

Understanding the Adult Correction System Components and the Release of Persons into the Community

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Prisons are not Jails!

Here is a quick primer on correctional facilities and from who, where, and when a person may be released and why... which leads us to better understand who might need to do the discharge planning or why it does not happen. Each system is faced with separate and distinct problems posed by discharge planning.

Police Lock-Ups- Lock-up is where a person is detained by police for a period not to exceed 48 hours. This is generally in a police station closest to the origin of the crime. Medical care is generally provided by a local hospital off-site when required. A person may be transferred from one lock-up and held again in another city or police lock-up on a warrant issued by another city within Cook County. From there, they are bonded out or released from court pending trial or transferred to the county jail.

Cook County Jail- is where people are detained and awaiting trial for all state and local crimes occurring in Cook County. It is run by the **Sheriff of Cook County**. **Detainees** are initially presumed innocent and may be released without ever being convicted. If convicted, they may be transferred to **prison** or they may serve the sentence at Cook County Jail if their sentence is less than one year.

1. There are 9,000- 13,000 people in Cook County Jail every day with about 300 new inmates coming and going each day.
2. Cook County Jail is the largest single site county jail in the country.
3. 1,000 people in the jail take medication at any time.
4. Psychiatric and medical services are provided by **Cermak Health Services, an affiliate of Cook County Bureau of Health Services**. This means that health services are a part of the same administration as Cook County Hospital, one of the best public facilities in the nation. The Sheriff makes space available for the hospital to handle all necessary medical treatment.
5. There are full hospital inpatient facilities on site for psychiatric and medical treatment that are a national model for the rest of the country.
6. Psychiatric medical work is well regarded.
7. Screening for and follow-up for communicable diseases is also well regarded.

8. 8. Every attempt to assist in discharge planning is made but resources are lacking both in correctional facilities and in the community. Pilot studies have shown that after-care is effective in reducing recidivism and can save money in the long run. Currently, there are not sufficient resources. What resources are available and what cooperative agreements that have been developed between the county and the state have received favorable national attention as models for other jurisdictions.
9. **The judge in the pending case (not the jail) determines when a person is allowed to be released into the community as result of the current criminal case for which they are being held.**
10. Persons in jail have a right to a bond hearing in which **the judge** determines if the person can be released into the community. If a decision is made to allow release, a **bond** (a sum of money) is set based on a person's financial resources. This is an amount of money that the person may pay the court to guarantee they will return to court for trial. If they pay the bond they can be released regardless of discharge planning.
11. In addition, the Sheriff, due to concerns about overcrowding of the jail, or police in lock-up may release a person on their own recognizance (an I-Bond) and a person may be released with little notice.
12. The Judge or the Sheriff may elect to release a person on electronic monitoring (a form of enhanced supervised release). A person on this form of release will need a suitable host site where they will stay at all times except when granted "movement." This will usually be for a job, short family visits, or counseling as permitted by the probation officer. The actual monitoring is done independent of the probation officer. The monitor checks to see if the ankle bracelet attached to the probationer remains within a specified number of feet from the monitoring station. If not, the device will call and contact the monitoring office of a violation who will then notify the probation officer for follow-up. Older machines require that the host site have a working phone line, often a burden on family members and can limit available places to live. Newer machines can work without a phone line using a cell phone. Even newer devices have a GPS device in the ankle bracelet.
13. A Judge may also elect to release a person conditionally **pre-trial** from jail to see if a person can follow conditions and to allow a person in the community while the state and defense are gathering evidence and preparing for a trial.
14. **The Jail releases a person on orders of a judge as quickly as they can which can take more than several hours.** The time is spent reviewing a person's records to ensure that they are releasing is the correct person and that there are no other pending cases in this or other jurisdictions. Releases also are delayed by travel time to the jail and by transportation which involves multiple detainees at multiple locations and the need to transport in a safe and efficient manner.
15. **Persons released conditionally into the community are given probation or supervision.** If they are given supervision (for misdemeanor), they are to attend community programming. If they fail to attend, the judge can re-sentence the case or add additional conditions. If they have probation, they have a probation officer who ensures compliance with any court orders and report to the court any non-compliance. **Non-compliance can result in returning to court for re-sentencing to prison or additional conditions placed by the judge as a result of violations of their probation conditions (VOP).**

16. A person found innocent or who has their court case dropped by the state must be released by the jail regardless of whether they have housing, medication, or any kind of discharge preparation (even if the person does not want to go!).
17. A person may have a variety of different alternate sentencing including from drug or mental health court. These may have conditional community time based on treatment goals as an alternative to a prison or jail sentence. A person may also be given day reporting (alternate educational programming on the jail grounds) or Boot Camp (alternate physical activity or community service) in lieu of jail time. Each will be at the discretion of the Judge or the Sheriff.

Forensic Mental Health Facilities- These are state mental health facilities. They are for people who are unable to assist their lawyers in their defense for a trial that is pending (**Unable to Stand Trial- UST**) or for people who were not liable for their crime as they were legally insane at the time of the crime (**Not Guilty by Reason of Insanity- NGRI**).

1. After a court remands a person to the custody of the Office of Mental Health, forensic evaluators from the Office of mental health examine the detainee at the jail and determine which of three facilities a person will go to depending on their security risk.
2. All women and medium security males risk detainees go to Elgin MHC.
3. High risk males go to Chester MHC. Sometimes, overflow goes to here originally destined for Elgin depending on bed spaces.
4. Developmentally delayed detainees go to Alton MHC.
5. **UST detainees** will need to be evaluated at Cook County Jail for fitness for trial by separate evaluators (not Cermak or the Forensic State Facility) employed by the court and who are responsible to report on fitness (Court Services- commonly referred to as the 10th floor). Once fit, their trial or case can begin. The case has been suspended up until then till the defendant is ready for trial. They will return to the jail and the judge will control their release from the jail through the disposition of the case.
6. **NGRI cases** are supervised by the judge of the original case who then allows the person into the community **conditionally** under court supervision only after in open court that judge has determined that there is an acceptable community plan. Pending that plan, the person is held in one of the state forensic mental health facilities. The Office of Mental Health supervises these releases and monitors the reporting to the county court through community agencies. Cases are typically monitored for the length of the maximum sentence for the charge or five years whichever is longer.

Prisons- These are state facilities. They are for persons who have been convicted and received sentences for more than a year including those who are **guilty but mentally ill**. There are 43,000 persons in Illinois prisons throughout the state. About 53% of persons in IDOC facilities are from Cook County.

1. Statewide there are four reception and classification centers. Males leaving Cook County are screened for risk and placement at Statesville Reception in Joliet. All Females are screened at Dwight receiving.
2. Initial sentences are reduced by half for time considered served and that along with other ways of earning or losing good time results in your final out-date. At times, this date changes unexpectedly and prison officials may need to plan for release quickly.
3. Field services plans the release. There are field service officers at every facility.

4. Dixon STC (Males) and Dwight (females) are the site where most of the MI population is housed.
5. Sheridan and Southwestern Illinois Correctional Center(SWICC) are two prison programs dedicated to substance abuse treatment. Sheridan prison offers three lengths of stay. 6-9 months,9-12 months and 12-24 months. These offenders are selected by IDOC as those who are at risk for recidivism. They receive intensive substance abuse treatment, comprehensive case management, life skills, vocational training and job placement.. Participation in this program is voluntary, if the offender meets the criteria.

SWICC (Southwestern Illinois Correctional Center) is located in East St. Louis, and is also a fully dedicated drug prison. In 2006 IDOC created a 200-bed methamphetamine unit at SWICC. It is one of the first programs in the country to be specifically designed for this population. Both programs have substance abuse treatment, case management, life skills, vocational programming and job placement in the prison. TASC has been contracted to provide case management and Safer is the provider of job readiness in both institutions. This programming continues in the community by counselors from the same programs. The cooperative treatment and placement in the community as well as continued follow-up from the same programs locally based has proven to be a successful model. Research on the program is ongoing. These programs are the first IDOC Programs that included community dollars as part of the prison budget to follow the ex-offender upon release in support of avoiding future prison stays (money follows the person).

6. **Parole** is a conditional release at the end of one's good time into the community. Each parolee has a **parole officer** who supervises that inmate's time in the community. Regular drug screens and regular reporting are requirements. Failure to follow parole will result in a return to prison to finish the full sentence of your original charge. **A new criminal case** "caught while on parole" results in a review of the appropriateness of the inmate being in the community and will result in a parole hold in the jail which will delay a release from any Illinois jail.
7. **Placement Resources** is an IDOC department that recruits, and monitors contractual services for offenders with special needs in the community. PRU assists field services with identifying placement for difficult cases and for acting as a liaison to the community for placement.

Electronic Monitoring- See notes for probation above on electronic monitoring. Same description except that you report to parole instead of probation. From IDOC, a person is always required to wait at their host site upon release for up to 72 hours or when parole meets you. You are on "lockdown" (meaning you can not leave). You call into an 800 number to verify that you are at your site within 24 hours of release. Those on electronic monitoring remain on lockdown until the electronic monitor is put on and you have met your parole officer for the initial meeting.

Halfway Back Centers- There is one state facility and are designed to prevent a return to prison for the entire remainder of a person's parole. At their discretion, a parole agent in consultation with a supervisor may elect to have a parolee picked and brought to a halfway back center as an intermediate sanction to a return to prison for a violation of parole conditions. The intent is to stabilize and return the person back to the community with additional support and supervision.

Sexually Dangerous Offenders- A small group of individuals considered to dangerous for release at the conclusion of their sentence are transferred to a DHS / DMH specialized secure facility in Rushville for long term treatment planning and release. This is a civil commitment with high standards to be included in the program and equally high standards for community release. All decisions to approve a community plan are made by the civil court upon recommendations by the Division of Mental Health.