

## EXECUTIVE SUMMARY

The consistent theme and biggest challenge across all facilities and stated by nearly all stakeholders is the mental health crisis. The majority of inmates in the system increasingly have chronic mental health issues, medication needs, and/or substance abuse issues. All stakeholders agreed that jails are not the appropriate location for most of this population, and many should actually be in a clinical setting.

Multnomah County has some truly innovative pre-trial programs to divert people from jail, and the Corrections Grand Jury was impressed with programs such as LEAD® and Close Street. In addition, there were plentiful in-jail programs and services. However, there is a lack of ability to do discharge planning due to unpredictable release dates and insufficient post-jail community services. In turn, a “warm hand-off” is not happening for most people. If transitions during the critical discharge period could be bridged more successfully, and if in-jail service providers could be better tied to after-jail treatment and discharge planning, recidivism rates could potentially be lowered. Currently there is a 70% failure to appear for community programs on the part of inmates released from custody.

Lack of funded bed capacity is another concern that affects daily operations in the county jails. The jails are regularly operating at 90% capacity or above (ideal operating levels are 82%-85% capacity), and staff are hamstrung by their inability to move inmates to the housing unit that best suits their needs. The intention of this constraint is to place a “healthy tension” on the system to drive the development of alternatives to jail. Instead of forcing the system to change, this “healthy tension” places enormous stress on correctional staff, places inmates in overly restrictive housing, and releases inmates prematurely into the community. Exacerbating the challenges with funded capacity are insufficient staffing levels and frequent mandatory overtime. This is further complicated by regular challenges with recruiting and filling positions on the team. The Corrections Grand Jury recommends reevaluating the 2017 capacity cuts and commissioning a new staffing study to recalculate appropriate staffing levels.

Multiple positive changes have occurred since the 2017 Corrections Grand Jury report. The Quick Report system implemented in 2018 to electronically record all instances of Use of Force is a much more comprehensive system than the previous paper records. It more effectively documents Use of Force events, increases accountability, gives inmates a voice, and results in more usable data. The Corrections Grand Jury was also pleased to see the removal of the fee for inmates to submit a Medical Request Form (MRF) and the prompt medical staff response time. Additionally, the Corrections Grand Jury was impressed with the caliber of staff and general desire of staff to support inmate success and lower recidivism.