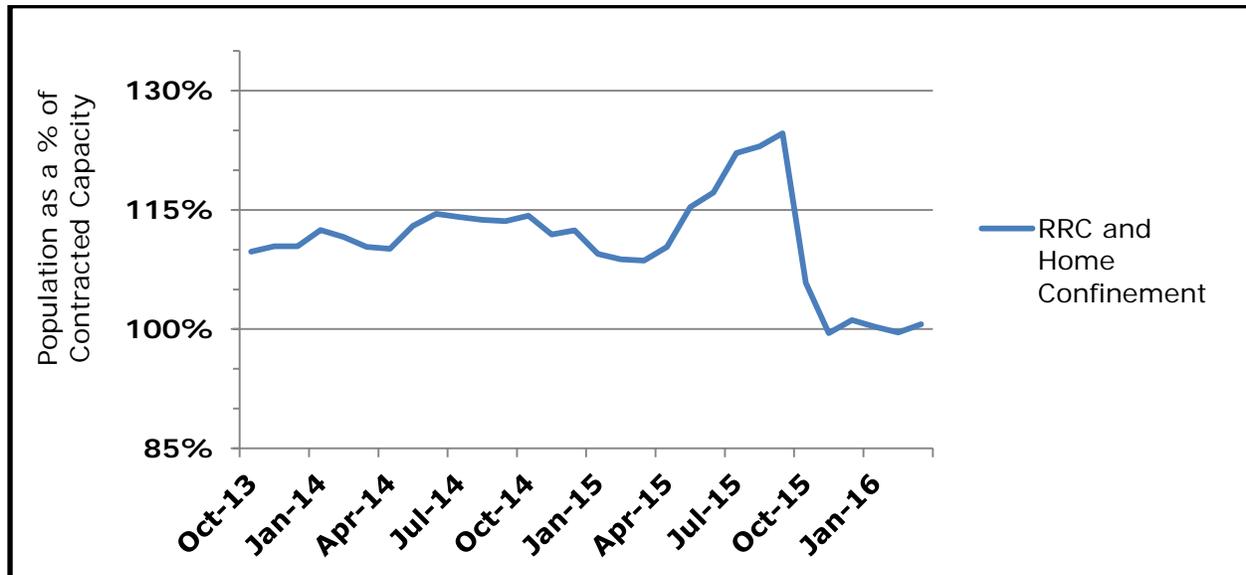
We assessed BOP's policies and practices for planning and managing existing RRC and home confinement capacity to determine if: (1) BOP's current RRC capacity is sufficient to meet all inmate needs; (2) given limited resources, BOP is effectively utilizing existing RRC and home confinement resources by prioritizing placement decisions based on an assessment of inmate needs; and (3) BOP is effectively planning for future RRC and home confinement needs. We found that from October 2013 through March 2016, RRCs were generally over capacity and that BOP was experiencing even greater issues related to its home confinement capacity. We also found that BOP's planning for future RRC and home confinement capacity needs is generally limited by BOP's ability to manage and oversee additional contracts.

BOP uses BOPWARE to track RRC and home confinement capacity, which provides real time RRC and home confinement population and capacity information by RRM field office, BOP region, and BOP as a whole. The RRC and Home Confinement Census and Utilization report generated from BOPWARE includes the current RRC and home confinement population and the current RRC and home confinement contracted capacity.²⁵ According to BOP Central Office officials, some RRC and home confinement contractors are able to house or monitor additional inmates in excess of the estimated maximum contract capacity. This allows BOP to exceed contracted capacity; however, exceeding contracted capacity is contingent on the type of contract, and the contractor's willingness and ability to accommodate additional inmates. Using BOP's RRC and Home Confinement Census and Utilization month-end reports, we analyzed BOP's monthly RRC and home confinement population, as compared to its contracted capacity for October 2013 through March

²⁵ According to BOP Central Office officials, RRC population and capacity numbers include RRCs, Intergovernmental Agreements (IGA), jails, and contract juvenile facilities. However, given the fact that RRCs account for over 90 percent of the capacity numbers reported by BOP, in our judgment, the inclusion of non-RRC facilities does not have a material impact our capacity analysis.

2016. Based on our analysis, we found that from October 2013 through October 2015, BOP's total RRC and home confinement population exceeded contracted capacity, and there was a significant spike in the RRC and home confinement population from May through September 2015, as shown in Figure 6.

Figure 6
Total RRC and Home Confinement Populations
as a Percentage of Contracted Capacity



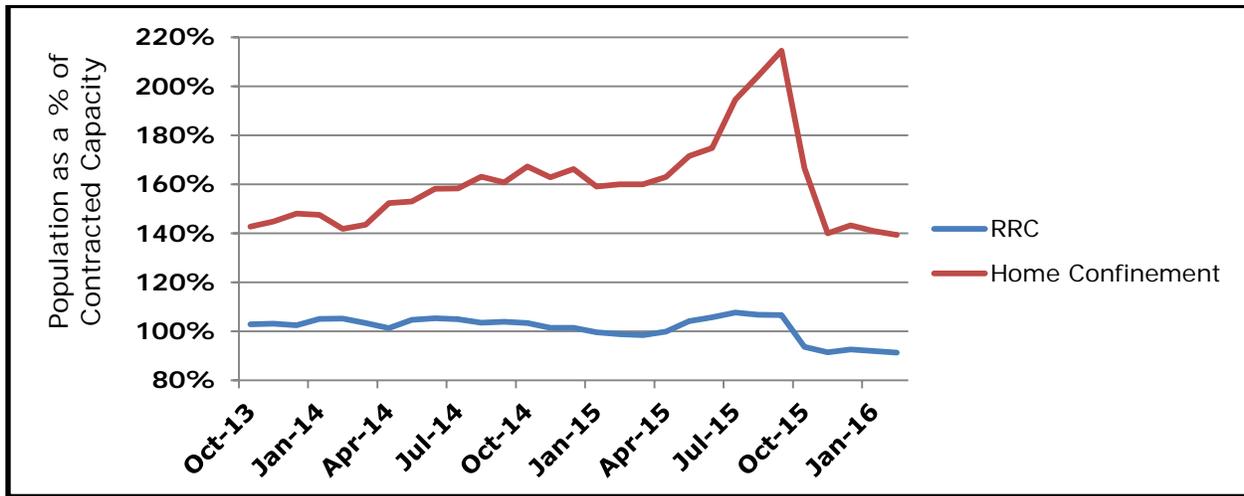
Source: BOP's RRC and Home Confinement Census and Utilization Reports

On average, from October 2013 through March 2016, BOP's total combined RRC and home confinement population was at 111 percent of contracted capacity, exceeding contracted capacity by an average of 1,291 inmates. From May 2015 through September 2015, there was a significant increase in the RRC and home confinement population, which reached a high of 125 percent of contracted capacity, exceeding contracted capacity by 3,027 inmates. An RRM Branch official attributed this spike to the United States Sentencing Commission's decision to amend sentencing guidelines to lower penalties for drug offenders. The changes were made retroactive, resulting in tens of thousands of inmates being resentenced, but also stipulated that all releases would be delayed until November 1, 2015. According to BOP, this resulted in a temporary spike in the number of inmates to be placed in RRCs and/or home confinement during that period.

In order to more clearly understand BOP's capacity issues, we looked at RRC and home confinement populations as compared to contracted capacity separately using the same reports identified above, as shown in Figure 7.

Figure 7

Separate RRC and Home Confinement Populations
as a Percentage of Contracted Capacity



Source: BOP's RRC and Home Confinement Census and Utilization Reports

We found that while the RRC population has remained at about 101 percent of contracted capacity, the home confinement population was on average 159 percent of contracted capacity for the period from October 2013 through March 2016. We found that even if May 2015 through September 2015 data were excluded from our analysis, the RRC population averaged 100 percent of contracted capacity, while the home confinement population averaged 152 percent of contracted capacity during this period.

In our judgment, the RRC and home confinement capacity issues may result from the fact that, contrary to its policy and guidance, BOP is placing the great majority of eligible inmates into RRCs regardless of inmate risk for recidivism or need, unless the inmate is deemed not suitable for placement because the inmate poses a significant threat to the community. RRM field offices cannot unilaterally deny placements. As a result, RRM field office officials stated that they try to accommodate RRC and home confinement placement requests within their assigned geographic areas by using existing contracts and resources. To ensure that all inmates referred for placement are accommodated, RRM field offices may shorten the length of time inmates are placed in RRCs or place inmates in RRCs that are farther (but still within BOP's 100 mile parameters) from their release community. RRM field office officials stated that they try to be flexible in these situations. For example, if an inmate is placed in an RRC that is far away from his release community either because a nearby RRC does not have bed space or there is no nearby RRC, BOP can grant the inmate a furlough in order to travel to the release community and search for employment.

As discussed above, the home confinement capacity issue is further compounded by the fact that in an effort to increase RRC capacity, once an inmate is placed in an RRC, BOP aggressively pursues transitioning the inmate to home

confinement as soon as possible. This practice may result in inmates transitioning from RRCs to home confinement too early, which results in the inmate being returned to the RRC, impacting RRC capacity and the availability of RRC services for other inmates.

We examined BOP's plans to address future RRC and home confinement capacity. According to DOJ's Annual Performance Plan, BOP has a Capacity Planning Committee comprised of top BOP officials, who meet quarterly to review, verify, and update population projections and capacity needs for BOP. The committee reconciles bed space needs and crowding trends to ensure that all available prison space is fully utilized, both in federal prisons and contracted facilities. BOP's Office of Research and Evaluation collects offender data from the Administrative Office of the U.S. Courts in order to project population trends.

Beyond high-level planning, BOP has access to more reliable near future estimates of its RRC and home confinement needs. BOP's RRC and Home Confinement Census and Utilization report includes RRC and home confinement projections for 90 days out. The projected populations account for both inmates scheduled to leave RRCs and home confinement and inmates scheduled to be placed in RRCs and home confinement over the next 90 days.

BOP has also built RRC and home confinement capacity planning into its RRM field office operations, which allows BOP to account for regional differences in capacity. The RRM field offices are responsible for identifying the need for RRC and home confinement services in the geographic areas they oversee. Factors that RRM field offices consider when determining the number of beds needed include: (1) the number of inmates projected to be released in a given area; (2) prosecution trends; (3) new initiatives; and (4) information from BOP's institutions, the U.S. Probation Office, and other law enforcement agencies. In instances where existing contracts and resources are not sufficient, the RRM field office can request modifying existing contracts or procuring new contracts. However, according to BOP Central Office officials, awarding additional contracts is subject to available funds and ensuring that BOP has sufficient resources, particularly at the RRM field office, to oversee the contracts.²⁶

RRM Branch officials stated that BOP is focused on maintaining current capacity. However, BOP is pursuing some avenues to increase capacity. For example, BOP's FY 2017 budget request included an additional \$91.3 million for reentry programs, which included an unspecified amount for an additional 1,870 RRC beds. The request included zero positions, making it unclear whether

²⁶ We did not analyze the cost of housing inmates in RRCs and/or home confinement as compared to housing inmates in BOP institutions. However, in FY 2015, BOP reported that the per capita daily costs at BOP institutions were \$90 for high security, \$73 for medium security, \$72 for low security, and \$60 for minimum security inmates, while the per capita daily costs for RRCs, which include the costs for overseeing inmates in home confinement at half per diem, was \$71, meaning that overall it is more expensive to house an inmate in a BOP institution for all but the lowest security level.

BOP planned to add RRM field office staff to support the additional beds. Further, BOP Central Office officials stated that BOP recently opted to table two RRC solicitations because of issues regarding BOP's ability to manage additional locations. These officials also stated that BOP is in the process of awarding four new RRC contracts, and contracts for three Day Reporting Centers. Day Reporting Centers provide non-residential community-based services for inmates in home confinement. The intent of all these contracts is to expand community-based resources in areas without RRC services. BOP Central Office officials stated that the Day Reporting Centers are a way to address zoning restrictions; however, we also view this as a way to increase the much needed home confinement capacity.

Given the capacity restraints and the fact that the research shows that RRCs are not beneficial for all inmates, we previously recommended that BOP reevaluate its RRC and home confinement placement practices. Additionally, we recommend that BOP reevaluate the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity. To this effect, BOP should also review direct home confinement placement options such as the Day Reporting Centers, as well as possible increased use of the Federal Location Monitoring program and the potential for releasing some low-risk, low-need inmates with relatively short sentences directly back into the community from a BOP institution rather than placing these inmates in RRCs.

BOP's Performance Management and Strategic Planning for RRC and Home Confinement Utilization

We reviewed BOP's strategic planning for RRC and home confinement placement, as well as its procedures for monitoring RRC performance. We found that BOP does not have any performance measures that evaluate the success of its RRC and home confinement programming. BOP's strategic plan includes RRC and home confinement placement targets. However, these targets appear to encourage institutions to maximize the number of inmates placed in RRCs or home confinement, regardless of transitional need. Indeed, the issues we identified with BOP's current placement practices may be driven by, in part, its RRC and home confinement placement targets. Finally, we found that BOP does not have procedures in place that adequately assess the quality of services provided by RRC contractors.

Strategic Planning

BOP's strategic plan includes six broad correctional goals that are supported by specific objectives. BOP's goal for population management, which states that "BOP will proactively manage its offender population to ensure safe and secure operations, and work toward ultimately achieving an overall crowding level in the range of 15 percent," includes a strategic objective with two targets related to the utilization of RRCs and home confinement:

- Make maximum use of RRC bed space by using the following target placement rates by institution security level: 85 percent from minimum, 75 percent from low, 70 percent from medium, and 65 percent from high.²⁷
- Increase the use of cost-effective community-based placement by maintaining 40 percent of the home confinement eligible RRC population in home confinement.

According to the most recent utilization data for the first quarter of FY 2016, BOP reported that RRC and/or home confinement placement rates were at 83 percent for minimum security institutions, 71 percent for low and medium security institutions, and 70 percent for high security institutions.²⁸ Additionally, BOP reported that 36 percent of the overall home confinement eligible population was in home confinement (including both direct placements and transfers from RRCs) as of March 9, 2016.

While these utilization rates indicate that BOP is relatively close to its RRC and home confinement placement targets, we identified a number of issues with these targets. First, RRC and home confinement utilization fall under the goal of managing BOP's inmate population; however, the primary purpose of RRCs and home confinement is not to address prison overcrowding. Rather, according to BOP policy, RRCs and home confinement are meant to facilitate an inmate's transition back into society. In our judgment, these targets also encourage institutions to maximize the number of inmates placed in RRCs or home confinement, regardless of transitional need. As detailed above, we found that BOP does not appear to be making RRC and home confinement placement decisions based on inmate risk for recidivism or need for transitional services, as required by its policy and guidance. Rather, our analysis indicates that BOP is placing the great majority of eligible inmates into an RRC regardless of inmate risk for recidivism or need, unless the inmate is deemed not suitable for placement because the inmate poses a significant threat to the community.

Second, we found that RRCs and home confinement utilization rates cannot be used to evaluate its program performance because both rates measure program outputs, rather than outcomes. In other words, while the utilization rates measure the percentage of inmates placed in RRCs and home confinement, BOP does not assess whether its programs are effective in helping inmates successfully transition back into society.

Additionally, as noted above, the first placement target combines both RRC and home confinement utilization rates, despite the fact that they are two distinct

²⁷ The institutions' target placement rates include both RRC and direct home confinement placements.

²⁸ BOP's placement targets are based on the institution's security level, rather than the inmate's security level used in our analysis. In our judgment, the inmate's security level, rather than the institution's security level is a better indication of inmate risk and need for making RRC and home confinement placement decisions.

services that address different levels of transitional needs. As stated previously, RRCs are recommended for high-risk, high-need inmates, while direct home confinement placement is recommended for low-risk, low-need inmates. Our concern is that the combined target rates are encouraging institutions and RRM field offices to place a significant number of minimum and low security inmates in RRCs, which directly contradicts BOP's policy and guidance. This concern is supported by our analysis, which found that 90 percent of minimum security inmates and 75 percent of low security inmates were placed in RRCs and/or home confinement, as opposed to only 58 percent of high security inmates. In fact, only 4 percent (4,120) of all eligible inmates and only 6 percent (3,984) of eligible minimum and low security inmates were placed directly into home confinement, which as discussed above strongly indicates that BOP is underutilizing direct home confinement placement as an alternative to transitioning low-risk, low-need inmates back into society. This placement target, in combination with the BOP-wide view that everyone benefits from RRC placement, means that the majority of minimum and low security inmates will be placed in RRCs. Therefore, we found that BOP's placement target, as well as its actual placement practices, directly contradicts BOP guidance, as well as the relevant research cited in its guidance, indicating that low-risk inmates do not benefit from and may in fact be harmed by RRC placement because, among other things, of their exposure to high-risk offenders in those facilities.

The second placement target, which specifically addresses home confinement, is a step towards addressing our concerns. However, the second target hides two important pieces of information. This rate does not indicate whether an inmate was placed directly in home confinement or transferred into home confinement from an RRC. BOP is taking steps to expand the use of direct placement in home confinement. This stance is evident in BOP's guidance, as well as some new practices, including the creation of Day Reporting Center contracts that allow BOP to expand community-based resources in areas where it has been difficult to establish RRCs. However, as previously discussed, direct placement in home confinement is not common, despite BOP's guidance and efforts to increase direct placements. In our judgment, BOP's strategic objective should also include a target for inmates placed directly in home confinement, in order to more clearly address BOP's intentions to expand direct placement. Also, the current home confinement target does not provide information on the percentage of inmates that fail in home confinement and are subsequently returned to RRCs. We believe this is an important performance outcome measurement for BOP's home confinement program, given that our analysis identified a significant failure rate among the inmates that were placed in home confinement, indicating that BOP may be transitioning inmates from RRC's to home confinement too early in order to increase RRC capacity. Given that RRCs are a limited resource, BOP should consider the failures that occur and their effects on transitional programs as a whole.

Based on the concerns identified above, we concluded that the BOP's RRC and home confinement utilization targets do not adequately assess program efficacy for facilitating inmates' successful transition back into society. While BOP

needs targets for measuring the number of inmates who are transitioned through RRCs and/or home confinement, the current targets do not accurately reflect BOP's placement guidance, particularly related to direct home confinement placement.

We also found that BOP needs to identify additional appropriate measures that speak to the effectiveness of its RRCs and home confinement programs. Despite numerous DOJ and BOP references in policy and guidance that indicate RRCs reduce recidivism, this was generally not substantiated by the available research. As previously discussed, measuring the effectiveness of RRCs using recidivism rates is a complex undertaking because it is not appropriate to withhold RRC services from a comparable control group to measure differences in recidivism rates between inmates who were placed in RRCs as compared to those who were not. BOP Central Office officials also stated that it is very difficult to determine the success of its RRC and home confinement reentry programming using recidivism as the measure. Given the most significant recidivism risk factors – criminal history, type of offence, age at release, sex, and race – are not related to RRC and home confinement programming, we understand BOP's hesitancy to evaluate RRC and home confinement program efficacy using recidivism as the measure. However, there are other performance measurements that may be appropriate.

For example, an official from BOP's Central Office suggested evaluating whether specific skills and needs are improved as the result of services provided during RRC and home confinement. BOP could identify ways to measure the impact of employment assistance programs, by identifying the number of inmates that secure pre-release employment while in an RRC or home confinement. The Central Office official added that focusing on achieving specific outcomes may ultimately indirectly impact recidivism. This is in line with BOP's 1994 study, which found that RRC placement increased an inmate's chances of obtaining post-release employment, a factor which was found to reduce recidivism. Therefore, we recommend that BOP develop performance measures that assess the efficacy of its RRC and home confinement programming.²⁹

Monitoring of RRC and Home Confinement Service Providers

We also assessed BOP's policy for monitoring its RRC contractors, all of whom also provide services to and monitor inmates in home confinement. In general, the prior RRC research did not directly assess the extent to which the quality of RRC services impacted the RRCs' effectiveness in terms of reducing recidivism. However, the research did provide some indications that program quality matters. For example, one of the two studies that found that RRC placement actually increased recidivism also found that of the 54 RRCs that were included in the research, 50 (93 percent) were rated as needs improvement or

²⁹ GAO made a similar recommendation in a recent report. GAO, *Justice Has Used Alternatives to Incarceration*, 49.

ineffective based on a rating that assessed the quality of the providers.³⁰ Additionally, the NRRC's compendium, which summarized RRC research in addition to what we reviewed as part of this audit, stated that the available research suggests that RRC success depends on effective and consistent delivery of offender services administered by the appropriate staff.³¹ As a result, we also analyzed BOP's procedures for monitoring RRC performance and found that BOP's monitoring instruments only look at compliance with the contractual Statement of Work (SOW), and do not assess the quality of services provided by the RRC contractors.

In order to monitor RRC contractor performance, BOP uses contract monitoring instruments to complete full (annual) and interim (triannual) inspections of each contractor. According to BOP's Community Corrections Manual, the instruments are designed to assist BOP staff in making thorough program evaluations based on contract requirements as detailed in the contracts' SOW. We reviewed the most recent RRC SOW, dated May 2015, in order to determine the extent to which the contract requirements address program quality. The SOW does require that the contractor provide a number of specific programs, including details of what that program must include. For example, the contractor is required to have a cognitive behavioral program, which must be operated under specific guidelines for a minimum of 3 hours per week, with no more than 12 offenders per group. While the SOW and, as an extension, the monitoring instruments used to assess compliance with the SOW, address whether specific programs exist, neither directly addresses whether or not the programs are effective. The report used for the results of the full monitoring does have a narrative section that asks the inspection team to speak to the strengths or deficiencies of the programs. However, in our judgment, this question appears to focus on strengths or deficiencies related to compliance (i.e., whether or not the program exists) versus an evaluation of the programs' efficacy.

BOP has an additional monitoring instrument, the Contractor Evaluation Form (CEF), which is also required to be completed annually. The form is completed using the full monitoring report, interim monitoring reports, and other documented interactions with the contractor. The CEF more explicitly addresses quality by asking how "effective has the process been... in assisting offenders" and requiring the reviewer to assign a rating to programming, with a high rating indicating that the contract met or exceeded the requirements of the contract and had one or more significant strengths. While this appears to be a better tool because it explicitly addresses effectiveness and assigns a comparable rating to each RRC, the following problems still exist: (1) the CEF is based on the monitoring reports, meaning the limitations in those reports will extend to this evaluation; and (2) the CEF is primarily used to evaluate past performance during the procurement process.

³⁰ Christopher T. Lowenkamp, Edward J. Latessa, and Kristin Bechtel, *Community Corrections Center, Parolees, and Recidivism: An Investigation into the Characteristics of Effective Reentry Programs in Pennsylvania*, (May 2009), 173-180.

³¹ NRRC, *A Compendium Guide*, 6.

BOP policy states that the monitoring instrument should be modified depending on the requirements of the SOW applicable to the RRC contract being reviewed. According to BOP Central Office and RRM officials, monitoring should also include an assessment of anything the contractor has identified above and beyond the SOW as part of their technical proposal. However, BOP policy does not explicitly state that the monitoring instruments should be modified to include an assessment of any technical proposals included as part of the RRC contract. In our judgment, the lack of clarity in the policy could lead to inconsistencies in the way that each RRM assesses RRC contractor compliance with technical proposals, as well as what each RRM includes in its monitoring reports. An RRM field office official indicated that they are working towards including the technical proposal in the monitoring instruments. However, monitoring RRC contractor compliance with the technical proposal still does not provide an assessment of the quality of services provided by the RRC contractors.

We also evaluated whether or not BOP quantitatively measures RRC program performance. RRM Branch officials pointed to its monitoring instruments as the means by which BOP measures performance. An RRM Branch official stated that the Central Office reviews the monitoring reports collectively and identifies best practices and common deficiencies. This means the Central Office is limited to the information within the monitoring reports. We reviewed the monitoring instruments and only identified two quantifiable measures. Both the full and interim monitoring instruments ask for the percentage of inmates that are employed. However, the information is limited to a snapshot of the current RRC population and is not tracked over time or used to assess the quality of the RRC's employment assistance program.

We found that BOP's monitoring instruments address compliance with the contractual SOW, but do not assess the quality of programs offered by its RRCs. We did not identify any requirement that the RRC contractor or BOP monitor, collect, retain, or report any statistics pertaining to the RRC or home confinement program performance, or success or failure rates. If these measures were available, BOP could then incorporate these figures into its strategic planning, which might assist it in assessing its programs and RRC contractors based on measurable qualitative achievements as opposed to simply trying to meet numerical quotas. Therefore, we recommend that BOP create an RRC contractor quality monitoring instrument that assesses the quality and effectiveness of its RRCs and home confinement programs.

Conclusion

BOP needs to reevaluate how it determines which inmates are placed in RRCs and home confinement. If BOP continues to focus on placing almost every inmate in an RRC, regardless of risk for recidivating and need for transitional services, and then moving them as quickly as possible into home confinement, BOP likely will continue to experience capacity and other issues. BOP also needs to develop a way

to measure the efficacy of the RRC and home confinement programs, in order to more clearly understand and realize the value of these services.

Recommendations

We recommend that BOP:

1. Reevaluate its RRC and home confinement placement practices, particularly related to minimum and low security inmates, to ensure that they are consistent with BOP's own policies and the relevant research.
2. Reevaluate its practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.
3. Reevaluate the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity.
4. Develop performance measures that assess the efficacy of its RRC and home confinement programming.
5. Create an RRC contractor quality monitoring instrument that assesses the quality and effectiveness of its RRCs and home confinement programs.

STATEMENT ON INTERNAL CONTROLS

As required by the *Government Auditing Standards*, we tested, as appropriate, internal controls significant within the context of our audit objectives. A deficiency in an internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to timely prevent or detect: (1) impairments to the effectiveness and efficiency of operations, (2) misstatements in financial or performance information, or (3) violations of laws and regulations. Our evaluation of BOP's internal controls was *not* made for the purpose of providing assurance on its internal control structure as a whole. BOP management is responsible for the establishment and maintenance of internal controls.

Through our audit testing, we did not identify any deficiencies in BOP's internal controls that are significant within the context of the audit objectives and based upon the audit work performed that we believe would affect BOP's ability to effectively and efficiently operate, to correctly state financial and performance information, and to ensure compliance with laws and regulations.

Because we are not expressing an opinion on BOP's internal control structure as a whole, this statement is intended solely for the information and use of BOP. This restriction is not intended to limit the distribution of this report, which is a matter of public record.

STATEMENT ON COMPLIANCE WITH LAWS AND REGULATIONS

As required by the *Government Auditing Standards* we tested, as appropriate given our audit scope and objectives, selected transactions, records, procedures, and practices, to obtain reasonable assurance that BOP's management complied with federal laws and regulations for which noncompliance, in our judgment, could have a material effect on the results of our audit. BOP's management is responsible for ensuring compliance with applicable federal laws and regulations. In planning our audit, we identified the following laws and regulations that concerned the operations of the auditee and that were significant within the context of the audit objectives:

- 18 U.S.C. §3621 (2014).
- 18 U.S.C. §3624 (2014).

Our audit included examining, on a test basis, BOP's compliance with the aforementioned laws and regulations that could have a material effect on BOP's operations, through interviewing BOP officials, analyzing data, and examining pertinent policies and forms.

Nothing came to our attention that caused us to believe that BOP was not in compliance with the aforementioned laws and regulations.

OBJECTIVES, SCOPE, AND METHODOLOGY

Objectives

The objectives of our audit were to evaluate BOP's RRC and home confinement: (1) placement policy and practices, (2) capacity planning and management, and (3) strategic planning and performance management.

Scope and Methodology Section

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

The scope of our audit generally covers inmates released from BOP custody at the start of October 2013 through April 2016. To accomplish our objectives, we interviewed BOP's Central Office personnel. This included officials from the Residential Reentry Management Branch, who are responsible for managing BOP's community based confinement, as well as officials from the Residential Reentry Contracting Section, and the Information, Policy, and Public Affairs Division. We also interviewed officials from Federal Correctional Complex Florence and the RRM Dallas regarding the role of institutions and RRM field offices in terms of RRC and home confinement policies and practices.

We reviewed BOP's policies and guidance on RRCs and home confinement. This included programs statements and guidance memoranda. Our primary reference was BOP's May 2013 memorandum on guidance for home confinement and RRC placements. Additionally, we evaluated the forms used to assist with RRC and home confinement placements, including BOP's Custody Classification form and an institution-specific RRC and home confinement referral form. We reviewed and summarized RRC and home confinement capacity and utilization reports, which are generated by BOPWARE and used by BOP's RRM Branch and the executive staff. We reviewed BOP's strategic plan, budget requests, and Utilization of Community Corrections Facilities Reports to Congress. We evaluated BOP's RRC monitoring instruments in conjunction with the current RRC SOW. We also reviewed the existing body of relevant research on both recidivism and the effectiveness of RRCs in terms of reducing recidivism, which is detailed in Appendix 2.

Finally, we reviewed and analyzed inmate data from SENTRY, BOP's primary mission support database, which collects, maintains, and tracks critical inmate information, including inmate location, medical history, behavior history, and release data. BOP provided the following data in May 2016: (1) all BOP inmates

that were released from BOP's custody between October 2013 and April 2016, (2) all BOP offenders who were in RRCs and home confinement between April 2013 and April 2016, and (3) all BOP inmates who were released or projected to be released from BOP custody between April 2016 and September 2021. We did not test the reliability of SENTRY as a whole. However, we assessed the reliability of the data provided by BOP by: (1) performing electronic testing of required data elements to identify obvious problems with completeness or accuracy, (2) reviewing existing information about the data and the system that produced them, and (3) interviewing agency officials knowledgeable about the data. We determined that the data were sufficiently reliable for the purposes of this report. Our sample selection methodologies were not designed with the intent of projecting our results to the population from which the samples were selected.

SUMMARIES OF RELEVANT RESEARCH

Studies That Address Recidivism (in chronological order)

- Miles D. Harer, *Recidivism Among Federal Prisoners Released in 1987* (Washington, D.C.: Federal Bureau of Prisons, Office of Research and Evaluation, August 4, 1994).

The study looked at a representative sample of 1,205 BOP inmates released to the community during the first six months of 1987.

- United States Sentencing Commission, *Measuring Recidivism: The Criminal History Computation of the Federal Sentencing Guidelines* (May 2004).

The study looked at a random sample of 6,062 U.S. citizens who were sentenced under the federal sentencing guidelines in FY 1992 and released from prison by June 1999, if incarcerated.

- William Rhodes et al., *Recidivism of Offenders on Federal Community Supervision* (Cambridge: Abt Associates Inc., December 21, 2012).

The study looked at 245,362 offenders who entered federal community supervision between October 2004 and September 2010.

- Matthew R. Durose, Alexia D. Cooper, and Howard N. Snyder, *Recidivism of Prisoners Released in 30 states in 2005: Patterns from 2005 to 2010* (Washington, D.C.: Bureau of Justice Statistics, April 2014).

The study examined 404,638 state prisoners released in 2005 in 30 U.S. states and used a sample of 68,597 inmates.

- United States Sentencing Commission, *Recidivism Among Federal Offenders: A Comprehensive Overview* (March 2016).

The study examined 25,431 offenders released from federal prisons after serving a sentence of imprisonment or placed on a term of probation in 2005.

Studies That Address the Effectiveness of RRCs in Terms of Reducing Recidivism (in chronological order)

- T. Lowenkamp and Edward J. Latessa, "Increasing the Effectiveness of Correctional Programming Through the Risk Principle: Identifying Offenders for Residential Placement," *Criminology & Public Policy*, 4 (May 2005): 263-290.

This study examined 7,306 state offenders placed in 53 community-based residential programs as part of their parole, post-release control, or probation in Ohio. The results of the study demonstrated that the effectiveness of residential treatment programs in Ohio differed as a function of offender risk levels. Low and low/moderate risk offenders saw increased rates of recidivism relative to the rates of the group that were not placed in residential programs, while high-risk offenders saw the opposite effects.

- Christopher T. Lowenkamp, Edward J. Latessa, and Kristin Bechtel, *Community Corrections Center, Parolees, and Recidivism: An Investigation into the Characteristics of Effective Reentry Programs in Pennsylvania* (Cincinnati: University of Cincinnati, May 2009).

This study evaluated 7,846 state offenders placed in 54 community corrections centers and community contract facilities in Pennsylvania as either pre-releases or parolees around 2006. The study found that the rate of recidivism was generally higher for the offenders that were placed in the community corrections as compared to offenders that were not placed in these programs.

- Edward J. Latessa, Lori Brusman Lovins, and Paula Smith, *Follow-up Evaluation of Ohio's Community Based Correctional Facility and Halfway House Programs – Outcome Study* (Cincinnati: University of Cincinnati, February 2010).

The study incorporated two groups: 7,328 state offenders sentenced to community based correctional facilities in Ohio between February 2006 and June 2007, and 6,090 state offenders placed in halfway houses in Ohio within the same timeframe. The study found that relative to those not placed in either type of facility, high-risk offenders were less likely to recidivate and no treatment effects were found with low-risk offenders.

- Faye S. Taxman et al., *What Works in Residential Reentry Centers* (Fairfax: George Mason University, December 2010).

This study evaluated over 39,000 federal offenders released from BOP custody in 2004 and 2007. The study found that it did not appear that participating in RRCs made a difference in terms of whether or not an offender recidivated. Additionally, the study did not find that increasing the length of time in an RRC impacted recidivism.

- Pennsylvania Department of Corrections, *Recidivism Report 2013* (February 8, 2013).

The study examined 3-year recidivism rates for inmates released from Pennsylvania state prison between 2005 and 2006 and inmates released between 2008 and 2009, and 1-year recidivism rates for inmates released between 2010 and 2011. The study found that across the various release

years, the recidivism rate for those who were paroled to a community corrections center were higher than the rates of those who were paroled directly to the street.

- Zachary K. Hamilton and Christopher M. Campbell, "Uncommonly Observed: The Impact of New Jersey's Halfway House System," *Criminal Justice and Behavior*, 41 (November 2014): 1354-1375.

The study analyzed 6,599 state inmates in 18 halfway house programs in New Jersey who were released from custody during 2008 or 2009. The study found that inmates that went to a halfway house were less likely to recidivate than inmates that remained in prison prior to their release. However, the study mostly attributed the lower propensity for recidivating to fewer parole revocations.

- S.E. Costanza, Stephen M. Cox, and John C. Kilburn, "The Impact of Halfway Houses on Parole Success and Recidivism," *Journal of Sociological Research*, 6 (2015): 39-55.

The study examined 354 inmates released from a northeastern state's correctional facilities into a halfway house and then to parole between 2004 and 2008. The study found that successful halfway house completion reduced recidivism among inmates as compared to inmates that were released from a correctional facility directly to parole.

DETAILED DATA ANALYSIS

Table 5

Analysis of BOP Release Data Based on Exit Security Level

Exit Security Level	Type of Release	No. of Records	Percent of All Records	Percent of Subtotal
Minimum	RRC or Home Confinement	31,726	33.66%	90.05%
Minimum	Direct from BOP Institution	3,504	3.72%	9.95%
<i>Minimum Security at Exit</i>		35,230	37.38%	100.00%
Low	RRC or Home Confinement	21,281	22.58%	75.07%
Low	Direct from BOP Institution	7,069	7.50%	24.93%
<i>Low Security at Exit</i>		28,350	30.08%	100.00%
Medium	RRC or Home Confinement	18,115	19.22%	70.97%
Medium	Direct from BOP Institution	7,411	7.86%	29.03%
<i>Medium Security at Exit</i>		25,526	27.08%	100.00%
High	RRC or Home Confinement	2,978	3.16%	57.87%
High	Direct from BOP Institution	2,168	2.30%	42.13%
<i>High Security at Exit</i>		5,146	5.46%	100.00%
TOTAL INMATES ELIGIBLE FOR PLACEMENT		94,252	100.00%	

Source: BOP's SENTRY data for inmates released from October 2013 through April 23, 2016.

Table 6
Analysis of BOP Release Data Based on Inmate Age

Release Type	Age At Time Of Release	No. of Records	Percent of All Records	Percent of Subtotal
Community Corrections	< 21	242	0.26%	68.36%
Directly From BOP Institution	< 21	112	0.12%	31.64%
Less than 21 at Time of Release		354	0.38%	100.00%
Community Corrections	21 - 25	4,633	4.92%	72.06%
Directly From BOP Institution	21 - 25	1,796	1.91%	27.94%
21 to 25 at Time of Release		6,429	6.82%	100.00%
Community Corrections	26 -39	34,568	36.68%	78.88%
Directly From BOP Institution	26 - 39	9,253	9.82%	21.12%
26 to 39 at Time of Release		43,821	46.49%	100.00%
Community Corrections	40 – 54	26,026	27.61%	80.32%
Directly From BOP Institution	40 – 54	6,375	6.76%	19.68%
40 to 54 at Time of Release		32,401	34.38%	100.00%
Community Corrections	≥ 55	8,631	9.16%	76.74%
Directly From BOP Institution	≥ 55	2,616	2.78%	23.26%
55 and older at Time of Release		11,247	11.93%	100.00%
TOTAL INMATES ELIGIBLE FOR PLACEMENT		94,252	100.00%	

Source: BOP's SENTRY data for inmates released from October 2013 through April 23, 2016.

Table 7
Analysis of BOP Release Data Based on Inmate Sex

Release Type	Inmate Sex	No. of Records	Percent of All Records	Percent of Subtotal
Community Corrections	Female	10,112	10.73%	84.14%
Directly From BOP Institution	Female	1,906	2.02%	15.86%
Subtotal Female Inmates		12,018	12.75%	100.00%
Community Corrections	Male	63,988	67.89%	77.81%
Directly From BOP Institution	Male	18,246	19.36%	22.19%
Subtotal Male Inmates		82,234	87.25%	100.00%
TOTAL INMATES ELIGIBLE FOR PLACEMENT		94,252	100.00%	

Source: BOP's SENTRY data for inmates released from October 2013 through April 23, 2016.

Table 8
Analysis of BOP Release Data Based on Length of Incarceration

Release Type	Length of Incarceration (Years)	No. of Records	Percent of All Records	Percent of Subtotal
Community Corrections	< 1	12,390	13.20%	64.75%
Directly From BOP Institution	< 1	6,745	6.74%	35.25%
<i>Less than 1 year</i>		19,135	19.95%	100.00%
Community Corrections	1 to < 2.5	22,327	23.79%	80.27%
Directly From BOP Institution	1 to < 2.5	5,489	5.85%	19.73%
<i>1 year to 2.5 years</i>		27,816	29.64%	100.00%
Community Corrections	2.5 to < 5	19,004	20.25%	83.74%
Directly From BOP Institution	2.5 to < 5	3,691	3.93%	16.26%
<i>2.5 to 5 years</i>		22,695	24.19%	100.00%
Community Corrections	5 to < 10	14,812	15.78%	83.54%
Directly From BOP Institution	5 to < 10	2,918	3.11%	16.46%
<i>5 to 10 years</i>		17,730	18.89%	100.00%
Community Corrections	10 to < 20	4,966	5.29%	81.60%
Directly From BOP Institution	10 to < 20	1,120	1.19%	18.40%
<i>10 to 20 years</i>		6,086	6.49%	100.00%
Community Corrections	20+	601	0.64%	76.08%
Directly From BOP Institution	20+	189	0.20%	23.92%
<i>20 or more years</i>		790	0.84%	100.00%
TOTAL INMATES ELIGIBLE FOR PLACEMENT		94,252	100.00%	

Source: BOP's SENTRY data for inmates released from October 2013 through April 23, 2016.

BOP'S RESPONSE TO THE DRAFT AUDIT REPORT



U.S. Department of Justice

Federal Bureau of Prisons

Office of the Director

Washington, D.C. 20534

November 4, 2016

MEMORANDUM FOR JASON R. MALMSTROM
ASSISTANT INSPECTOR GENERAL
FOR AUDIT

FROM:

A handwritten signature in black ink, appearing to read "Tom Kane", is written over the printed name.

Thomas R. Kane, Acting Director

SUBJECT:

Response to the Office of Inspector General's
Formal Draft Audit Report: Audit of the Federal
Bureau of Prisons' Management of Inmate
Placements in Residential Reentry Centers and
Home Confinement

The Bureau of Prisons (Bureau) greatly appreciates the Office of the Inspector General's assessment and analysis of the Bureau's placement policies and practices for Residential Reentry Centers (RRCs) and Home Confinement. Supporting successful reentry is an essential part of the Bureau's mission to promote public safety - because by helping individuals return to productive, law-abiding lives, we can reduce crime across the country and make our communities safer. The Bureau is deeply committed to providing returning citizens, where appropriate and feasible, a transitional phase that affords them the opportunity to secure employment, housing, and other necessities prior to release from custody.

The Bureau appreciates the opportunity to respond to the open recommendations from the formal draft report entitled, Audit of the Federal Bureau of Prisons' Management of Inmate Placements in Residential Reentry Centers and Home Confinement.

The OIG report contains five recommendations with which the Bureau concurs, subject to the comments provided below.

Although the report rightly acknowledges the limitations of existing research, the Bureau has concerns about the inferences made for RRC effects on recidivism. Only RRC recidivism studies meeting the highest methodological standards for quasi-experiments should be relied upon in making conclusions regarding the impact of RRCs on recidivism. In the Bureau's view, further analysis of research, policy, and practices is needed prior to coming to conclusions as to whether low-risk inmates benefit from placement in an RRC. Although the Bureau agrees that high-risk individuals may benefit the most from RRC placement, low-risk individuals who are placed in an RRC, even if for a limited amount of time, are provided a smoother transition back into society and the opportunity to find employment in the community prior to release, which is shown to reduce recidivism.

Please find the Bureau's specific responses to each recommendation below:

Recommendation 1: Reevaluate its RRC and home confinement practices, particularly related to minimum and low security inmates, to ensure that they are consistent with BOP's own policies and the relevant research.

Initial Response: The Bureau agrees with the recommendation and will reevaluate our RRC and home confinement practices, particularly those related to minimum and low security inmates, to ensure they are consistent with policy and relevant research.

Recommendation 2: Reevaluate its practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.

Initial Response: The Bureau agrees with the recommendation and will reevaluate our practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.

Recommendation 3: Reevaluate the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity.

Initial Response: The Bureau agrees with the recommendation and will reevaluate the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity. The BOP is currently in the process of pursuing Day Reporting Centers as alternatives to RRCs.

Recommendation 4: Develop performance measures that assess the efficacy of its RRC and home confinement monitoring capacity.

Initial Response: The Bureau agrees with the recommendation and will develop performance measures that assess the efficacy of RRC and home confinement monitoring capacity. The Bureau has developed new performance measures for RRC and Home Confinement monitoring and these measures have been incorporated into a revised Statement of Work (SOW). Implementation of the enhancements contained in the revised SOW is contingent on available funding.

Recommendation 5: Create an RRC contractor quality monitoring instrument that assesses the quality and effectiveness of its RRCs and home confinement programs.

Initial Response: The Bureau agrees with the recommendation and will create an RRC contractor quality monitoring instrument as recommended.

**OFFICE OF THE INSPECTOR GENERAL
ANALYSIS AND SUMMARY OF ACTIONS
NECESSARY TO CLOSE THE REPORT**

The OIG provided a draft of this audit report to BOP. BOP's response is incorporated in Appendix 4 of this final report. The following provides the OIG analysis of the response and summary of actions necessary to close the report.

Analysis of BOP's Response

In response to our audit report, BOP concurred with our recommendations and discussed the actions it will implement in response to our findings. As a result, the status of the audit report is resolved.

BOP stated in its response that further analysis of research, policy, and practices is needed prior to coming to conclusions as to whether low-risk inmates benefit from placement in an RRC. In our audit, we applied the same research cited in BOP's RRC and home confinement guidance, which it issued in May 2013. Specifically, BOP's guidance states that "research indicates that inmates with low needs and a low risk of recidivating who are placed in an RRC do not benefit from the placement and could become more likely to recidivate than if they received no placement." In its response, BOP stated that while "high-risk individuals may benefit the most from RRC placement, low-risk individuals who are placed in an RRC are provided a smoother transition back into society and the opportunity to find employment prior to release, which is shown to reduce recidivism." However, BOP guidance states that direct home confinement placement is the preferred pre-release option for low-risk, low-need inmates rather than RRCs. Further, inmates placed in home confinement receive the same transitional programming as inmates placed in RRCs, including pre-release employment opportunities. Therefore, we believe this further highlights the need for BOP to address the recommendations in this report to improve its RRC and home confinement placement policies and practices.

Recommendations for BOP:

- 1. Reevaluate its RRC and home confinement placement practices, particularly related to minimum and low security inmates, to ensure that they are consistent with BOP's own policies and the relevant research.**

Resolved. BOP concurred with our recommendation. BOP stated in its response that it will reevaluate its RRC and home confinement practices, particularly those related to minimum and low security inmates, to ensure that they are consistent with BOP's own policies and the relevant research.

This recommendation can be closed when we receive documentation showing that BOP has reevaluated its RRC and home confinement placement practices, particularly related to minimum and low security inmates, to ensure that they are consistent with BOP's own policies and the relevant research.

2. Reevaluate its practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.

Resolved. BOP concurred with our recommendation. BOP stated in its response that it will reevaluate its practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.

This recommendation can be closed when we receive documentation showing that BOP has reevaluated its practices related to transitioning inmates from RRCs to home confinement as a means to address RRC capacity issues.

3. Reevaluate the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity.

Resolved. BOP concurred with our recommendation. BOP stated in its response that it will reevaluate the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity. BOP also stated that it is currently in the process of pursuing Day Reporting Centers as alternatives to RRCs.

This recommendation can be closed when we receive documentation showing that BOP has reevaluated the availability of alternatives to RRC placement, including consideration of increasing direct home confinement placement and home confinement monitoring capacity.

4. Develop performance measures that assess the efficacy of its RRC and home confinement programming.

Resolved. BOP concurred with our recommendation. BOP stated in its response that it will develop performance measures that assess the efficacy of RRC and home confinement monitoring capacity. BOP also stated that new performance measures for RRC and home confinement monitoring have been incorporated into a revised Statement of Work, the implementation of which is contingent on available funding.

This recommendation can be closed when we receive documentation showing that BOP has developed performance measures that assess the efficacy of its RRC and home confinement programming.

- 5. Create an RRC contractor quality monitoring instrument that assesses the quality and effectiveness of its RRCs and home confinement programs.**

Resolved. BOP concurred with our recommendation. BOP stated in its response that it will create an RRC contractor quality monitoring instrument as recommended.

This recommendation can be closed when we receive documentation showing that BOP has created an RRC contractor quality monitoring instrument that assesses the quality and effectiveness of its RRCs and home confinement programs.

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