

# **SUPERMAX HOUSING: A SURVEY OF CURRENT PRACTICE**

*Special Issues in Corrections*

*March 1997*

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LIS, Inc.

**U.S. Department of Justice  
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Information Center  
Longmont, Colorado**

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## Introduction

The NIC Prisons Division and Information Center initiated a nationwide survey of current supermax housing practice in December 1996. Goals of the project were to identify current and planned **supermax** housing, to explore issues in inmate management in supermax, and to examine the programming provided to inmates in **supermax** housing. Responses were received from corrections departments (DOCs) in 50 states; the District of Columbia; New York City, New York; Cook County (Chicago), Illinois; and from the Federal Bureau of Prisons and the Correctional Service of Canada.

The survey was based on the following definition of "supermax":

***In this survey, "supermax" housing is defined as a free-standing facility, or a distinct unit within a facility that provides for the management and secure control of inmates who have been officially designated as exhibiting violent or serious & disruptive behavior while incarcerated. Such inmates have been determined to be a threat to safety and security in traditional high-security facilities, and their behavior can be controlled only by separation, restricted movement, and limited direct access to staff and other inmates.***

***Supermax housing, for purposes of this survey, does not include maximum or close custody facilities or units that are designated for routine housing of***

***inmates with high custody needs, inmates in disciplinary segregation or protective custody, or other inmates requiring segregation or separation for other routine purposes.***

Survey results and discussions with DOC staff suggest, however, that a common definition of supermax housing is problematic. Many of the DOCs could not respond to the survey on the basis of the definition provided, instead providing data on the most closely comparable custody level or type of housing.

The diversity of responses makes clear that the DOCs have differing reasons and needs for operating supermax housing, and that they consider different factors in their inmate classification systems and facility operations related to supermax. It is clear that what is "supermax" in one jurisdiction may not be supermax in another. Supermax as defined in the survey may exist in relatively few agencies.

## Agencies' Use of Supermax Housing

It is evident that some jurisdictions\* **supermax** facilities or units house only those inmates who cannot be controlled in traditional segregation or administrative confinement conditions. Others are, essentially, an extension or expansion of traditional segregation or administrative confinement and may house either or both protective custody and disciplinary segregation inmates.

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In some jurisdictions, mentally ill inmates are specifically excluded from the supermax population, while in others this level of control is viewed as necessary because of the paucity of mental health resources. Some supermax facilities or units have transitional beds that provide an opportunity for inmates to earn privileges that are very similar to those in maximum general population. In the case of a **supermax** unit within a high custody facility, the supermax bed count does not usually include transitional beds to the same extent as in a free-standing supermax facility.

The following examples illustrate the breadth of interpretation and application of supermax housing.

**South Carolina DOC-Supermax** in South Carolina consists of a SO-bed unit within the Kirkland Correctional Institution. Expansion of supermax by 150 beds is being contemplated. Supermax inmates in South Carolina are those inmates who have demonstrated an inability to conform to the rules and regulations of Administrative Segregation and have a history of violent, assaultive, and/or disruptive behavior within the correctional system. The minimum length of stay in supermax is 18 months. Although a transitional program exists on the unit, the highest level of achievement earns the inmate one visit and one telephone call per month (as compared to those privileges once every 3 months at the next lower level). In this context, the South Carolina DOC projects a need for **supermax** beds equal to 1 percent of its prison capacity.

**Colorado DOC-The field** has characteristically described the Colorado State Penitentiary as a **supermax** prison. Yet the Colorado DOC does not use the term "supermax" in referring to this institution or its operational policy or practice. Rather, this 504-bed prison is operated as an "administrative segregation" prison that includes inmates in protective custody and in several levels of transition to general population. The DOC is currently constructing an addition that will provide more transitional beds. The transitional program provides an opportunity to earn participation in group activity, institutional jobs, and other privileges that approach general population living. In this context, the Colorado DOC indicates a need for administrative segregation (supermax) beds for 5 percent of its incarcerated population

**Mississippi DOC-** Mississippi DOC has two facilities described as supermax, with a total of 1,056 beds. The DOC is planning to add an additional 700 beds. All new arrivals to these facilities are placed in "C" custody, which requires movement in restraint gear and living **restrictions** that are essentially equivalent to segregation conditions. An inmate may be placed in "D" custody if determined to be a danger to the security of the facility or the safety of staff and inmates. The living conditions of "C" and "D" custody inmates are essentially the same, except those in "D" custody are not allowed visitors. The next lower custody classification is "B" custody, in which inmates live in medium security units under medium custody restrictions. Thus, many inmates who would reside in the general population of a maximum security institution in many other jurisdictions reside in what is described as **supermax** housing under supermax restrictions in Mississippi. In this context, the DOC projects a need for 20 percent of its capacity to be supermax beds.

**Michigan DOC-The Michigan DOC** has designated a 421 -bed **supermax** facility for the housing of inmates who:

- Threatened or injured other prisoners or staff;
- Possessed deadly weapons or dangerous drugs;
- Disrupted the orderly operation of a prison; or
- Escaped or attempted to escape in a manner that involved injury, threat of life, or use of deadly weapons.

Two levels of transitional programming are provided: intermediate pre-transfer, and pm-transfer status. The first provides for reduced restrictions after 1 year in supermax and allows activities in groups of up to seven inmates, with additional non-contact visits. Pre-transfer status is possible after 6 months of good adjustment in the intermediate level; it provides expanded out-of-cell activity and requires participation in work. In this context, the DOC projects a need for **supermax** beds equal to 1 percent of prison capacity.

**Federal Bureau of Prisons-The Michigan** approach and criteria for placement of inmates in **supermax** model those of the Federal Bureau of Prisons Administrative Maximum Security (ADX)

facility in Florence, Colorado. This is a prison of 480 beds and serves the BOP's need for confinement of the most dangerous and aggressive inmates in the federal system as well as some inmates from state jurisdictions. The BOP projects a need for supermax beds equal to 0.5 percent of system capacity.

## **Development of Supermax Housing**

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Given that DOCs' use and definitions of supermax housing vary widely, the survey data provide only a general sense of related activity. Tabulated information and observations provided in this report are based on the actual survey responses of the DOCs, with no attempt to adjust or interpret the data to account for differing applications of supermax.

Table 1, pages 4-6, summarizes information on current and planned supermax housing and indicates the percentage of total capacity needed for **supermax** and other segregation housing in each DOC. Table 2, page 7, indicates whether DOCs' current and planned **supermax** facilities/units were designed for **supermax** use or were retrofitted.

Among the 55 responding DOCs:

- Thirty-four agencies either are operating supermax housing or are opening **supermax** facilities/units within the next two years.
- Four DOCs do not currently operate **supermax** housing but are either considering the need for it or are actively pursuing construction funds.
- Seventeen agencies reported no activity related to developing **supermax** housing.
- At present there are at least 57 supermax facilities/units nationwide (including 16 in the Texas DOC alone), providing a total of more than 13,500 beds. Ten DOCs are pursuing the development of approximately 3,000 additional **supermax** beds.
- The earliest supermax housing opened in 1954 in Mississippi. Fifteen supermax facilities or units were opened from 1989 through 1993, and five

more from 1994 through 1996. Five additional facilities or units are projected to be opened by 1999.

- The need to better manage violent and seriously disruptive inmates was cited as a major factor in the development of **supermax** housing by 36 of 37 responding DOCs. The need to better manage gang activists was ranked as a major factor by 17 DOCs. Also of some importance were projected increases in commitments of adult violent offenders.
- Factors of less overall importance among the DOCs were a shortage of segregation beds due to crowding; legislative interest; and projected increases in commitments of juvenile violent offenders. Least important was the availability of federal Crime Bill construction funds.

## **Issues in Supermax Operation**

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The survey also sought information on DOCs' administration of supermax housing. Findings in brief:

- Sixteen DOCs have not used **supermax** housing for routine segregation purposes (e.g., discipline, protective custody, and program segregation) to compensate for a shortage of segregation beds. Twelve DOCs have done so. In seven of these agencies, the routine segregation inmates have been managed in the same way as persons officially designated as requiring supermax housing; the other five DOCs have managed these inmates differently from supermax inmates.
- Twenty-two DOCs use an objective classification instrument or other standardized system to determine whether an inmate is appropriate for placement in **supermax** housing. Four agencies cited special criteria for making such determinations, and one cited the disciplinary process.
- Authority for placing inmates in and removing inmates from **supermax** housing rests at the institutional level in about half the DOCs that have supermax. In the other half, the decision is made at the central office level, by the DOC director or deputy director.

- Twenty-three DOCs have a fixed system, program, or set of criteria under which an inmate can earn transfer out of supermax; five DOCs do not have such a system.
- In only one DOC can an inmate who displays extremely violent or disruptive behavior be permanently assigned to supermax housing.
- In 22 DOCs, it is possible for inmates to complete their sentences in **supermax** housing and be released to the community directly from supermax. Six DOCs indicated this is not possible. The Illinois and Indiana DOCs, for example, move inmates from **supermax** to normal maximum classification before release. The Federal Bureau of Prisons does not release inmates directly from supermax except under court order.
- In 16 DOCs, supermax inmates have the opportunity for physical contact with staff, defined by the survey as excluding contact while exchanging materials through a door slot, providing medical treatment, or providing physical escort. In most cases, physical contact is limited to staff on the floor during recreation, caseworkers, or classification or security staff, or it occurs “as necessary.” Thirteen DOCs indicated that physical contact between supermax inmates and staff is not possible.
- Supermax inmates have the opportunity for physical contact with other inmates in 16 DOCs. Where allowed, contact usually occurs during recreation. Thirteen DOCs do not allow the opportunity for contact with other inmates.
- DOCs with **supermax** housing typically require these inmates to spend most of the day in their cells: in 20 DOCs, **supermax** inmates spend 23 hours per day in their cells, and in four DOCs they are in-cell from 22 to 22.75 hours per day. Three DOCs reported a range depending on factors such as work privileges. The Correctional Service of Canada reported the smallest number, 15 hours per day.
- Many DOCs have developed special approaches to staffing their supermax housing. Nineteen agencies use special selection or screening processes to identify staff for positions in supermax; 20 provide special training to staff of supermax units or facilities; and 17 rotate personnel who staff supermax housing.

**Table 1. Status of Supermax Housing in DOCs<sup>1</sup>**

	Facility Name and Location	Number of Supermax Beds	Year Opened/ Will Open for Supermax Use	Percentage of Systemwide Capacity Needed for Segregation Purposes		
				Supermax	Routine disciplinary segregation	Other routine segregation
Alabama	—	0	—	3%	7%	3%
Alaska	—	0	—	—	3%	7%
Arizona	(SMU I)	1,728	1987	8%	20%	8%
	(SMU II)		1996	—	<5%	5%
Arkansas	—	0	—	1.8%	—	3.5%
California	Pelican Bay State Prison, Crescent City	1,584	1990	5%	5%	5%
	California State Prison, Corcoran	1,296	1989			
	Valley State Prison for Women	62	1995			
Colorado	Colorado State Penitentiary, Cañon City	504	1993	5%	2.4% (combined)	
Connecticut	Northern Correctional Institution, Somers	586	1995	4%	3%	1%

1. Supplemental information on facilities was obtained, where available, from the American Correctional Association (1996 Directory, *Juvenile and Adult Correctional Departments, Institutions, Agencies and Paroling Authorities*, 1996).

Table 1, continued

	Facility Name and Location	Number of Supermax Beds	Year Opened/ Will Open for Supermax Use	Percentage of Systemwide Capacity Needed for Segregation Purposes		
				Supermax	Routine disciplinary segregation	Other routine segregation
Delaware	—	0	—	—	0.8%	7.5%
D.C.	—	0	—	—	0.09%	0.08%
Florida	(Pending; not funded)	(1,000)	—	3%	5%	7%
Georgia	Georgia State Prison, Reidsville	10	1990	—	—	—
Hawaii	—	0	—	<1%	3%	5%
Idaho	Idaho Maximum Security Institution, Boise	96	1989	—	—	—
Illinois	Maximum Security Institution, Joliet	500	Projected 1997-98	—	—	—
Indiana	Maximum Control Complex, Westville	85	1991	—	—	—
Iowa	(Pending; DOC has not determined a need for supermax beds)	0	—	3%	7%	10%
Kansas	—	0	—	0%	1%	5%
Kentucky	—	0	—	0%	4%	4%
Louisiana	Louisiana State Penitentiary, Angola	872	n.d.	6%	—	—
	Hunt Correctional Center	64	n.d.			
	Wade Correctional Center, Homer	112	n.d.			
Maine	Maine Correctional Institution, Warren	100	1992	6.7%	1.9%	6.6%
Maryland	Maryland Correctional Adjustment Center, Baltimore	286	1989	1%	2.5%	1%
Massachusetts	Massachusetts Correctional Institution, Walpole	124	1992	—	—	—
Michigan	Ionia Maximum Security Facility, Ionia	421	1988	1%	1.2%	4.3%
Minnesota	Minnesota Correctional Facility, Oak Park Heights	35	1982	1-2%	8-10%	0%
	(New unit under DOC consideration)	(60)	—			
Mississippi	Mississippi State Prison, Parchman, Unit 32	1,000	1990	20%	—	35%
	Mississippi State Prison, Parchman, Unit 17	56	1954			
	(Pending; retrofit, Crime Bill funding)	(700)	—			
Missouri	—	0	—	—	1%	8%
Montana	Montana State Prison, Deer Lodge	64	1986	—	—	—
Nebraska	Nebraska State Penitentiary, Lincoln	36	n.d.	1-2%	—	—
	(Pending approval)	(128)	—			
Nevada	Ely State Prison, Ely	430	n.d.	—	—	—
New Hampshire	—	0	—	—	2%	5%
New Jersey	New Jersey State Prison, Trenton	96	1977	<1%	1%	1%
New Mexico	(Pending; DOC has not determined a need for supermax)	0	—	(0%)	2.5%	5.4%

Table 1, continued

	Facility Name and Location	Number of Supermax Beds	Year Opened/ Will Open for Supermax Use	Percentage of Systemwide Capacity Needed for Segregation Purposes		
				Supermax	Routine disciplinary segregation	Other routine segregation
New York	—	0	—	—	3.2%	1.2%
North Carolina	Polk Youth Institution, Raleigh	100	Projected 1998	0.5%	2%	2.5%
	(Pending; under DOC consideration)	(200)	—			
North Dakota	—	0	—	0%	1.5%	4%
Ohio	(Unnamed facility), Youngstown	500	Projected 1998	1%	2%	3%
Oklahoma	Oklahoma State Penitentiary, McAlester	392	1991	0.5%	2%	0.5%
Oregon	Oregon State Penitentiary, Salem	196	1991	2%	4%	1%
Pennsylvania	State Correctional Institution, Camp Hill	100	1992	0.5%	7%	3%
	State Correctional Institution, Greene	25	1995			
Rhode Island	High Security Facility, Cranston	108	1980	3%	8% (combined)	
South Carolina	Kirkland Correctional Institution	50	1993	1%	—	10%
	(Pending; under DOC consideration)	(150)	—			
South Dakota	—	0	—	0%	7%	1%
Tennessee	—	0	—	—	—	—
Texas	Multiple locations	1,229	(N/A)	—	—	7%
	(Pending; before legislature)	(# unknown)	—			
Utah	—	0	—	—	5%	5%
Vermont	—	0	—	0%	3.6%	0.7%
Virginia	Red Onion	(N/A)	Projected 1998	8%	2%	10%
	Wallens Ridge	(N/A)	Projected 1998			
Washington	Washington State Penitentiary, Walla Walla	96	1984	6%	4% (combined)	
	Clallam Bay Corrections Center, Clallam Bay	62	1991			
	Washington Corrections Center, Shelton	62	1985			
	(Pending; before legislature)	(80)	—			
West Virginia	—	0	—	—	—	—
Wisconsin	(Pending; before legislature; recommended for siting at Boscobel)	(350-500)	Projected 1999	4-5%	10%	>1%
Wyoming	Wyoming State Penitentiary, Rawlins	12	1981	1%	2.7%	1%
	(Pending; before legislature)	24	—			
U.S. Bureau of Prisons	United States Penitentiary, Florence, Colorado	480	1994	0.5%	5%*	0.5%**
Correctional Service of Canada	Regional Reception Centre, Sainte-Anne-des-Plaines, Quebec	120	n.d.	0.9%	2.7%	7.6%
New York City	—	0	—	—	—	—
Cook Co., Illinois	—	0	—	—	—	—

\* Includes BOP AD/DS beds.

\*\* Includes BOP protective custody only.



## Programming for Inmates in Supermax

At issue is what programming is provided to inmates in **supermax** housing and how it is provided.

**Location of program delivery.** Out-of-cell programming is available to supermax inmates in 13 DOCs. Some facilities (in Indiana, Michigan, and New Jersey, for example) have secured modules or carrels in which programming is provided. Three

other DOCs (in Pennsylvania, Rhode Island, and Washington) specified that out-of-cell programming is available for inmates who have earned less restrictive confinement but are still in **supermax** housing. Fifteen agencies do not provide any programs to supermax inmates outside their cells.

**Core programs.** Correctional facilities make the core programs of mental health care, access to law library materials, and religious observance available

**Table 2. Construction of DOCs' Supermax Housing**

	New Construction, Designed for Supermax			Retrofitted Construction	
	Separate facility	Unit in new facility	Unit in pre-existing facility	Separate facility	Unit in pre-existing facility
Arizona	✓				
California	✓				✓
Colorado	✓				
Connecticut	✓				
Florida	✓*				
Georgia			✓		
Idaho		✓			
Illinois	✓				
Indiana	✓				
Louisiana					✓
Maine	✓				
Maryland	✓				
Massachusetts			✓		
Michigan				✓	
Minnesota		✓	✓*		
Mississippi	✓				✓*
Montana			✓		
Nebraska			✓*		✓
Nevada		✓			
New Jersey					✓
North Carolina		✓	✓*		
Ohio	✓				
Oklahoma			✓		
Oregon			✓		
Pennsylvania		✓	✓		
Rhode Island	✓	✓*			
South Carolina			✓		✓*
Texas	✓		✓		✓
Virginia	✓				
Washington		✓*	✓		✓
Wisconsin	✓*				
Wyoming		✓*			✓
U.S. Bureau of Prisons	✓				
Correctional Service Canada		✓			

\* Indicates facility that is under DOC consideration and/or has not yet received outside funding approval.

through a variety of means. A number of DOCs use more than one approach to providing these services.

*Mental health care*- Service approaches described by DOCs include:

- One-on-one cam on as-needed basis-8 DOCs (Georgia, Indiana, Maine, Maryland, Minnesota, Nebraska, Wyoming, and the Federal Bureau of Prisons).
- Mental health staff dedicated to unit or facility-7 DOCs (California, Maryland [planned facility], Mississippi, New Jersey, Oklahoma, Oregon, and Washington).
- Routine, scheduled screenings or visits-6 DOCs (Illinois, Michigan, Montana, Nevada, Pennsylvania, South Carolina, and Texas).
- Closed-circuit television, with possible follow-up by mental health staff-2 DOCs (Colorado and the Federal Bureau of Prisons).
- Clinic in the facility or unit-3 DOCs (California [separate Psychiatric Services Unit], Idaho, and the Correctional Service of Canada [20 specialized beds]).
- Crisis intervention only-1 DOC (Massachusetts).

*Law library* - Methods of access described by DOCs include:

- Materials delivered to cell on request-13 DOCs (Colorado, Georgia, Illinois, Indiana, Michigan, Minnesota, Montana, New Jersey, Nevada, Texas, Washington, Wyoming, and the Correctional Service of Canada).
- Satellite or mini-library on unit-9 DOCs (California, Illinois, Michigan, Oklahoma, Oregon, Pennsylvania, South Carolina, and the Federal Bureau of Prisons).
- Inmates escorted to law library-4 DOCs (Arizona, Idaho, Indiana, and Nebraska).

- Access provided as needed-2 DOCs (Maryland [materials are brought daily from another institution's library] and Rhode Island).

**Religious observance** - Chaplains are available to supermax inmates in all DOCs. Specific methods of providing for religious observance include:

- In cell, on request or through regular chaplain visits -17 DOCs (Connecticut, Georgia, Idaho, Maine, Maryland, Massachusetts, Michigan, Minnesota, New Jersey, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Texas, Washington, Wyoming, and the Federal Bureau of Prisons).
- Closed-circuit television or recordings of religious services-5 DOCs (Colorado, Nebraska, Nevada, South Carolina, and the Federal Bureau of Prisons).
- Religious materials available-3 DOCs (Arizona, Michigan, and Minnesota).
- Services provided in unit-2 DOCs (Montana and the Federal Bureau of Prisons).
- Cell-front services-1 DOC (Arizona).
- Services provided in counselor cubicle-1 DOC (Indiana).

**Other programs.** Most of the DOCs with **supermax** housing provide both library services (25 DOCs) and educational programming (21 DOCs) to these inmates. Additional programs mentioned by agencies include:

- Anger management -12 DOCs (Arizona, Colorado, Connecticut, Georgia, Idaho, Illinois, Mississippi, New Jersey, Oregon, Wyoming, the Federal Bureau of Prisons, and the Correctional Service of Canada).
- Substance abuse treatment-9 DOCs (Arizona, Colorado, Georgia, Illinois, Indiana, Oregon, Wyoming, the Federal Bureau of Prisons, and the Correctional Service of Canada).

- Recreation programming (defined by the survey as providing more than simply an opportunity for physical exercise)-8 DOCs (Arizona, California, Colorado, Connecticut, Georgia, New Jersey, Oregon, and the Federal Bureau of Prisons).
- Sex offender treatment-3 DOCs (Georgia, Oregon, and the Correctional Service of Canada).
- Life skills-2 DOCs (Illinois and Rhode Island).
- Gang de-programming - 1 DOC (Colorado).
- Cognitive change - 1 DOC (Oregon).
- Group programs - 1 DOC (Oregon).
- Repeat offender programs-1 DOC (Oregon).
- Small group work-1 DOC (Pennsylvania).

### **Directions for Further Study**

Because of differing definitions of **supermax** housing among the DOCs, few conclusions can be drawn from the survey results. Present data do, however, give rise to several questions and issues that may provide direc-

tion for study and program development by NIC. Among these questions are the following:

- Is “supemax” primarily a correctional architecture term that describes a new wave of prison construction? Is it an institutional/unit security designation? Is it a new inmate custody/confinement status associated with a changing inmate profile? Or is it a combination of these?
- In further study to assess the nature and extent of DOCs’ participation and interest in **supermax** housing, is it more useful and appropriate to **track** the number of beds designated for **supermax** or the number of inmates who meet certain criteria related to conduct and dangerousness?
- At what programmatic point is a **supermax** bed or **supermax** inmate no longer “supermax,” though still in a supermax setting? Should the cell or the inmate in it be considered **supermax** if the inmate has earned an institutional job, relaxed restrictions on movement, or other conditions comparable to those of a maximum general population inmate?

The preliminary findings discussed in this report, in combination with additional information gained through contacts with the field, will be the basis for NIC planning for activity in 1997 and beyond. ♦

## Appendix A. DOC Contacts on Supermax Issues

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