

**MINUTES OF THE MEETING
OF THE
ASSEMBLY SELECT COMMITTEE ON CORRECTIONS, PAROLE, AND
PROBATION**

**Seventy-Fourth Session
April 17, 2007**

The Select Committee on Corrections, Parole, and Probation was called to order by Chair David R. Parks at 3:55 p.m., on Tuesday, April 17, 2007, in Room 3161 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. The meeting was videoconferenced to Room 4406 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)), the Attendance Roster ([Exhibit B](#)), and other substantive exhibits are available and on file in the Research Library of the Legislative Counsel Bureau and on the Nevada Legislature's website at www.leg.state.nv.us/74th/committees/. In addition, copies of the audio record may be purchased through the Legislative Counsel Bureau's Publications Office (email: publications@lcb.state.nv.us; telephone: 775-684-6835).

COMMITTEE MEMBERS PRESENT:

Assemblyman David R. Parks, Chair
Assemblyman Bernie Anderson, Vice Chair
Assemblyman John C. Carpenter
Assemblyman William Horne
Assemblywoman Kathy McClain
Assemblywoman Valerie E. Weber

STAFF MEMBERS PRESENT:

Craig Hoffecker, Committee Policy Analyst
Matt Nichols, Committee Counsel
Brooke Bishop, Committee Secretary
Deanna Duncan, Committee Manager
Olivia Lloyd, Committee Assistant



OTHERS PRESENT:

Michael Thompson, Director, Council of State Governments
Justice Center
Dr. James F. Austin, President, JFA Associates
Dr. Fred Osher, Director of Health Systems and Services Policy, Council
of State Governments Justice Center
Joseph Turco, Public Advocate, American Civil Liberties Union
of Nevada
Patricia Hines, Private Citizen, Yerington, Nevada
Constance Kosuda, Private Citizen, Las Vegas, Nevada
Sharon Samson, Private Citizen, Las Vegas, Nevada
John Emerson, Nevada Legislative Advocate, Three Agencies of the
United Methodist Church

Chair Parks:

I will begin with the adjournment of our April 12, 2007, meeting which we recessed.

[Roll called.] We will now start our meeting with a presentation from Dr. James Austin from JFA Associates and individuals from the Council of State Governments (CSG).

Michael Thompson, Director, Council of State Governments Justice Center:

My presentation today reviews a number of options for Nevada to consider that have the potential to increase public safety and generate savings to the state. I will review three components: an overview of what is taking place across the country, the other states facing similar situations to Nevada, and finally, how those particular states are responding.

Dr. James Austin from JFA Associates will review different options for Nevada's prison system and for increasing its public safety at the same time. Dr. Austin is one of the leading corrections experts in the country. He specializes in assisting states in reducing recidivism, determining who poses less risk to society and analyzing their state prison populations. Dr. Fred Osher is a nationally known psychologist with expertise in people with co-occurring mental health and substance abuse disorders. He is the Director of Health Systems and Services Policy for CSG's Justice Center. He will do a presentation on mental health, the effects of drug abuse on the human brain, and how those two items relate to Nevada's prison population.

Again, I will start with an overview of who we are and what we are seeing across the country ([Exhibit D](#)). The Council of State Governments is a

nonpartisan, nonprofit membership association. Most of you here belong to CSG. We are the only membership association in the country that includes all three branches of state government. The Council of State Governments has enjoyed a long, terrific relationship with Nevada, especially with former Assemblyman Hettrick being our past chair. Assemblywoman Leslie is a board member of our Justice Center and does terrific work with Chairman Parks and Speaker pro Tempore Anderson and others.

Two projects we have been working on have been focused around reentry and mental health, and those people with mental illness who are in the justice system. Our reentry report was endorsed by then United States Attorney General John Ashcroft and United States Senator Ted Kennedy. We like to think if those two people could agree on such comprehensive, bipartisan recommendations, you could get a sense of our effort to make sure we really do span the political spectrum.

Our justice reinvestment project stems from a number of conversations that have occurred among leading lawmakers from across the country and among correctional directors. I remember one exchange in particular involving a state senator on the Senate Appropriations Committee in Pennsylvania. He was a Republican speaking to correctional directors and was expressing frustration that each year he was authorizing additional appropriations for the construction of a new prison. He said to the director of corrections, "When does this end? When do we get a handle on this growth?" Another correctional director spoke up for Michigan and said, "I can tell you that today one out of every three people who work for the state of Michigan works for the Department of Corrections." In Ohio, one out of every four people who work for the state work for the Department of Corrections. They have become the largest state employer in a number of different states. It is consuming a larger and larger percentage of state spending in states across the country. Recidivism rates have not improved over the same time period, however. In fact, in some cases, they have actually gotten worse. There is a sense we need to be doing business a different way. From that comes our Justice Reinvestment Project (JRP), which receives funding and support from the United States Department of Justice and also from private foundations.

We essentially try to provide data and information to help policymakers figure out a way to manage the growth of their prison populations and to enable them to look at particular neighborhoods that are receiving a disproportionately large number of people released from prison. Consequently, there are increased public safety requirements in those neighborhoods. Currently, we are working with Arizona, Texas, Kansas, Connecticut, and Rhode Island. We are also very pleased to begin working now with Nevada and Pennsylvania.

Because we are incarcerating more people, is it not true that crime has declined? Can we not assume by increasing our incarceration rates, increasing our prison population, generally we will continue to have declining crime rates? These are just some statistics ([Exhibit D](#)) about the percentage of people under supervision in the criminal justice system in different states. Texas is second in the nation with 4.6 percent of people under supervision in the criminal justice system on a given day. New York is lower at 1.8 percent, though it used to be the largest. The other two are California and Florida. What is interesting about these four states and what the chart shows is regarding the population increases over the last 25 years, along with incarceration rates. The crime rates, however, have dropped.

Texas, for example, has increased its incarceration rate 206 percent since 1980. Its crime rate has dropped 20 percent. New York, on the other hand, increased its incarceration rate 74 percent, yet its crime rate dropped 54 percent. So, New York's prison population actually declined over the last five years while it experienced one of the steepest declines in its crime rate. So, there is no way to say that states that lock up more people have less crime or are safer places. In fact, we can't see any direct correlation between the two.

Connecticut is facing a predicament very similar to what Nevada is facing today. Connecticut, in 2003, had about 20,000 people incarcerated. It went from 3,000 in the early 1980s to 20,000 in 2003. This is a projection ([Exhibit D](#)) Dr. Austin did for the state of Connecticut in 2003, showing that its incarceration rate was going to be increasing significantly over the next three years. Connecticut was looking at sending an additional 2,000 prisoners out of state, to the state of Virginia, in order to accommodate its overflow. Connecticut's Department of Corrections was requesting an additional \$50 million per year for that particular contract. We put together a number of scenarios and analyzed the prison population. We found out that prisoners were coming from very particular neighborhoods in the state. This slide ([Exhibit D](#)) shows the city of New Haven, which has about 170,000 people. In one neighborhood in particular, they were spending \$20 million on prison admissions each year and \$6.2 million was spent in that neighborhood on probation violators alone.

What is interesting, and we did this presentation with a joint committee of appropriations and other policy committees, is that on the far left you see a map ([Exhibit D](#)) of probationers and the concentration of probationers in particular neighborhoods in New Haven. You will see in the middle map the concentration of unemployment insurance claims and where they were the highest. The far left map has the concentration of Temporary Assistance for Needy Families (TANF) recipients. So, literally, these were the same

neighborhoods that the state was already pouring money into. These were the kind of outcomes they were getting. The question was then raised that if the state was going to be making those kinds of investments in these kinds of neighborhoods, shouldn't they be getting better outcomes?

We put together a series of options for the state to manage the growth of its prison population. For example, one option was reducing the length of stay for a probation violator because they failed to show up for an appointment or because they had a dirty urine test. We recommended shortening that length of stay from 12 months to 9 months. This reduced the number of probation violators returned to prison by 20 percent. We estimated these things would save the state about \$50 million. Connecticut unanimously approved the plan in the Senate and nearly unanimously passed it in the House, though there were those who thought the legislation didn't go far enough. The prison population went from the second fastest growing in the country to the one with the second steepest decline over the next two to three years.

The other key thing Connecticut did besides not spending \$50 million in sending people out of state, was that it took \$15 million of the money it was going to save and reinvested it in some of these neighborhoods we are talking about. They reinvested it in better community supervision, drug treatment, mental health treatment, and community-based housing. That is a good example of a state which was in a predicament similar to yours and what they did about it.

Assemblyman Anderson:

I have a question particular to the map you showed us of New Haven, Connecticut. I was curious to whether the population density and the age of the neighborhoods shown had a correlation to the crime rate.

Michael Thompson:

I do not think there is necessarily a correlation between high density populations and crime rates or people being incarcerated. We did see that these populations were concentrated in particular neighborhoods. We often did see that there were certain forms of subsidized housing in some of these areas. There was a lack of affordable housing in these neighborhoods. We did see a lot of different conditions in these communities. There were high unemployment rates, for example, which overlapped with the particular population.

Assemblyman Anderson:

Was the age of the housing a factor at all?

Michael Thompson:

I am not sure. This next item ([Exhibit D](#)) regards Kansas. It is currently facing a shortfall in beds over the next ten years of nearly 2,000. The state is recognizing that if it does not do anything, it is looking at spending an additional \$500 million in building and operating new prisons over the next several years. They have worked with us to develop a number of scenarios to avert the growth that is projected in the system.

The graph shows what happens if they do nothing. Again, it is an effective decision to spend an additional \$500 million. The graph also shows some of the gains the state can lock in because of parole revocations. There is also a graph here on what it can save if it reduces parole revocations by 20 percent. There is a graph on what the state should expect if it can encourage people to participate in certain programs like drug treatment, mental health treatment, and job training while they are incarcerated. If they do all three of these things, they will avert the growth entirely.

The House in Kansas has overwhelmingly passed this package of options. It is now going before a conference committee. As you know, the Kansas Legislature is dominated by Republicans. The Governor is a Democrat. It is a very bipartisan plan. Kansas is looking at reinvesting the savings that would be generated into some of these prison-based programs. The state is also looking at reinvesting in community corrections and community-based substance abuse treatment as well.

In Texas, there is a very similar situation. The state is facing major growth. It is looking at adding 10,000 beds to the system in the next few years at a cost of several billion dollars. One of the reasons why its prison population is growing is because there is a huge waiting list of people of who are incarcerated who do not have access to the kinds of community-based treatment they need. A lot of those programs were once in existence, but they were cut earlier this decade. They were cut in part to fund the additional monies Corrections needed to expand its prison population, which in turn accelerated the growth of the overall prison population. Leaders in the State of Texas House and Senate have asked for additional options other than simply building more prisons. We presented those options to them. The House budget which was passed included no new prison beds. The Senate budget included construction of one new prison and simultaneously proposed a reinvestment in community-based treatment and prison-based treatment. That has never been seen before in the state of Texas.

Those are our three very different states. Connecticut, Kansas, and Texas are all facing a similar predicament to Nevada's. They are being asked to spend

billions of dollars more in construction of facilities. Policymakers are wondering if spending that kind of money is going to have the best impact on public safety.

It was terrific to hear Director Galeoto of the Department of Public Safety talk about making neighborhood-based caseloads. This slide ([Exhibit D](#)) shows a zip code in Austin, Texas. There are 688 probationers in that one zip code. Those probationers are assigned to 72 different officers. We recommended that instead of having 72 officers assigned to that one zip code, they could have six officers assigned to that zip code and just concentrate on a particular neighborhood. These are the kinds of reallocation of resources that we think would actually increase public safety and give you better returns on your dollars. Thank you.

James Austin, President, JFA Associates:

I have been working with Nevada for many years doing population projections, evaluations, et cetera. Presently, we are under a contract with the Council of State Governments to help put together some options for the state to consider in terms of dealing with its prison situation. I think what Nevada is dealing with today is reflected in your chart ([Exhibit C](#)). We know where you are headed. Are there some things the Executive Branch and the Legislative Branch want to do to change that trend? It starts with understanding what is causing the population to go the way it is going in the state of Nevada.

This chart ([Exhibit D](#)) gives us some sense of what those trends are. It shows population growth. You are one of the fastest growing states in the country. In the last ten years, you grew by 56 percent, whereas the rest of the country grew by 13 percent. So, there is big growth in your population, and it is projected to continue to grow. Your crime rate is high. It has always been higher than the rest of the country. The violent crime rate in Nevada is 4,800 per 100,000 people. The national rate is 3,900 per 100,000. Violent crime and property crime are higher in Nevada than the rest of the country. The good news is that this State is a lot safer than it was ten years ago. You had a drop in your crime rate of about 26 percent. So, this is not a worsening condition. It is a better condition. People are safer in the state of Nevada than they were in 1997. But the rest of the country's crime rate dropped as well.

One of the points I think Mr. Thompson was making was that regardless of a state's correctional policies or sentencing policies, you see the same drop in virtually all the states, whether they are increasing their incarceration rate or lowering it.

The core of your problem right now is your admission stream, which consists of the individuals coming to prison. From 1996 to 2003, there were roughly about 4,000 males coming into the system each year. All of a sudden, in 2004, that rate started to go up and it has not stopped increasing. The same situation exists for the females except there is a larger increase in growth for them. They have been growing annually at about 8 percent.

In terms of your future demographic growth, as I mentioned, there is not going to be any relief. You are going to continue to attract more people into your state. It will continue to be one of the fastest growing states at a rate of 3 or 4 percent a year.

The population we look at most intensively is what we call the "at-risk" population. These are people between the ages of 20 and 39. These are the people very likely to be arrested, incarcerated, and to spend some time in either prison, on probation, or in an early parole system. That at-risk population is also going to increase at 3 to 4 percent a year.

You will notice the admission forecast for males is expected to grow from 5,000 males a year to over 8,000 in approximately ten years ([Exhibit D](#)). The actual prison population grows at a faster rate than the admission stream. The admission rate is really driving the growth. Instead of 12,500 males incarcerated, like there is today, you will be approaching 20,000 males being incarcerated in 2017. Women will grow at a faster rate. Although they are a smaller percentage of the prison population, they are growing faster than the males and are projected to continue to grow even faster.

So, there will be a 61 percent increase by 2017. This partly is driven because of the increasing resident population, but demographics are important also. It is not being caused by more crime or a higher crime rate. That has been going down. One of the things in particular we need to look at is the probation population and the rate of success or failure on probation. Forty-six percent of probationers are being sent to prison for a revocation of their probation term. Conversely, the parole population has a much higher success rate. About 80 percent of them are completing parole successfully. They have a failure rate of about 20 percent. This is ironic because you have the same officers supervising parolees and probationers.

So, why is it that we are getting a much different rate of success from the parolees versus the probationers? We think one of the big reasons is that legislation was passed a few years ago that allowed parolees to earn additional time off of their initial sentence, other than what they were already earning while actually on parole. Much like good time credits. Couple this reduction

with them earning time off their sentence while actually incarcerated and it adds up. What that caused, in effect, was the shortening of the time for paroled supervision, especially for people who were succeeding. Those who are succeeding get off of parole faster. They have an incentive. Their time at risk is lower so there is less of a chance of them being brought in for a technical violation. What we currently have in Nevada's parole system is a higher grant rate of parolees, with fewer people coming in for technical violations than what we had before. We also have a parolee population which is not growing.

One of the things we want you to consider is to start developing incentives like we have for the parole system, but do it for the probationers as well. Give them some rewards for succeeding. Right now they do not get any incentives. They are going to have to do that probation time whether they are being successful or not.

Another issue you have to start focusing on is the feeder systems. Seventy-eight percent of the people are coming from two places: Las Vegas and Reno. Eighty-one percent of the people who are on parole or probation are from Las Vegas or Reno. Within these two metropolitan areas, we have very, very different rates of incarceration and different rates of people being on probation and parole. This map ([Exhibit D](#)) shows the differences. The red that you see is the high concentration area. These are your feeder systems. There are four zip codes, in particular, which are starting to surface as high feeder systems. They represent 11 percent of the county's population, but represent 25 percent of all the admissions into the prison system.

This is the money you are spending by zip code ([Exhibit D](#)). You are pouring a lot of money into these particular communities. The parole and probation snapshot ([Exhibit D](#)) shows high concentrations of people on parole and probation by these zip codes. We can drill down into even more distinctive blocks or areas of these zip codes, but you begin to see where the action is in terms of your state.

One of the options we really think you need to start doing, which other states are doing across the country, is building incentives for people to complete programs while incarcerated. How do you do that? You start offering them good time credits, which can be taken off either their parole eligibility dates or off of their maximum release dates. You need to think about both of those dates. Right now, good time credits are only coming off of the sentence, which affects the mandatory supervision release date. Other states are applying those credits to not only the maximum release dates, but also to their parole eligibility dates. This would be for people who have completed programs that

we know reduce recidivism. This is where we get into the public safety issue. We want to encourage people, especially the high-risk and moderate-risk people, to get into programs that reduce their risk when they get released.

Another option that struck us right away is the fact that you are currently allowing a significant number of people to come in for Category E felonies. The original intention was that these folks would be put on probation; that was the presumption. Apparently, there are judges who are not following that, however. They are sentencing people to prison for Category E felonies prior to them being out on probation. They are not probation violators. They are being sentenced directly by the courts. We want to see if we can eliminate that, either through incentives or encouraging the judges to use programs or even as a statutory prohibition against people being sent to prison for Category E felonies.

The major option is to go after probation violators. The Department of Parole and Probation is revoking probation of about 1,800 to 1,900 probationers per year. They get sentenced for a felony crime and then are put on probation. They get sent to prison for a violation of their probation. About 50 percent of those are going to be technical violators. If we start nipping at that group—10 percent of that overall 50 percent the first year, 20 percent the second year, 30 percent the third year—we will start to see some pretty substantial savings on the prison side.

Based on our interaction with the Parole and Probation Division, we definitely believe that we need to give the division more tools to work with people. We need to get them trained in risk evidence-based principles, effective probation supervision, and cross training. We also need to give probationers an incentive to get off of supervision faster.

This last option ([Exhibit D](#)) is a provision which produces a 10-day reduction for every 30 days that they serve successfully on probation, just like you are doing with the parolees. We feel if we can get that adopted by statute, it will slow down the probation population. We will get better success off that probation population and then it would be a win-win, just like it has been for the parole system. We are also discussing the creation of a technical violator unit. Several states have created these. Their job and mission is to jump on cases quickly to help offenders that are failing in terms of their compliance with probation supervision requirements.

These are the impacts of these projected policy options ([Exhibit D](#)). They are not substantial at this point. They start nipping at the trend line. We do think, however, if we can get better guidance from this committee and other

legislative committees in terms of how you want to adjust these assumptions for these policy options, the inmate population will start dropping down fairly significantly. The ten-year growth is very large. We may get some natural relief from the prison admissions. It has happened before in Nevada. Everyone tells me not to count on it, though. When New York City added more police officers, they actually got a reduction in the prison admissions because police officers were deployed in a way that actually reduced crime rather significantly in New York City. You have new judges that have come on line. If those judges get more acquainted the consequences of their decisions, perhaps we can get them to start using sentencing differently than what they are doing now.

There is also the issue of mandatory minimums in this state. Several of the judges have expressed the need to get relief on the use of mandatory minimums. That would be another example of where we could get some reduction in the prison population. We need to get very specific.

Right now, as I said earlier, your train is headed toward that 22,000 in population and you are talking about a \$2 billion capital expansion program to meet the demand of that 22,000 population. That is just the tip of the iceberg. The operational costs will greatly exceed the \$2 billion mark.

Assemblyman Anderson:

One of the quandaries we continue to have is giving judges greater discretion on the front end of the sentence. There is no judicial discretion there and the judges continue to complain. As you pointed out with respect to Category E however, where the judges are supposed to be putting people on probation, they are not doing that. So, where we told them, "You will put them on probation," they are not doing it.

James Austin:

Well, they are not in all cases. You are going to see most of the Category E violators getting the probation term. What I was looking at was the prison admissions, where we are still getting several hundred coming in each year. However, there are a lot more offenders being convicted of Category E felonies than are being admitted. I'm just trying to plug that gap. I think, in general, the judges are complying with the Category E directive. There are some courts which are not, however. If we can plug that hole, that will help. The consensus was that Category E felons should not be coming into the prison system. There should be a presumption of probation and supervision. I think that is still true today.

I do want to make a comment about truth in sentencing because you are right, you do not get "truth" in truth in sentencing. Until you get truth in plea bargaining and truth in other areas, we are still going to have broad disparities in who comes to prison and for what reasons. I can show you a number of studies that have demonstrated when you pass truth in sentencing guidelines, often you will get greater disparity in the sentencing practice. It is certainly a lot different than what people thought. It was not as advertised. It is an issue. I believe, in this state, if we go back to 1995 or 1996, when you made the shift, we need to go back and look at those minimums. I think it is time to revisit it. As you know, Mr. Anderson, the lengths of stay laid out do not do anything for the inmate. We need to have some well thought out discretion based on the offender. Not all offenders are the same. I think judges are asking for a little bit of wiggle room there, which I think would really help that projected line.

Assemblyman Anderson:

I guess that is one part of the argument. On one hand, if judges are finding ways around the Category E sentencing, I am not comfortable giving them discretion. I am afraid they would put the minimum the other way, being so concerned with the serious nature of the crime that even if we put a low number in the front end, they would still move for the political advantage of saying, "I am tough on crime."

James Austin:

One of our recommendations is to revisit the issue of a sentencing commission. I think you had a fairly lengthy time to experiment with what was passed in 1995 and 1996. I think if you do this right, you would not get the kind of reaction you mentioned. That is my opinion.

Assemblyman Horne:

In your study, how did you define technical violations? Were they all noncriminal in nature? You have one violation where a person is caught committing another crime but others based simply on the violator not meeting the conditions of his probation.

James Austin:

We worked with Captain Woods and his staff from the Division of Parole and Probation. We drew samples of people who were being labeled as technical violators. We went in and detailed exactly what behavior was occurring. I would say, generally, what we saw in terms of multiple noncompliance were a number of conditions. The major ones were absconding from supervision, testing dirty on a drug test, failing to maintain employment, failing to maintain residency, and failing to report or complete treatment. Eventually, the violators

get caught in some kind of criminal activity. It usually is an arrest, such as a traffic arrest or driving with a suspended license. I did not see any serious crimes that would raise the level of concern. They were mostly misdemeanor. But you had some people that had "fallen off the wagon." When they do that, they stop showing up because their perspective is, "If I show up, I am going to prison. So, I am going to lay low and dodge this as long as I can." They do not dodge it long enough and end up getting caught. Now we have a big problem. It is not a situation where the Division of Parole and Probation is sending someone to prison just for not working or just for not reporting for treatment. Usually, there are multiple violations that must be addressed.

Assemblyman Horne:

In your findings for the Category E felons that go to prison, did you parse out those who had extensive records as opposed to those who had no prior or minimal prior records? I think that goes into some of the rationale of the judges. If you are a judge and you have someone who has entered a plea for a Category E felony, but it is their offender's fourth felony or their violation, counting gross misdemeanors, what do you do? The statute says the judge should give probation and suspend the sentence, but I find judges are not inclined to do that under those circumstances. I am curious if you parsed out those particular individuals.

James Austin:

One of the problems today is the information we have available does not allow us to determine that. We have to go into actual case files and find that data, so we do not really know. It may well be like you stated or it may not.

Fred Osher, Director of Health Systems and Services Policy, Council of State Governments Justice Center:

I would first like to address one of the questions Speaker pro Tempore Anderson asked. I appreciate the concern about judicial discretion on the bench. I just spent the last four hours with the newly established Task Force to Promote Criminal Justice/Mental Health Collaboration which is headed by Chief Justice Maupin. I know the issue of jail and prison overcrowding has caught their attention. There were five judges that participated in that meeting. All were concerned about participating in the solution to the overcrowding situation. There seems to be, at least at the judicial level, interest in exercising some discretion which will allow for addressing those issues.

The task force is one of seven going on around the country that are focused on the over-representation of people with behavioral disorders in the criminal justice system. I want to speak with you, for a moment, about mental illness

and substance abuse as it relates to prison growth and some of the policy options which have been outlined for you today.

I would like to speak briefly about principles of effective treatment for criminal justice populations. I want to provide an analysis of treatment needs of Nevada's probation and parole populations. There are behavioral health components to the options that Dr. Austin outlined that I also want to address. I want to discuss some of the challenges and opportunities of Nevada moving forward, as well.

Our belief is that behavioral disorders are medical conditions. Individuals with and without depression have structural changes in their brains, with a shrinking of the hypothalamus region for those individuals with depressant disorders compared to those without. The neural circuitry of diction is getting more and more clearly defined. Different drugs affect substrates and different parts of the brain. It is through this science we have been able to design a variety of new treatment interventions. These behavioral disorders are brain based. There are treatments that work which have a biological component to them.

A core principle for treatment for these disorders is that we need to screen effectively for need at every point of contact within the criminal justice system. We need to identify those individuals who may have not received any treatment heretofore for substance use or mental disorders prior to their arrest. Screening answers a question of yes or no. Might there be a mental illness? Might there be substance abuse disorder? If the answer is yes, we move forward and provide them objective and comprehensive assessments. It is really important that we use, whenever possible, standardized instruments so that we get the best assessment and best documentation of rates of disorders for these individuals. Following assessment we can start making some decisions about appropriate placement, both within a range of programs in the prison setting, and most importantly when they leave, programs that will support their integration back into the community.

Another important treatment principle put together by the National Institute of Drug Abuse on Criminal Justice Populations is that you need to strike while the iron is hot. There is an opportunity when folks come in contact with the criminal justice system to identify the problem and offer them some alternatives and some treatment, which becomes akin to treatment on demand. If you let that slide too long—and I can show you some data about the lack of capacity and access in Nevada—you lose the moment and they lose an opportunity to move on in their recovery process. We know from the literature that coercive treatment can be effective, especially for substance abuse disorders. Most people entering treatment have coercion at their backs. We

want to take advantage of that motivator. The courts can really be critical in providing court mandated treatment for those individuals who heretofore have not been motivated to get care but now have good reason to get it.

It is also the case that one size does not fit all. There are a variety of both mental and substance abuse disorders. They interact with that individual in a way that requires an individualized release plan or treatment plan that is tailored to their specific needs.

Lastly, as a key component, we understand that the majority of individuals with a mental or substance abuse disorder will have a co-occurring mental or substance abuse disorder. We call this dual diagnosis. We also know that their participation in traditional treatments, either within mental health or substance abuse systems, is associated with poor outcomes. They do not do well. We have a growing body of evidence that suggests that integrating care for those individuals really allows them to get the outcomes we all care about in terms of improved quality of life and public safety.

As it relates to the treatment needs in Nevada, this is general population data ([Exhibit E](#)). You have a situation where there is high utilization. Per capita alcohol consumption in Nevada is second highest in the United States. Rates of admission for treatment for methamphetamine or amphetamine use in Nevada are three times the national average. I know you have heard about the methamphetamine epidemic during the session. This slide shows ([Exhibit E](#)) the reasons for admissions. The chart shows the percentage due to alcohol and the percentage due to methamphetamine and amphetamine, as well as percentages for marijuana/hashish, cocaine/crack, and heroin/morphine. Most admissions typically come in packages. People who seek treatment are polysubstance abusers. They are not using one agent but multiple agents. I am sad to report that approximately 80 percent of the substance abusing adults in Nevada do not receive any treatment for their conditions.

As it relates to mental health treatment needs in Nevada, a report in 2003 of the Kaiser Family Foundation ranked Nevada first, which was the worst in the nation, with 42 percent of the population reporting poor mental health in the prior 30 days. Nevada ranks forty-first in mental health dollars and per capita expenditures. In the National Alliance for the Mentally Ill rating of the states, Nevada received a grade of D- in its provision of mental health services. It is not quite as bad as it sounds, though. The country as a whole got a D grade; nevertheless, it was below average. State officials estimate that about 40 percent of all clients leave state psychiatric emergency clinics without being served because of intolerably long waits. The situation in Nevada is that the majority of mental health services are provided by the State. Folks do not have

access to community mental health centers or services are not readily available. They then seek their care in emergency centers. They do not get what they need there and walk away, as well.

When we look at the needs of Nevada's correctional population, we know that the majority of people who are incarcerated or under community supervision have some substance abuse problems, many with co-occurring mental disorders. This is a large driver of the growth in jail and prison populations that Dr. Austin reported earlier. During 2003, over 8,500 adults were arrested for drug-related crimes. There were 14,000 arrested for alcohol-related crimes. In a small study we conducted a month ago, 43 percent of the people on probation or parole supervision reported significant drug addiction, and another 20 percent had significant alcohol use problems. According to Department of Corrections data, as of March 26, 2007, the percentage of male and female inmates with a mental health diagnosis was 29 percent, which is almost twice the national average. This suggest prevalence rates are quite high within the Nevada correctional system.

When we look at the number of people under the supervision of the criminal justice system who are required to participate in treatment, which is often a condition of release, we understand the capacity is not there. We have talked to treatment providers, probation and parole officers, and consumers. Their opinion is universal—there is not enough capacity. The waiting lists are too long. I heard from a judge from a rural county today. There is a six-month wait before an assessment is done for mental illness. Who waits for six months before having an assessment, let alone treatment, with life threatening conditions? Between 2004 and 2006, the number of residential substance abuse treatment beds declined by 10 percent. A fire recently destroyed a significant number of beds so the percentage is even lower now. It is just not sufficient.

Seventy percent of people on probation or parole who are referred to community-based substance abuse and mental health programs wait, on average, one month before starting an outpatient treatment program. Again, these are conditions that can be life threatening. A typical story we learn from probation officers is that a condition of release from the court would be to participate in addiction treatment. They are given a list of five providers. The parolee or proband goes out, finds these providers, and then is told he cannot be helped—that the provider does not have the capacity. Often there is a fee associated with treatment that they will not or cannot pay. They come back and report they did not get treatment. The parole officer gives them 30 additional days to comply. Those 30 days expire and they return, still with no treatment. There are very little options at that point in time. Their probation or

parole is violated and they spend time in our prison community. That costs a lot of money.

If we look at where folks are coming from ([Exhibit E](#)), especially prison admissions from the Las Vegas area, you can also see the availability of treatment programs superimposed over those areas. They are not often close to where the parolees or probationers are located. Access and transportation become a factor. It is just another barrier to people getting care that will allow them to meet conditions of probation and reduce their likelihood of recidivism and return to prison.

I want to comment on the behavioral health components and options Dr. Austin laid out earlier. Creating an incentive for people in prison to successfully complete their substance abuse and mental health programming is very critical. There was a therapeutic community in prison, Willing Inmates in Nevada Gaining Sobriety (WINGS) as it was called, which was shut down recently. It is not even accessible at this point in time. But it proves that within prison you can start to learn some things that might help you win your discharge. It is terribly important that that match with community-based programs on release. We want to expand the availability of substance abuse treatment and community-based services for people with low-level offenses, with low risk. They may have high substance abuse or mental health needs, but their risk of recidivism and crime is not that significant. They should have access to care. There is a proposal in our paper that suggests increased funding for the Parole and Probation Division to create new probation officer positions to supervise these types of offenders.

Specialized probation caseloads, reduced caseloads, training for probation and parole officers about mental illness and substance abuse—are all mechanisms that other communities have used to create alternatives to revocation for the proband as they move through their probation period. As related to policy option three ([Exhibit E](#)), which is the provision of training to probation officers on evidence-based principles using risk assessment, matching those risk assessments to the available treatment options in communities is needed, as is cross training with community-based providers. You must have a linkage to those individuals and a shared vision of how we are moving forward. Oftentimes, parole officers can participate in the treatment teams. If a dirty urine test comes up, they can have new data that suggests the person is going to meetings, they are doing their homework, and that maybe we need to give them another chance before there is a violation. There are opportunities to work with individuals who are motivated to get care.

You may want to think about the development of intermediate sanction centers. This is something short of a return to prison that will allow that individual to have more intensive supervision combined with support. I would point out, again, the growing prison trend curves that you saw earlier. In the past, there have been grant programs to provide funds to get a person an assessment, to start them on treatment, and to meet the conditions of release. But those funds have dried up and gone away. I know providing treatment funding to people who have committed crimes is not the most commonsense notion. On the other hand, small amounts of dollars to get them in the door, compared to large amounts of dollars to house them in our prison might be a wise use of dollars.

James Austin:

I just want to add to that point because that is one of the things we noticed in our study. You have a unique practice here where the person is ordered to get a mental health assessment or a substance abuse assessment. That is farmed out to these private entities. For a variety of reasons, it never happens. You are forcing a probationer to find his/her own way and they are not very capable of it. So now you have a probationer who has been out on the street for 30 to 60 days with no assessment done. Now you have a probation officer who does not have the skill to do the assessment. So how are they supposed to manage the person? This is one of the major breakdowns in the supervision of people on probation.

Fred Osher:

We are also asking, as part of the policy options, for support for a community task force. It would develop strategies to reduce revocations. You can think about it occurring in these high concentrated areas where you have to do something different. It cannot be done by one group. It cannot be just Parole and Probation or just the substance abuse providers or just the mental health providers—they cannot do it on their own. There needs to be a coordinated effort. They have to have a shared vision of what positive outcomes they wish to come about as it relates to public health and, most importantly, public safety.

The opportunities in Nevada are to demonstrate a tough and smart approach to allocating scarce tax payer dollars. We understand that budget issues are before you and they are immense. Yet we also believe that without doing things differently, we can only count on spending more dollars without really getting any of the outcomes we all value. We encourage reinvesting savings from avoided costs to expand community treatment capacity with a priority focus on high-risk neighborhoods. We want to promote the shared goals and objectives between behavioral providers and criminal justice systems. There are

many challenges before you. The system has been underfunded for a long period of time. The capacity does not exist. Nevertheless, we can develop standardized screening assessment and treatment planning processes. We need to incorporate evidence-based practices. The Legislature was wise last session in moving the substance abuse agency to within the mental health and disability services division. That has allowed for some opportunities to provide integrated treatment. When I survey people in the field, it just does not exist. Co-occurring treatment, integrated care, evidence-based practices—they are not available to citizens of Nevada.

It is important that we support and develop collaborative mechanisms between these Executive Branch agencies so that they can pool resources and talent to achieve these outcomes. Again, we have a hypothesis about what works. It is important to develop performance measures and evaluate outcomes and hold these agencies accountable to achieving them. Thank you.

Michael Thompson:

I will sum up our bottom line, if I can. Our action steps ([Exhibit E](#)) and policy options bring up questions. Which of those, if not all of them, do you want to implement? You should not take them very literally. There are many ways you can change the assumptions. For example, we mentioned a 20 percent program participation rate in option one. What if you made it 40 percent and actually wanted to increase program availability? There are lots of questions for you to consider. The first action step, though, is which one of those policy options do you want to look at, recognizing you could get greater yield from them than what we actually talked about and suggested, especially if they are implemented in a more expansive type of way and if the funding is put behind them?

The second option is that your information systems are not as sophisticated as what we find in other states of this size. Some of the things we would like to be able to present to you in terms of information about your probation populations or prison populations, we simply cannot do. As a result, we cannot give you as sophisticated an analysis as we would do in other places. As a result, there really needs to be some prospective studies to give you additional scenarios. The question would then be, what would be the scope of it? Where would the data come from? Who would conduct those analyses?

The third thing, after the set of policy options, is that we list some additional things for your consideration which are much more expansive and are just big picture kind of questions. Those are going to require a lot of discussion, whether it is looking at sentencing laws or whether it is other kinds of things we have listed. There needs to be some kind of expansive discussion about the

policy framework and what is politically viable and what is not. We did not explore any of those scenarios because we need direction from you to do that.

The last thing for you to consider is that you need a strategy. At the end of the day, we are talking, at least in part, about these zip codes that are disproportionately contributing to the prison population. You need a comprehensive intergovernmental strategy that is a partnership between community leaders, local government—the municipal and county levels—and state government. It would look top to bottom on how to reduce crime in those neighborhoods. It will be a better allocation of resources than simply constructing prisons into perpetuity. There needs to be some kind of structure that guides that strategic planning. Similarly, at the executive level, there needs to be some sort of integrated approach among multiple cabinet agencies. Again, the question would be what is the government structure for that kind of approach?

Those are our four action steps we think would be useful for the committee to go forward with or to consider.

Chair Parks:

And the options are in greater detail in the actual Nevada report ([Exhibit C](#))? Thank you.

James Austin:

Mr. Chairman, I just wanted to add to Mr. Horne's question about the Category E felonies. Page 11 of the report ([Exhibit C](#)) lists the Category Es that are coming into prison. Last year, 554 offenders were admitted. The vast majority of people are in prison on their first offense for things like possession or attempted possession of a controlled substance.

Assemblyman Horne:

In the study, did you look at the Parole Board and the granting of parole to low-level offenders and how we do it in Nevada? What are those numbers compared to other jurisdictions?

James Austin:

We have an overall grant rate by the Parole Board. Basically, of all the cases the board hears, in what percent of those cases does the board grant parole? Right now, for people who are appearing at their parole eligibility hearing, it is about 55 percent.

Assemblyman Horne:

Are those numbers for inmates that are granted and released or those that are just granted parole so they can move to their next consecutive sentence?

James Austin:

Some of those would be going to their consecutive sentence, but the vast majorities are to be released. There is an issue there. In some cases it is called delayed release. The grant is made, but it is conditioned upon completing the program or conditioned upon an approved release plan in the community. We do not have precise information. We are trying to get some more information on that because you can save some beds if people are going out promptly from prison when their parole has been granted. The other statistic to look at is the mandatory release decision. That has a very high grant rate, of more than 80 percent. Compared to other jurisdictions, these are relatively high. Texas, for example, has a 30 percent grant rate. Oklahoma and Louisiana also have grant rates in the 30 percent range and so does Maryland. If the Parole Board was granting at those levels, you would be in deep, deep trouble.

Fred Osher:

We would add that in discussions with the Parole Board chair, those individuals granted parole on delayed release stay in prison because of a lack of community resources. The Parole Board is not comfortable sending out parolees with addiction disorders without access to addiction treatment and without any place to live. They end up staying around for months and months, even though parole has been granted, waiting for a plan that is acceptable.

Assemblywoman McClain:

You are saying Oklahoma and Texas have a 30 percent grant rate. Are those defined ostensibly as people getting parole, to be released? You say you cannot get the numbers for sure here.

James Austin:

The grant rate for Texas, as I mentioned, is 30 percent. That would be the same definition as your grant rate of 54 percent.

Assemblywoman McClain:

Do you know how many of our 54 percent are just being granted parole to their next sentence?

James Austin:

I do not know the exact number, but it is going to be small because most of your prisoners do not have consecutive sentences.

Assemblywoman Weber:

I was reviewing the four strategies you discussed, especially the fourth one, which was focused on the intergovernmental strategies that target high-risk communities. Do you have any data that looks at a broader perspective, including state, county, and local governments but coupled with faith-based groups and community nonprofits? As a public-private partnership in taking the community back? Do you have any data in that area or know of states that may be doing that right now?

Michael Thompson:

There are a number of really exciting initiatives across the country. It is our feeling that at the end of the day, we need to have community-based organizations, oftentimes faith-based organizations, take ownership of the populations in these neighborhoods. The most promising programs we have seen across the country do involve those kinds of nonprofits in these communities. We would be happy to give you examples from metropolitan areas from across the country and the kind of impact they have had on recidivism. At the end of the day, though, many of these programs are fairly small in scale and not particularly large, but we can provide that information to you.

James Austin:

I just want to mention that Assemblywoman McClain pointed out in figure 4 ([Exhibit C](#)) that zip code 89109, which she is very familiar with, used to be a very troubled spot. You will see now that it has regressed into brown. She told me about the investments made in that community, which in her opinion have turned around the neighborhood. That is what you are talking about—making investments in those red areas so they recede in color and therefore cost.

Assemblywoman Weber:

I just want to anecdotally share that in Las Vegas right now, in the area of gang suppression, prevention, and intervention, the Metropolitan Police Department is working with some of the pastors in the 89106 zip code. We put a plan together. I am just trying to think of how we could all work together to make something work.

Assemblywoman McClain:

I was just amazed this morning because I was looking at this map and the red areas. We have one little brown area in 89109. The county in the last 10 to 15 years has worked really hard in that particular area. There are apartment complexes around Boulevard Mall and next to Paradise Road. That neighborhood has done a number of things. They have put in a community center that has a medical clinic in it. They have a better police presence. They

have the gang task force there. Some of the other things, like at Cambridge Community Center, are welfare offices, social services, a medical clinic, and neighborhood services offices. Some of the apartment managers in the area have really started to work together to clean up the apartments and get some neighborhood pride going. They look out for each other. They have a whole network in place to prevent people from apartment hopping. The area is just amazing. They put in a new elementary school. There are new parks. I credit a lot of it to Commissioner Williams and Irwin Molasky, who worked so hard in that area. But that little brown area is a good case study. It does work.

Chair Parks:

I might also want to take a little credit for that since it is in my district. Back in the early 1990s, we created the 89109 community area and looked at all the things we had to do. We had many out-of-state owners of apartment complexes, and their instructions to their managers were to fill all the apartments. They were renting to anybody and everybody. They were not screening. They were not reviewing who they were hiring. We did push it out and we pushed it out to some other areas, but then we had to follow along and make sure those apartment managers knew how to properly screen for tenants.

James Austin:

I just would like to add on this issue of crime rates that one of the big things we are now seeing in terms of why crime rates have dropped is because of welfare reform. There is a very strong correlation between people who have been able to secure jobs of some kind and are no longer on welfare and the drop in the crime rate. That is one example of a crime-fighting strategy that does not depend upon incarceration. We certainly need incarceration, but some of these things, like some of the things Assemblywoman McClain mentioned—welfare reform, better schools—those are the signals that produce a better population. Fifty percent of the population that we are projecting for 2017 is composed of boys who are in their young teens or are adolescents. They are headed toward prison unless we do something.

Chair Parks:

You referenced the capacity level of the community mental health center. That is one of the areas I really worry about in the sense that if we are to place individuals on probation or parole them early, how do we go about getting them treatment? I realize you can throw money at the problem, but how do you develop, overnight, the capacity to provide those mental health services?

Fred Osher:

As you know, the services in Nevada are principally state-funded at this point in time. There are vendors out there. I think there are two points. First, could we throw money at the problem and ensure there was a workforce capable of providing quality care to these individuals? That is not a given. There really is a requirement that we give individuals incentives to learn the types of interventions which are specific to the populations that are justice-involved. There needs to be more attention to the cognitive therapies that are available. Secondly, we need to make it attractive for people to come back into the mental health field and provide care. Sometimes there is a concern that people in the mental health field are not interested in working with justice-involved individuals. The majority of people who come through that mental health center door, whether the provider knows it or not, have a justice history, so that is an argument that does not work so well for us.

Working with Dr. Brandenburg, we have seen some infusion of dollars already. There is an expansion underway. My hope would be that all the people that come to Nevada—and that are part of the 58 percent growth rate you are experiencing—might include individuals with degrees that are interested in working with this population. I think we want to make sure the training and supervision they receive is appropriate to the population they are expected to serve.

Assemblyman Anderson:

One of the problems we face in dealing with the treatment population is the lack of providers with open beds, particularly in the less populated counties. Even though we send treatment providers to the rural areas, time is an issue because of the travel distance involved. The alternative, then, for the judge, is to put someone in prison. Can we get enough qualified people, to provide mental health, drug, and domestic violence treatment? Is Nevada unique because of its geographical size? It seems to me that Texas is not a small place. They must have this problem, too.

Fred Osher:

No, Nevada is not unique in that sense. That is why the country, as a whole, received a “D” in the area of provision of mental health services. The Institute of Medicine issued a report last year which talked about the workforce and the difficulties that many, many communities are having in addressing their capacity. The rural issues you confront are particularly problematic. Some communities, such as in Iowa, have done a very good job in advancing telemedicine and telepsychiatry options. While face-to-face treatment is preferred, in the studies that have been conducted, we do not see any

reduction in effectiveness for this alternative. It is a way, with a small investment and some technology, to serve folks in rural communities.

I think the chief justice task force has formed a rural subcommittee to look at these specific issues at increasing access for folks in those remote communities to the mental health professionals who are available. Ultimately, we will need to invest in our graduate school programs to ensure people are aware of the rewards for working in community psychiatry. I am a member of an association that spends a lot of time trying to expand the capacity of community psychiatrists, and we have had a little bit of success over the last ten years. These problems are not unique to Nevada, they would have to be dealt with, and Dr. Brandenburg is aware of them. He is interested in any solutions that would come along with extra resources.

James Austin:

If I could comment on this. I have seen too many issues where the Legislature just throws money at the problem and gets nothing but disappointment. I think the concept here has to be a demonstration project, maybe two or three places in the state. One could be carried out in a rural area, one in Reno, and one could be in the Las Vegas area. There would be limited money given to the agencies responsible. There would have to be a step-by-step ramp-up of training, risk assessment, and treatment, and a requirement that results be positive within two years. If we do not see positive results, we are going to pull the plug.

I have been reading recently the extremely negative results of Proposition 36 in California, which are extremely disappointing. Hundreds of millions of dollars were poured into drug treatment, and it did not seem to do very well. I think it is largely because people threw money at the problem. You get what you pay for when you do not carefully structure demonstration efforts. You have to prove it. If you cannot prove it, then do not fund it. I think that is the challenge, and I would hate to see this Legislature throw money out there with no strings attached, without any performance measures, without any commitment or mission by the agencies that are going to be given the money. Their mission would be to treat people, reduce violations, and achieve higher success rates with people who are on probation and parole.

Assemblyman Anderson:

I appreciate your comments. We do have some good programs, like the WINGS program, for example. The specific elements and structure of the program are very, very strong. However, running the actual program is dependent on a certain individual or two or three and sometimes they are not able to meet up to the expectations of what the organizational and design elements of the

program are supposed to be. In other words, it is the actual execution where we end up having problems.

I guess I am thinking of the drug programs that were looked at originally in the 1995 Session and again in 1997. That is when we put the drug courts into place. We asked the correctional system to implement their part of it, and the implementation of that program did not quite meet up to the level of verbiage concerning it. So, how do we put hope into a design and organizational product, even in a test system with manageable dollars, when it is so dependant on the individual application and the people who are going to run it? Even for a short period of time? When they back away and turn it over to someone else, it falls flat on its face. That is my frustration.

Fred Osher:

I think your frustration and skepticism are well founded. I think, as Dr. Austin suggested, there needs to be performance-based contracting with clear guidelines and evaluation components that go with it. There are evidence-based practices that work for this population, and it is incumbent that those practices are the ones that get funded with the scarce resources that are available. You have federally sponsored technical assistance organizations around the country, that can train providers in the skills that are necessary for the outcomes we care and value. Again, the providers have to be held accountable for certain things. Far too often mental health and substance abuse providers have not had public safety outcomes as goals, and that is what this hearing has been about. We need to ensure we are improving public health, but most importantly, improving public safety of our communities. They need to be on board with that mission.

Assemblyman Anderson:

I appreciate your comments, but those are long range. We have an immediate problem. We do not want the prison system taken over by the federal government. A demonstration project and then the re-funding of that would take us six years down the road. We would like to be the light switch on the wall.

James Austin:

Those options are available to you. We will present them to you when you want to hear them. They are ready to go.

Chair Parks:

We have heard of some situations, especially in California, where the overflow of inmates has forced them to ship inmates to other states, like Mississippi. It has become a challenge for them. Is that something you would foresee as

being a challenge for Nevada—that we would have to send some our inmates out of state?

James Austin:

If you get to that point, which is where Connecticut was, you basically have given up the ship. It does not even make good “nonsense” to be shipping your prisoners out of state unless, of course, you have shares in the Corrections Corporation of America and entities like that. That would be my advice on that.

Chair Parks:

We have had some experience with the Corrections Corporation of America. Thank you for your presentation, gentlemen.

The agenda for today contains several items to be continued from previous meetings along with comments and testimony. What I would like to suggest, if no one has any other comments, is to have public comment. I believe we have several individuals from Carson City and southern Nevada who would like to speak. I would hope the comments are relative to the report we just heard.

Joseph Turco, Public Advocate, American Civil Liberties Union of Nevada:

Dr. Austin and his team’s report was terrific. There is a lot of insight there. Everyone seemed to be paying attention to it, which is really good news. The options for reinvestment were stated fairly clearly. There is no way to argue, really, with Dr. Austin’s findings. The only resistance that I have heard is that it is financially and politically difficult. No one argues with the actual findings themselves.

Addressing the financial difficulty, there are some things that are like a light switch on the wall, as Assemblyman Anderson said, that can be done immediately in this session, with time being of the essence. Justice Hardesty this morning spoke about setting a goal of 2,000 releases. That can be done with the discretion he seeks for judges. I agree there was a discrepancy between what Justice Hardesty said and what Dr. Austin’s report found. But generally, I think everyone agrees with judicial discretion in sentencing. Weapon enhancements need to be repealed. Do not pass any more. Good time credits and being more lenient with technical violations on probation are also options. There are a few things we can do immediately, that would free up 2,000 beds and only add \$25,000 a year in operating costs. There is \$50 million right here. There is the \$50 million to start the investment in Dr. Osher’s aspect of the report, which was the mental health and the drug treatment options.

As for the political difficulty, I have heard a lot of people mention it. We are all in this together. Members have spoken about the difficulty in explaining what they do on this issue to their constituents. However, legislators are great communicators. That is why you sit where you do. The same arguments that convince you to do the right thing, you will explain to your constituents. Since we are all in this together, the Director for the Department of Corrections will help you, Dr. Austin will help you, and you will help each other. Time is of the essence.

Patricia Hines, Private Citizen, Yerington, Nevada:

I would like to mirror what Justice Hardesty said this morning in the Joint Ways and Means/Senate Finance meeting about needing a special session next fall to evaluate the problems we are having. There is a sense of urgency in this cause. I really believe he is correct. We need a short-term plan and a long-term plan. Maybe a special session will be an answer to get Mr. Thompson, Dr. Austin, and Dr. Osher back to go over the options that we have until we come up with some viable goals and target dates. I heartily agree with Justice Hardesty's view that it is not that the system needs more money, but that we need to reinvest what we are already spending.

Constance Kosuda, Private Citizen, Las Vegas, Nevada:

I applaud the remarks of Mr. Turco, as well as the presentation by Dr. Austin and his colleagues. I really urge this committee to put into action Dr. Austin's brilliant, humane suggestions. It will save all the taxpayers of this State many millions of dollars. I believe it is time for the taxpayers and voters of this State to be advised by the Legislature that we have all been the victims, to some extent, of the lobbying which has been done on behalf of the Department of Corrections and the people who stand to benefit by an ever-expanding Department of Corrections budget. To use a comment that was made earlier, we do not want to just throw money at the problem. I would suggest that the money that is thrown year after year at the Department of Corrections and the funding that goes toward probation and parole is having no effect. It could be stated, based on the reports that we have heard today, that the Department of Corrections is, in fact, failing in many specific ways to deliver on that enormous budget. We are not getting the best use of our tax dollars by continuing to fund prisons.

It terms of sending inmates out of state, I agree that would probably not be a good thing to do at any level. It is the same rationale that is used with treatment. That is why community-based treatment is the most effective model for treatment. People need to be in the community in which they live or are about to return, which is generally the community which also holds their family and friends and loved ones. That support structure furthers their

complete rehabilitation. If programs are what will make the difference—and I believe we have heard enough testimony already over these past several weeks that proves that programs will make the difference—then they should start while the inmate is incarcerated. I think we need to expand the budget in that regard.

Sharon Samson, Private Citizen, Las Vegas, Nevada:

I am here to give some opinions and examples regarding the Parole Board. Something needs to be done. Their reasoning defies logic. We receive a lot of mail at Redress, Inc. from inmates. It is mind boggling some of the things which are occurring and some of the backup material we see. I would like to take the liberty to forward some of these to Dr. Austin because I really do not think he is getting a full picture.

Two examples I have here are of individuals who want to be paroled out of state. One individual is a minus three risk factor. He wanted to be paroled to his family in New Mexico and was, in fact, granted parole to New Mexico by the Nevada Parole Board. When the New Mexico Parole Board would not meet the criteria of the Nevada Parole Board, as far as giving polygraph exams to this low-risk inmate, the Nevada Parole Board withdrew his parole. He is still sitting in prison and waiting for his sentence to expire. As I said before, this is a minus three risk factor inmate.

The other inmate that I wanted to bring to your attention has been in the system in Nevada since 1985. He was paroled to Florida where he committed an armed robbery in 1992. He completed and expired his sentence in Florida, came back to Nevada to serve his parole violation, and has been sitting here on a parole violation for 15 years. This individual has not committed a crime in 22 years. A parole violation in the state of Nevada, for 15 years, seems to be extremely excessive. All he wants to do is go live with his sister in Pennsylvania. I just do not understand why, if these people want to go to another state and become someone else's problem, the state of Nevada insists on keeping them in prison. Why are we, the citizens of Nevada, paying for this? I truly believe this is a rogue board that needs to be reigned in. They have been given far too much power for far too long. As a taxpayer in the state of Nevada, I have been accumulating this information for a number of years. I am going to start forwarding it to the JFA Institute as well as other departments, because this has gotten to be outrageous. Something needs to be done, and I hope the Legislature will take some serious consideration on these issues during this session. They are costing us money. They have put us where we are financially.

John Emerson, Nevada Legislative Advocate, Three Agencies of the United Methodist Church:

I think it is very important on this issue to bring the voice of the faith community to this discussion. I have had ongoing conversations with Larry Struve, who is the legislative advocate for the Religious Alliance in Nevada (RAIN) and while I cannot speak for Larry, I can say he and I both feel the report the Justice Center did was compelling, as have been the comments of Justice Hardesty, who we heard earlier this morning in the Joint Finance/Ways and Means meeting and on prior occasions before your committee. We are very supportive of moving in this direction, and we really need to strengthen reentry programs.

The faith community has been significantly involved in reentry programs. I can speak from personal experience about the Kairos Ecumenical Prison Ministry that I was a part of launching back in 1981, which also led to the development of the Ridge House in Washoe County. We have been tracking the recidivism rate of those who received the support of the religious community, moving from the prison into transitional housing with some wraparound services. The comparison between the average recidivism rate and that of the persons we helped to shepherd through Kairos Prison Ministry and the Ridge House was significant. The recidivism rate was dramatically lower.

I simply wanted to share with you the commitment and ongoing interest of the faith communities in helping to deal with this problem and to stop the revolving door of those who reoffend and to get them established in the community.

Chair Parks:

Thank you. With no else to come before the committee, we are adjourned [at 5:32 p.m.].

RESPECTFULLY SUBMITTED:

Brooke Bishop
Committee Secretary

APPROVED BY:

Assemblyman David R. Parks, Chair

DATE: _____

EXHIBITS

Committee Name: Select Committee on Corrections, Parole, and Probation

Date: April 17, 2007

Time of Meeting: 3:55 p.m.

Bill	Exhibit	Witness / Agency	Description
	A		Agenda
	B		Attendance Roster
	C	Michael Thompson, Director, CSG Justice Center	Overview of the work done by the Justice Center.
	D	James Austin, President, JFA Associates	PowerPoint presentation on options for Nevada to deal with its prisons.
	E	Fred Osher, Director of Health Systems and Services Policy, CSG Justice Center	PowerPoint presentation on mental illness, drug abuse, and Nevada's prison populations.