List of Attachments

Attachment A. Sample survey website screenshots

Attachment B. Data collection schedule

Attachment C. Pre-notification letter

Attachment D1. Form CJ3: Single-facility jail form

Attachment D2. Form CJ3A: Jurisdiction form for multi-facility jails

Attachment D3. Form CJ3A-Addendum: Facility form multi-facility jails

Attachment E. Invitation email

Attachment F. Reminder email 1

Attachment G. Reminder email 2

Attachment H. Reminder letter from BJS Director

Attachment I. Reminder email 3

Attachment J. Cognitive testing report

Attachment K. Comments from the Office of Surveillance and Epidemiology in the Center for Drug Evaluation and Research (CDER)/Food and Drug Administration (FDA)

Attachment L. Comments from National Association of Counties (NACo) and the Pew Charitable Trusts

Attachment M. Comments from Pew Charitable Trusts

Attachment N. Public Comment on 84 FR 4539

Attachment O. Comments FROM Campaign for Youth Justice Re 84 FR 4593

Attachment P. Comments from National Disability Rights Network

Attachment Q. Public Comment received on Feb. 15, 2019



HOME REFERENCE FORMS V FAQS

Logged in as 12345555DC



**** 1-866-354-4992

Annual Survey of Jails

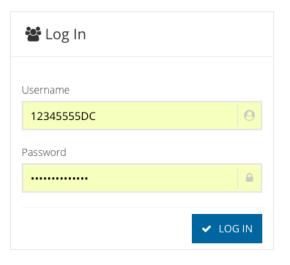
The Annual Survey of Jails (ASJ) is a nationally representative survey of county or city jail jurisdictions and regional jails in the country. Started in 1982, the ASJ tracks changes in the number and characteristics of local jail inmates nationwide. It also collects annual data on jail inmate turnover, jail capacity, and space usage by other authorities. About 910 agencies, representing the nation's 2,851 jail jurisdictions, participate in the ASJ each year.



Data Archive



BJS Reports



HOME ENTER DATA REFERENCE FORMS V FAQS LOGOUT

Logged in as 12345555DC

bjsasj@rti.org

**** 1-866-354-4992

Test Agency - DC (12345555)

2018

Enter Data

Instructions for completion and submission

FOR EACH ITEM—

- . If the answer to a question is "none" or "zero," write "0" in the space provided.
- When exact numeric answers are not available, provide estimates and mark (X) in the checkbox beside each number that is estimated. For
 example 1234 ■

Please submit your completed form(s) within 30 days of receipt. You may submit information in one of these ways:

ONLINE: Complete this form online at: https://bjsasj.rti.org

S Annual Survey of Jails

Bureau of Justice Statistics

EMAIL: bjsasj@rti.org

FAX (TOLL-FREE): 1-866-800-9179

MAIL: RTI International, Attn: Data Capture

Project Number: 0215015.001.300.018.102

5265 Capital Boulevard Raleigh, NC 27690-1652

If you need assistance, contact Bryan Rhodes of RTI International toll-free at 1-866-354-4992 or bjsasj@rti.org.

What to include and exclude in this data collection

INCLUDE—

- ✓ Confinement facilities usually administered by a local law enforcement agency, intended for adults but sometimes holding juveniles
- ✓ All jails and city/county correctional centers that hold inmates beyond arraignment. Report data on all inmates, including those held in separate holding or lockup areas within your facilities.
- ✓ Special jail facilities (e.g., medical/treatment/release centers, halfway houses, and work farms).
- √ Temporary holding or lockup facilities if they are part of your combined function.
- ✓ Inmates held for other jurisdictions, including federal authorities, state prison authorities, American Indian or Alaska Native tribal governments, and other local jail jurisdictions.

EXCLUDE—

- × Facilities that are exclusively used as temporary holding or lockup facilities, where inmates are generally held for less than 72 hours and not held beyond arraignment.
- × Privately operated jails and facilities operated by two or more jurisdictions (i.e., multi-jurisdictional facilities). These jails will be contacted directly for this data collection.



Logged in as 12345555DC

bjsasj@rti.org

**** 1-866-354-4992

Form Completed By—

Name		Title	
Official Address		Telephone	
City		Fax	
State	Zip	Email	
Save			
and Burden		Close Form Completed By	

- 1. On June 29, 2018, how many persons under the supervision of your jail jurisdiction were
 - a. CONFINED in your jail facilities?





INCLUDE-

Instruction

- ✓ Persons on transfer to treatment facilities but who remain under your jurisdiction
- ✓ Persons held for other jurisdictions
- ✓ Persons in community-based programs (e.g., work release, day release, or drug/alcohol treatment) who return to jail at night
- \checkmark Persons out to court while under your jurisdiction.

INCLUDE-

EXCLUDE-

INCLUDE-

EXCLUDE—

HOME ENTER DATA REFERENCE FORMS ~ LOGOUT

Logged in as 12345555DC bjsasj@rti.org 1-866-354-4992 1. On June 29, 2018, how many persons under the supervision of your jail jurisdiction were a. CONFINED in your jail facilities? ✓ Persons on transfer to treatment facilities but who remain under your jurisdiction ✓ Persons held for other jurisdictions ✓ Persons in community-based programs (e.g., work release, day release, or drug/alcohol treatment) who return to jail at night ✓ Persons out to court while under your jurisdiction. × Persons under your jurisdiction who are boarded elsewhere × Inmates who are AWOL, escaped, or on long-term transfer to other jurisdictions × Persons in community-based programs run by your jails (e.g., electronic monitoring, house arrest, community service, day reporting, or work programs) who do NOT return to jail at night. b. Under jail supervision, but NOT CONFINED? ✓ Persons in community-based programs run by your jail jurisdiction (e.g., electronic monitoring, house arrest, community service, day reporting, or work programs) who do NOT return to jail at night. × Persons on pretrial release who are not in a community-based program run by your jail jurisdiction × Persons under the supervision of probation, parole, or other agencies × Inmates on weekend programs that allow offenders to serve their sentences of confinement only on weekends (e.g., Friday–Sunday) × Inmates participating in community-based programs (e.g., work release, day release, or drug/alcohol treatment) who return to jail at night. c. TOTAL (Sum of items 1a and 1b)

Save and Continue



HOME ENTER DATA REFERENCE FORMS V FAQS LOGOUT

3. Of all the persons CONFINED in your jail facilities on June 29, 2018 (as reported in item 1a), how many were not U.S. citizens?

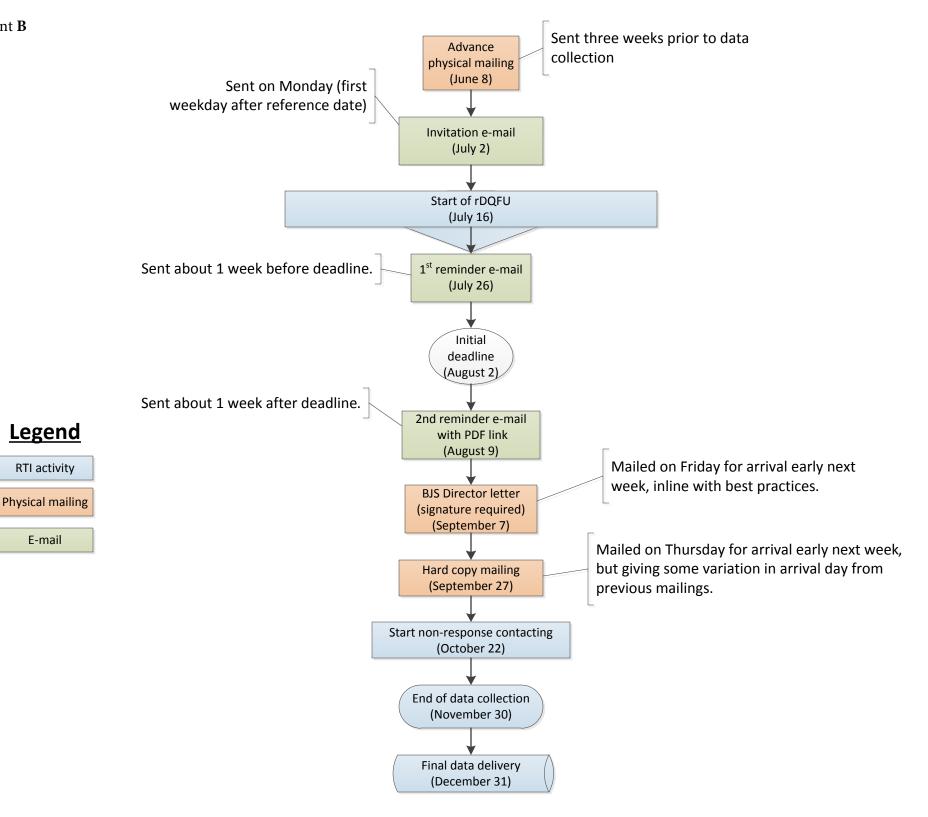
Non-U.S. Citizens

|--|

Back

Save and Continue

E-mail





U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, D.C. 20531

```
June 7, 2019

<<Salutation>> <ContactFirstName>> <<ContactLastName>>

</Agency Name>>

</Address 1>>

</Address 2>>

</City>>, <<State>> <<Zip>>
```

Dear <<Salutation>> <<Last Name>>:

In a couple of weeks, you will receive an email invitation for you to participate in the 2019 Census of Jails. The email will contain instructions for the survey, as well as a username and password unique to your facility. When the email arrives, please log onto the data collection website and fill out the form promptly.

The Census of Jails enumerates every jail facility in the United States and collects information on jail population counts and characteristics, staffing, and programs. The data are widely used by practitioners, policy makers, researchers, and the general public to understand the conditions and needs of local jails across America. Your participation ensures that your agency is represented in our national statistics on local jails.

The reference date for the 2019 Census of Jails will be June 28th, 2019. The form will ask about your jail's confined population on this date, including population breakdowns by sex, race, juvenile status, conviction status, severity of offense (felony or misdemeanor), and U.S. citizenship status.

The Bureau of Justice Statistics has contracted with RTI, International to conduct this data collection. If you have any questions, please feel free to e-mail us at <u>jailcensus@rti.org</u> or call at 1-866-354-4992.

Thank you in advance for your help.

Sincerely,



2019 CENSUS OF JAILS

SINGLE-FACILITY JAIL FORM

U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION AGENT RTI INTERNATIONAL

Data Supplied By						
Name		,	itle			
Official Address	. О. Вох	City		State	Zip	
Area Code Phone	Number	Extension	Area Code Fax	Number		
E-mail						

General Information

- **IMPORTANT** Please use this form as reference and submit your data at http://jailcensus.rti.org. User name and password are included in the census invitation email.
- If you need assistance, contact RTI, International toll-free at 1-800-344-1387 or email jailcensus@rti.org.

What types of facilities are included in this census?

The census includes all confinement facilities administered by a local or regional law enforcement agency, which are intended for adults but sometimes hold juveniles.

- INCLUDE jails and city/county or regional correctional centers.
- INCLUDE special jail facilities operated under the authority of local or regional correctional authorities, such as medical/treatment/release centers, halfway houses, work farms, and private facilities operated under contract to local, regional, or Federal correctional authorities.
- INCLUDE temporary holding or lockup facilities if they are a part of your combined jail function.
- EXCLUDE temporary holding or lockup facilities that are not a part of your combined function from which inmates are usually transferred within 72 hours and not held beyond arraignment. If your only function is as a temporary holding or lockup facility, DO NOT complete this form. Contact us at 1-800-344-1387 or jailcensus@rti.org.

Reporting instructions:

- Please complete this CJ-3 form on information pertaining to your entire jail jurisdiction.
- If the answer to a question is "not available" or "unknown," write "DK" in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "zero, "write "0" in the space provided.
- When exact numeric answers are not available, provide estimates and mark X in the box beside each number that is estimated, e.g., 1,234 ⋈.

BURDEN STATEMENT

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 2 hours and 30 minutes per form, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

SECTION I. FACILITY CHARACTERISTICS

Specify

1. For which of the following purposes do your jail facilities hold offenders? Yes No a. Detention facility with authority to hold persons facing criminal charges beyond 72 hours 0 0 b. Correctional facility for persons convicted of offenses with sentences usually of a year or \circ O c. Correctional facility for persons convicted of felonies with sentences of more than year 0 O d. Temporary holding or lockup facility in which arrestees are usually detained up to 72 O O hours, excluding holidays and weekends, pending arraignment 2. As a matter of practice, what type of inmates do your jail facilities house? Mark only ONE choice. O Males only O Females only O Both males and females 3. What are the functions of your jail facilities? Yes No a. General adult population confinement \circ O b. Persons returned to custody (e.g., probation, parole, and bail bond violators) 0 0 c. Work release/prerelease 0 0 d. Reception/diagnosis/classification 0 0 e. Confinement of juveniles 0 O f. Medical treatment/hospitalization confinement 0 0 Mental health/psychiatric care 0 0 h. Alcohol treatment confinement 0 0 Drug treatment confinement i. 0 0 Boot camp j. 0 0 Protective Custody 0 0 I. Other 0 0

	a.	Rated Capacity
		① The maximum number of beds or inmates assigned by a rating official to your jail facilities, excluding separate temporary holding areas.
	b.	Design capacity
		The number of inmates planners or architects intended for your jail facilities.
5	Or	n June 28, 2019, were any of your jail facilities under a federal, state or local court
J.		der or consent decree to limit the number of inmates they can house?
		O Yes—go on to 6
		O No—skip to 7
		·
6.	If `	Yes to 5 (under a court order or consent decree to limit the number of inmates)—
	a.	What was the maximum number of inmates your jail jurisdiction was allowed to
		house?
	b.	In what year did this order or decree take effect?
		If more than one, report the year for the longest in effect.
7.	On	n June 28, 2019, were any of your jail facilities under a federal, state or local court
	ore	der or consent decree for specific conditions of confinement?
		O Yes—go on to 8
		O No—skip to 9
8.	If `	Yes to 7 (under a court order or consent decree for specific conditions of
		onfinement), what were those specific conditions?
		Yes No
	a.	Crowding O O
	b.	Recreation/exercise O O
	C.	Staffing

4. On June 28, 2019, what was the total capacity of your jail facilities?

	d.	Medical facilities or services	0	Ο
	e.	Visiting/mail/telephone policy	Ο	0
	f.	Food services/nutrition/cleanliness	Ο	0
	g.	Library services	0	0
	h.	Grievance procedures or policies	0	0
	i.	Fire hazards	0	0
	j.	Disciplinary procedures or policies	0	0
	k.	Administrative segregation procedures or policies	0	0
	l.	Religious practices	0	0
	m.	Search policies or practices	0	0
	n.	Education or training programs	0	0
	0.	Counseling programs	0	0
	p.	Inmate classification	0	0
	q.	Other	0	0
		Specify		
SE 9.	On	ION II. SUPERVISED POPULATION AND INMATE COUNTS June 28, 2019, how many persons under the supervision of your jai	l jurisdic	tion
	On	ION II. SUPERVISED POPULATION AND INMATE COUNTS June 28, 2019, how many persons under the supervision of your jai	mmunity se ol/drug trea	rvice, tment lities

INCLUDE—

	✓ Persons in community-based programs run by your jail facilities who do NOT facilities at night.	return to your jail
	EXCLUDE—	
	 X Persons on pretrial release who are not in a community-based program run b X Persons under the supervision of probation, parole, or other agencies X Inmates on weekend programs that allow offenders to serve their sentences of weekends (e.g., Friday–Sunday) 	of confinement only on
	X Inmates participating in community-based programs who RETURN to your jai	l facilities at night.
c.	TOTAL (Sum of items 9a and 9b)	
	the weekend prior to June 28, 2019, did your jail facilities have	e a weekend
1	Weekend programs allow offenders to serve their sentences of confinement only o Friday–Sunday).	n weekends (e.g.,
	○ Yes—How many inmates participated?	
	O No	
11. Oı	June 28, 2019, how many persons CONFINED in your jail facilit	ties were—
a.	Adult males (age 18 or older)	
b.	Adult females (age 18 or older)	
c.	Males age 17 or younger	
d.	Females age 17 or younger	
e.	TOTAL (Sum of items 11a through 11d should equal item 9a)	
	all the persons age 17 or younger CONFINED in your jail faciliti 19 (sum of 11c and 11d), how many were tried or awaiting trial in a	•
13. O ı	June 28, 2019, how many persons CONFINED in your jail facilit	ties were—
a.	White (not of Hispanic origin)	

b.	Black or African American (not of Hispanic origin)	
C.	Hispanic or Latino	
d.	American Indian or Alaska Native (not of Hispanic origin)	
e.	Asian (not of Hispanic origin)	
f.	Native Hawaiian or other Pacific Islander (not of Hispanic origin)	
g.	Two or more races (not of Hispanic origin)	
h.	Additional categories in your jail information system	
	Specify	
i.	Not known	
j.	TOTAL (Sum of items 13a to 13i should equal item 9a)	
	June 28, 2019, how many persons CONFINED in your jail facili INCLUDE persons adjudicated or awaiting revocation hearing.	ties were—
a.	Probation violators	
b.	Parole violators	
c.	TOTAL (Sum of 14a and 14b)	

Questions 15, 16 and 18 ask about the offense seriousness and conviction status of inmates. For inmates with more than one charge/offense, report the most serious charge/offense and the associated conviction status. For probation and parole violators, report the most serious original or new charge/offense. The most serious charge/offense is the one crime for which the person could receive the longest jail/prison sentence. Alternatively, it can be determined by your jail system's offense severity code.

	n June 28, 2019 how many persons CONFINED in your jail facilition status, had a charge/offense type of—	ies, regardless of
a.	Felony	
b.	Misdemeanor	
c.	Other	
	Specify	
d.	TOTAL (Sum of items 15a to 15c should equal item 9a)	
	all persons CONFINED in your jail facilities on June 28, 2019, h	_
•	For persons with more than one charge/offense, report the status associated with charge/offense.	the most serious
•	For convicted inmates, include probation and parole violators with no new sentent	ce.
a.	Convicted	
b.	Unconvicted	
c.	TOTAL (Sum of items 16a and 16b should equal item 9a)	
17. Or	n June 28, 2019, how many persons CONFINED in your jail facilit	ties were—
a.	U.S. citizens	
b.	Not U.S. citizens	
c.	Of unknown citizenship status	
d.	TOTAL (Sum of items 17a to 17c should equal item 9a)	
18. Or	June 28, 2019, how many non-U.S. citizens in item 17b were—	
a.	Convicted	
b.	Unconvicted	
c.	Of unknown conviction status	

d.	TOTAL (Sum of items 18a to 18c should equal item 17b)		
19. Or	ı June 28, 2019, how many persons CONFINED in your jail facili	ties were held	for-
	Count persons with multiple holds only once with priority being federal, state, triba	al, and local.	
✓	INCLUDE contractual, temporary, courtesy, or ad hoc holds for other agencies.		
a.	Federal authorities		
	(1) U.S. Marshals Service		
	(2) Federal Bureau of Prisons		
	(3) U.S. Immigration and Customs Enforcement (ICE)		
	(4) Bureau of Indian Affairs (BIA)		
	X EXCLUDE inmates being housed for tribal governments in item 19c belo	w.	
	(5) Other FEDERAL authorities		
	Specify		
b.	State prison authorities		
	(1) For your state		
	(2) For other states		
c.	American Indian or Alaska Native tribal governments X EXCLUDE inmates being housed for the BIA in item 19a4.		
d.	Other local jail jurisdictions		
	EXCLUDE— X Inmates being housed for your own jail jurisdiction (i.e., your own county/city in X Inmates being housed for tribal governments in item 19c.	mates).	
	(1) Within your state		
	(2) Outside your state		
e.	TOTAL (Sum of items 19a to 19d)		

20. a. During the 30-day period from June 1 to June 30, 2019, on what day did your jail facilities hold the greatest number of inmates?

Peak population	should be eau:	al to or greater	than the co	nfined inmate	nonulation re	enorted in iter	n Qa
rtak populalion	SHOUID DE EQU	ai io di dicalci	liiaii liie co	riiirieu iriiriale i	oobulalion it	DUILEU III ILEI	II 9a.

		June, 2019
b	. How many persons were CONFINED on that day?	
	etween July 1, 2018, and June 30, 2019, what was the averag	e daily population of
✓	INCLUDE inmates who participated in weekend programs that allow offenders confinement only on weekends (e.g., Friday–Sunday).	to serve their sentences of
•	To calculate the average daily population, add the number of persons for each 1, 2018, through June 30, 2019, and divide the result by 365.	day during the period July
•	If daily counts are not available, estimate the average daily population by addinated on the same day of each month and divide the result by 12.	ng the number of persons
•	If average daily population cannot be calculated as directed above, then estimpersons held in your jail facilities each day.	ate the typical number of
а	. Males	
b	. Females	
С	. TOTAL (Sum of items 21a and 21b)	
22. H	low many persons under the supervision of your jail facilities v	vere—
а	 ADMITTED to your jail facilities between July 1, 2018, and June INCLUDE— ✓ Persons officially booked into and housed in your jail by formal legal document the courts or some other official agency ✓ Repeat offenders booked on new charges ✓ Persons serving a weekend sentence coming into jail for the FIRST time of subsequent admissions for the same weekend sentences). 	ment and by the authority of
	EXCLUDE— X Returns from escape, work release, medical appointments/treatment facilit releases, and court appearances.	ties, furloughs, bail/bond
	(1) Males	
	(2) Females	
	(3) TOTAL (Sum of items 22a1 and 22a2)	

b.	DISCHARGED from your jail facilities between July 1, 2018, and	June 30, 2019?
	 INCLUDE— ✓ Persons released after a period of confinement (e.g., sentence completion, pretrial releases, transfers to other jurisdictions, or deaths) ✓ Persons completing their weekend sentence leaving jail for the LAST time. 	bail/bond releases, other
	EXCLUDE—	
	X Temporary discharges (e.g., work releases, medical appointments/treatments day reporters, or transfers to other facilities within your jail jurisdiction).	nt, out to courts, furloughs,
	(1) Males	
	(2) Females	
	(3) TOTAL (Sum of items 22b1 and 22b2)	
SECT	ION III. FACILITY STAFFING	
23. Or	June 28, 2019, how many staff employed in your jail facilities	s were—
•	Count each employee only once. Classify employees with multiple functions by most frequently.	the function performed
✓	INCLUDE payroll staff, nonpayroll staff on the payroll of other government ager department, school district, or court), and unpaid interns.	ncies (e.g., health
X	EXCLUDE staff paid through contractual agreements and community volunteer	S.
a.	Correctional officers ✓ INCLUDE deputies, monitors, and other custody staff who spend more than incarcerated population.	n 50% of their time with the
	(1) Males	
	(2) Females	
	(3) TOTAL (Sum of items 23a1 and 23a2)	
b.	All other staff	
	✓ INCLUDE administrators, clerical and maintenance staff, educational staff, staff, and other staff who spend more than 50% of their time in your jail.	professional and technical
	(1) Males	
	(2) Females	

(3) TOTAL (Sum of items 23b1 and 23b2)

C. TOTAL (Sum of items 23a3 and 23b3)

SECTION IV. PROGRAMS ON OPIOID TESTING, SCREENING AND TREATMENT

The following questions are about opioids. Opioids are a class of drug that include heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin), hydrocodone (Vicodin), codeine, and morphine.

24. As a matter of practice, do any jail confinement facilities operated by your jail jurisdiction—

✓ INCLUDE testing, screening, and treatment that are conducted either on or off facility grounds.

		Yes	No		
a.	Conduct routine urinalysis tests on inmates during intake for the detection of opioids	Ο	Ο		
b.	Screen inmates during intake for opioid use disorder with a questionnaire or interview	0	0		
C.	Provide overdose education to inmates identified as having opioid use disorders	Ο	0		
d.	Initiate behavioral or psychological treatment for inmates identified as having opioid use disorders				
e.	Provide medications to inmates for the treatment of opioid withdrawal symptoms, such as clonidine, lofexidine, methadone, or buprenorphine (e.g., Suboxone). X EXCLUDE non-prescription or over the counter medication.	0	0		
f.	Provide medication-assisted treatment (MAT) to inmates for treatment of opioid use disorder.				
	Medication-assisted treatment (MAT) refers to the use of FDA-approved medications, such as methadone, buprenorphine (e.g., Suboxone), and naltrexone (e.g., Vivitrol), in the treatment of substance use disorders.	0	0		
	If NO to 24f, SKIP to 24g.				
	 Continue MAT for inmates who are admitted with a current prescription for buprenorphine (e.g., Suboxone) or naltrexone (e.g., Vivitrol) or were getting services from a methadone clinic prior to admission 	0	0		
	2) Initiate MAT for those identified as having opioid use disorders	0	0		
g.	admitted to your jail facilities with a current prescription from a health care	0	0		
L	professional prior to admission				
h.	Initiate providing opioids to inmates to relieve acute or chronic pain	0	0		
i.	Provide overdose reversal medications such as naloxone (Narcan) to inmates with opioid use disorders to take with them at the time of release from jail	Ο	0		
i.	Link inmates with opioid use disorder to MAT in community care upon release	0	Ο		

If YES to 24b or 24e, go on to 25.

If NO to 24b and 24e, SKIP to 26.

25. During the 30-day period from June 1 to June 30, 2019—

How many persons were admitted to your jail facilities?	
 ✓ Persons officially booked into and housed in your jail by formal legal the courts or some other official agency ✓ Repeat offenders booked on new charges ✓ Persons serving a weekend sentence coming into jail for the FIRST t subsequent admissions for the same weekend sentences). 	
EXCLUDE—	
X Returns from escape, work release, medical appointments/treatment releases, and court appearances.	facilities, furloughs, bail/bond
NO to 24b, SKIP to 25c.	
Of the admissions reported in item 25a, how many were so	reened with a
questionnaire or interview (24b) for opioid use disorder?	
(1) How many screened positive for opioid use disorders?	
	- · · · · · · · · · · · · · · · · · · ·
multiple positive results for the same individual only on	ce)?
NO to 24e, SKIP to 26.	
Of the admissions reported in item 25a, how many did your opioid withdrawal with medications (24e)?	r jail facilities treat for
(1) How many treated for opioid withdrawal were unique in	dividuals (i.e., count
multiple treatments for the same individual only once)?	
7	INCLUDE— Persons officially booked into and housed in your jail by formal legal the courts or some other official agency Repeat offenders booked on new charges Persons serving a weekend sentence coming into jail for the FIRST is subsequent admissions for the same weekend sentences). EXCLUDE— X Returns from escape, work release, medical appointments/treatment releases, and court appearances. O to 24b, SKIP to 25c. Of the admissions reported in item 25a, how many were sequestionnaire or interview (24b) for opioid use disorder? (1) How many screened positive for opioid use disorders? (2) How many of those screened positive (25b1) were unique multiple positive results for the same individual only on the opioid withdrawal with medications (24e)?

If NO to 24f, END SURVEY.

26. On June 28, 2019, how many persons CONFINED in your jail facilities were receiving medication-assisted treatment for opioid use disorders?

	raioation acciotos trostinioni for opiola accomicion	
✓	INCLUDE persons on transfer to treatment facilities but who remain under the facilities.	jurisdiction of your jail

END OF SURVEY

Form CJ-3A



2019 CENSUS OF JAILS

JURISDICTION FORM

U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION AGENT RTI INTERNATIONAL

Data Supplied By					
Name		Title			
Official Address	P. O. Box	City	State	Zip	
Area Coo Phone	de Number	Extension Ar Fax	rea Code Number		
E-mail					

General Information

- **IMPORTANT** Please use this form as reference and submit your data at http://jailcensus.rti.org. User name and password are included in the census invitation email.
- If you need assistance, contact RTI, International toll-free at 1-800-344-1387 or email jailcensus@rti.org.

What types of facilities are included in this census?

The census includes all confinement facilities administered by a local or regional law enforcement agency, which are intended for adults but sometimes hold juveniles.

- INCLUDE jails and city/county or regional correctional centers.
- INCLUDE special jail facilities operated under the authority of local or regional correctional authorities, such as medical/treatment/release centers, halfway houses, work farms, and private facilities operated under contract to local, regional, or Federal correctional authorities.
- INCLUDE temporary holding or lockup facilities if they are a part of your combined jail function.
- EXCLUDE temporary holding or lockup facilities that are not a part of your combined function from which inmates are usually transferred within 72 hours and not held beyond arraignment. If your only function is as a temporary holding or lockup facility, DO NOT complete this form. Contact us at 1-800-344-1387 or jailcensus@rti.org.

Reporting instructions:

- Please complete this CJ-3A form on information pertaining to your entire jail jurisdiction.
- If the answer to a question is "not available" or "unknown," write "DK" in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "zero, "write "0" in the space provided.
- When exact numeric answers are not available, provide estimates and mark X in the box beside each number that is estimated, e.g., 1,234 ☒.

Individual jail facility data

 Please complete a separate CJ-3A Addendum form for each individual jail facility in your jurisdiction.

BURDEN STATEMENT

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 2 hours and 10 minutes per jurisdiction form and 20 minutes per facility form, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

SECTION I. SUPERVISED POPULATION AND INMATE COUNTS

	ere		
a.		ONFINED in your jail facilities? ICLUDE—	
	IIN		
	✓ ✓ ✓ ✓	Persons in community-based programs who RETURN to your jail facilities at r ① Community-based programs include electronic monitoring, home detention day reporting, other pretrial supervision, other alternative work programs, programs, and other programs where offenders are supervised outside of Persons on transfer to treatment facilities but who remain under the jurisdiction	n, community service, alcohol/drug treatment jail.
	E	XCLUDE—	
	X X X	Inmates who are AWOL, escaped, or on long-term transfer to other jurisdiction	าร
b.	U	nder jail supervision, but NOT CONFINED?	
	IN	ICLUDE—	
	✓	Persons in community-based programs run by your jail facilities who do NOT facilities at night.	return to your jail
	EX	XCLUDE—	
	X X X	Persons under the supervision of probation, parole, or other agencies	
	Χ		facilities at night.
c.	T	OTAL (Sum of items 1a and 1b)	
Oı	n tł	ne weekend prior to June 28, 2019, did your jail facilities have	a weekend
		ram?	
1		eekend programs allow offenders to serve their sentences of confinement only orday–Sunday).	n weekends (e.g.,

O Yes—How many inmates participated?

O No

3.	. On June 28, 2019, how many persons CONFINED in your jail facilities were—					
	a.	White (not of Hispanic origin)				
	b.	Black or African American (not of Hispanic origin)				
	c.	Hispanic or Latino				
	d.	American Indian or Alaska Native (not of Hispanic origin)				
	e.	Asian (not of Hispanic origin)				
	f.	Native Hawaiian or other Pacific Islander (not of Hispanic origin)				
	g.	Two or more races (not of Hispanic origin)				
	h.	Additional categories in your jail information system				
		Specify				
	i.	Not known				
	j.	TOTAL (Sum of items 3a to 3i should equal item 1a)				
4.		June 28, 2019, how many persons CONFINED in your jail facility INCLUDE persons adjudicated or awaiting revocation hearing.	ties were—			
	a.	Probation violators				
	b.	Parole violators				
	c.	TOTAL (Sum of 4a and 4b)				

Questions 5, 6 and 8 ask about the offense seriousness and conviction status of inmates. For inmates with more than one charge/offense, report the most serious charge/offense and the associated conviction status. For probation and parole violators, report the most serious original or new charge/offense. The most serious charge/offense is the one crime for which the person could receive the longest jail/prison sentence. Alternatively, it can be determined by your jail system's offense severity code.

5.	On June 28, 2019 how many persons CONFINED in your jail facilities, regardless conviction status, had a charge/offense type of—					
	a.	Felony				
	b.	Misdemeanor				
	c.	Other				
		Specify				
	d.	TOTAL (Sum of items 5a to 5c should equal item 1a)				
6.		all persons CONFINED in your jail facilities on June 28, 2019, h	_			
	•	For persons with more than one charge/offense, report the status associated with charge/offense.				
	•	For convicted inmates, include probation and parole violators with no new sentent	ce.			
	a.	Convicted				
	b.	Unconvicted				
	c.	TOTAL (Sum of items 6a and 6b should equal item 1a)				
7.	On	June 28, 2019, how many persons CONFINED in your jail facilit	ties were—			
	a.	U.S. citizens				
	b.	Not U.S. citizens				
	c.	Of unknown citizenship status				
	d.	TOTAL (Sum of items 7a to 7c should equal item 1a)				
8.	On	June 28, 2019, how many non-U.S. citizens in item 7b were—				
	a.	Convicted				
	b.	Unconvicted				
	c.	Of unknown conviction status				

	d.	TOTAL (Sum of items 8a to 8c should equal item 7b)		
9.	On	June 28, 2019, how many persons CONFINED in your jail facility		for-
	✓	INCLUDE contractual, temporary, courtesy, or ad hoc holds for other agencies.	n, and local.	
	a.	Federal authorities		
		(1) U.S. Marshals Service		
		(2) Federal Bureau of Prisons		
		(3) U.S. Immigration and Customs Enforcement (ICE)		
		(4) Bureau of Indian Affairs (BIA)		
		X EXCLUDE inmates being housed for tribal governments in item 9c below		l
		(5) Other FEDERAL authorities		
		Specify		
	b.	State prison authorities		•
		(1) For your state		
		(2) For other states		
	c.	American Indian or Alaska Native tribal governments X EXCLUDE inmates being housed for the BIA in item 9a4.		
	d.	Other local jail jurisdictions EXCLUDE—		
		X Inmates being housed for your own jail jurisdiction (i.e., your own county/city in X Inmates being housed for tribal governments in item 9c.	mates).	
		(1) Within your state		
		(2) Outside your state		
	e.	TOTAL (Sum of items 9a to 9d)		

10. Between July 1, 2018, and June 30, 2019, what was the average daily population of all jail confinement facilities operated by your jail jurisdiction?

- ✓ INCLUDE inmates who participated in weekend programs that allow offenders to serve their sentences of confinement only on weekends (e.g., Friday–Sunday).
- To calculate the average daily population, add the number of persons for each day during the period July 1, 2018, through June 30, 2019, and divide the result by 365.
- If daily counts are not available, estimate the average daily population by adding the number of persons held on the same day of each month and divide the result by 12.
- If average daily population cannot be calculated as directed above, then estimate the typical number of persons held in your jail facilities each day.

a.	Males	
b.	Females	
c.	TOTAL (Sum of items 10a and 10b)	
11. H	ow many persons under the supervision of your jail facilities we	ere—
a.	ADMITTED to your jail facilities between July 1, 2018, and June 3 INCLUDE— ✓ Persons officially booked into and housed in your jail by formal legal docume the courts or some other official agency ✓ Repeat offenders booked on new charges ✓ Persons serving a weekend sentence coming into jail for the FIRST time only subsequent admissions for the same weekend sentences).	ent and by the authority of
	EXCLUDE— X Returns from escape, work release, medical appointments/treatment facilities releases, and court appearances.	s, furloughs, bail/bond
	(1) Males	
	(2) Females	

b. DISCHARGED from your jail facilities between July 1, 2018, and June 30, 2019? INCLUDE—

- ✓ Persons released after a period of confinement (e.g., sentence completion, bail/bond releases, other pretrial releases, transfers to other jurisdictions, or deaths)
- ✓ Persons completing their weekend sentence leaving jail for the LAST time.

EXCLUDE—

(3) TOTAL (Sum of items 11a1 and 11a2)

X Temporary discharges (e.g., work releases, medical appointments/treatment, out to courts, furloughs, day reporters, or transfers to other facilities within your jail jurisdiction).

	(1) Males	
	(2) Females	
	(3) TOTAL (Sum of items 11b1 and 11b2)	
SECT	TION II. FACILITY STAFFING	
12. O	n June 28, 2019, how many staff employed in your jail facilities	were—
•	Count each employee only once. Classify employees with multiple functions by t most frequently.	he function performed
✓	INCLUDE payroll staff, nonpayroll staff on the payroll of other government agend department, school district, or court), and unpaid interns.	cies (e.g., health
X	EXCLUDE staff paid through contractual agreements and community volunteers	•
a.	Correctional officers	
	✓ INCLUDE deputies, monitors, and other custody staff who spend more than incarcerated population.	50% of their time with the
	(1) Males	
	(2) Females	
	(3) TOTAL (Sum of items 12a1 and 12a2)	
b.	All other staff	
	✓ INCLUDE administrators, clerical and maintenance staff, educational staff, p staff, and other staff who spend more than 50% of their time in your jail.	rofessional and technical
	(1) Males	
	(2) Females	
	(3) TOTAL (Sum of items 12b1 and 12b2)	
С	TOTAL (Sum of items 12a3 and 12b3)	

SECTION III. PROGRAMS ON OPIOID TESTING, SCREENING AND TREATMENT

The following questions are about opioids. Opioids are a class of drug that include heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin), hydrocodone (Vicodin), codeine, and morphine.

13. As a matter of practice, do any jail confinement facilities operated by your jail jurisdiction—

✓ INCLUDE testing, screening, and treatment that are conducted either on or off facility grounds.

			Yes	No			
	a.	Conduct routine urinalysis tests on inmates during intake for the detection of opioids	0	0			
	b.	Screen inmates during intake for opioid use disorder with a questionnaire or interview	0	0			
	C.	Provide overdose education to inmates identified as having opioid use disorders	0	0			
	d.	Initiate behavioral or psychological treatment for inmates identified as having opioid use disorders	0	0			
	e.	Provide medications to inmates for the treatment of opioid withdrawal symptoms, such as clonidine, lofexidine, methadone, or buprenorphine (e.g., Suboxone). X EXCLUDE non-prescription or over the counter medication.	0	0			
	f.	Provide medication-assisted treatment (MAT) to inmates for treatment of opioid use disorder.					
		Medication-assisted treatment (MAT) refers to the use of FDA-approved					
		medications, such as methadone, buprenorphine (e.g., Suboxone), and naltrexone (e.g., Vivitrol), in the treatment of substance use disorders.	0	0			
		If NO to 13f, SKIP to 13g.					
		Continue MAT for inmates who are admitted with a current prescription or were getting services from a methadone clinic prior to admission	0	0			
		2) Initiate or continue MAT for those identified as having opioid use disorders	Ο	0			
	g.	Continue providing prescription opioids to inmates with acute or chronic pain admitted to your jail facilities with a current prescription from a health care professional prior to admission	0	0			
	h.	Initiate providing opioids to inmates to relieve acute or chronic pain	0	Ο			
	i.	Provide overdose reversal medications such as naloxone (Narcan) to inmates with opioid use disorders to take with them at the time of release from jail	0	0			
	j.	Link inmates with opioid use disorder to MAT in community care upon release	0	0			
If Y	If YES to 13b or 13e, go on to 14.						
If N	If NO to 13b and 13e, SKIP to 15.						

14. During the 30-day period from June 1 to June 30, 2019—

a. How many persons were admitted to your jail facilities? INCLUDE—

- ✓ Persons officially booked into and housed in your jail by formal legal document and by the authority of the courts or some other official agency
- ✓ Repeat offenders booked on new charges
- ✓ Persons serving a weekend sentence coming into jail for the FIRST time only (Do not count subsequent admissions for the same weekend sentences).

EΧ	\sim	 חו	F
-	\mathbf{c}	 טי	

		CLODE—	
		Returns from escape, work release, medical appointments/treatment factorieses, and court appearances.	cilities, furloughs, bail/bond
If N	NO to	o 13b, SKIP to 14c.	
b.		the admissions reported in item 14a, how many were screenstionnaire or interview (13b) for opioid use disorder?	ened with a
	(1)	How many screened positive for opioid use disorders?	
		How many of those screened positive (14b1) were unique multiple positive results for the same individual only once	- · ·
If N	NO to	o 13e, SKIP to 15.	
C.		the admissions reported in item 14a, how many did your ja oid withdrawal (13e)?	il facilities treat for
		How many treated for opioid withdrawal were unique indiv multiple treatments for the same individual only once)?	viduals (i.e., count

If NO to 13f, END SURVEY.

15. On June 28, 2019, how many persons CONFINED in your jail facilities were receiving medication-assisted treatment for opioid use disorders?

✓ INCLUDE persons on transfer to treatment facilities but who remain under the jurisdiction of your jail facilities.

END OF SURVEY



2019 CENSUS OF JAILS

FACILITY FORM

U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION AGENT RTI INTERNATIONAL

Data Supplied By							
Name				Title			
Official Addres			city		State	Zip	
Phone	Area Code	Number	Extension	Area Code Fax	Number		
E-mail							

Complete this addendum for each jail facility in your jurisdiction that has both a separate administrator and a separate staff. <Facility name and address>

SECTION I. FACILITY CHARACTERISTICS

1. For which of the following purposes [does this jail facility | do your jail facilities] hold offenders?

		res	NO
a.	Detention [facility facilities] with authority to hold persons facing criminal charges beyond 72 hours	0	0
b.	Correctional [facility facilities] for persons convicted of offenses with sentences usually of a year or less	Ο	0
C.	Correctional [facility facilities] for persons convicted of felonies with sentences of more than year	0	0
d.	Temporary holding or lockup [facility facilities] in which arrestees are usually detained up to 72 hours, excluding holidays and weekends, pending arraignment	0	0

2. As a matter of practice, what type of inmates [does this jail facility | do your jail facilities] house?

Mark only ONE choice.

- O Males only
- O Females only
- O Both males and females

3.	Wŀ	nat are the functions of [this jail facility your jail facilities]?		
			Yes	No
	a.	General adult population confinement	0	0
	b.	Persons returned to custody (e.g. probation, parole, and bail bond violators)	0	0
	C.	Work release/prerelease	0	0
	d.	Reception/diagnosis/classification	0	0
	e.	Confinement of juveniles	0	0
	f.	Medical treatment/hospitalization confinement	0	0
	g.	Mental health/psychiatric care	0	0
	h.	Alcohol treatment confinement	0	0
	i.	Drug treatment confinement	0	0
	j.	Boot camp	0	0
	k.	Protective Custody	0	0
	I.	Other	0	0
		Specify		
4.	On	June 28, 2019, what was the total capacity of [this jail facility ye	our jail fac	ilities]?
	a.	Rated Capacity	1116 - 1	- 11
		The maximum number of beds or inmates assigned by a rating official to [this jail for excluding separate temporary holding areas.	acility your j	ali tacilitiesj,
]
				J []
	b.	Design capacity The number of impacts and an architects into a deal for the init famility I was in	::	
		The number of inmates planners or architects intended for [this jail facility your jail	ii tacilitiesj.	
				7
5.	or	June 28, 2019, [was this jail facility were your jail facilities] und local court order or consent decree to limit the number of inmates used?		-
		○ Yes—go on to 6		
		○ No—skip to 7		

	a.	What was the maximum number of inmates [this jail facility was allowed to house?	your jail facil	ities were]
	b.	In what year did this order or decree take effect? If more than one, report the year for the longest decree in effect.		
				7
7.		June 28, 2019, [was this jail facility were your jail facilities] local court order or consent decree for specific conditions of c		al, state
		○ Yes—go on to 8		
		○ No—skip to 9		
8.		es to 7 (under a court order or consent decree for specific cor	iditions of	
			Yes	No
	a.	Crowding	0	Ο
	b.	Recreation/exercise	Ο	0
	C.	Staffing	Ο	0
	d.	Medical facilities or services	Ο	0
	e.	Visiting/mail/telephone policy	0	Ο
	f.	Food services/nutrition/cleanliness	Ο	0
	g.	Library services	Ο	0
	h.	Grievance procedures or policies	Ο	0
	i.	Fire hazards	Ο	0
	j.	Disciplinary procedures or policies	0	0
	k.	Administrative segregation procedures or policies	0	Ο
	l.	Religious practices	0	0
	m.	Search policies or practices	0	0
	n.	Education or training programs	0	0
	0.	Counseling programs	0	0

6. If Yes to 5 (under a court order or consent decree to limit the number of inmates),

	p.	Inmate classification	0	0
	q.	Other	0	0
		Specify		
SE	СТ	ION II. SUPERVISED POPULATION AND INMATE COUNTS		
9.		June 28, 2019, how many persons CONFINED in [this jail facility re—	your jail	facilities]
	a.	Adult males (age 18 or older)		
	b.	Adult females (age 18 or older)		
	c.	Males age 17 or younger		
	d.	Females age 17 or younger		
	e.	TOTAL (Sum of items 9a to 9d)		
0.		all the persons age 17 or younger CONFINED in [this jail facility June 28, 2019 (sum of 9c and 9d), how many were tried or awaiting t		_
11.		During the 30-day period from June 1 to June 30, 2019, on what datility your jail facilities] hold the greatest number of inmates?	ay did [thi	s jail
		nk population should be equal to or greater than the confined inmate population report	ted in item 9	€.
		Jun	е	, 2019
	b.	How many persons were CONFINED on that day?		

10.

Subject: 2019 Census of Jails | << Jail Name>>

Dear << Salutation >> << LastName >>:

We are writing to invite you to participate in the 2019 Census of Jails (COJ). Started in 1970, the COJ is the nation's longest running and most comprehensive data collection focused on local jails and inmates. The COJ collects information on jail population counts and characteristics, staffing, and programs from every jail facility in the United States. Information from the COJ is widely used by practitioners, policy makers, researchers, and the general public to track jail population and understand the conditions and needs of local jails across America.

Participation in the census is voluntary, but very important for our national jail statistics to be accurate. The Bureau of Justice Statistics has contracted with RTI, International to conduct this data collection. Please submit your data online by August 2, 2019 at:

Website: https://jailcensus.rti.org

Username: «username»
Password: «password»

Submit by: August 2, 2019

<<IF MULT-FACILITY-JAIL: When you are on the website above, please first fill out form CJ-3A to report for the combined inmate population across all your jail facilities, and then fill out the CJ-3A Addendum forms to report facility information separately for each facility.>>

<<IF SINGLE-FACILITY-JAIL: When you are on the website above, please fill out form CJ-3: 2019 Census of Jails—Single-Facility Jail Form. If you operate more than one facilities, please contact us for different forms.>>

For most jails, it takes about 2 hours and 30 minutes to complete the census form. You can complete the form in more than one session and you may also choose to forward this email to colleagues within your agency, if you feel they can help you complete the survey.

For assistance with completing this survey, please contact RTI at <u>jailcensus@rti.org</u> or (866) 354-4992, Monday through Friday, 9 AM to 5 PM, EDT. If you have questions about the collection, please contact the BJS program manager, Zhen Zeng, at <u>zhen.zeng@usdoj.gov</u>.

Thank you very much for your participation in BJS's statistical programs.

Sincerely,

Zhen Zeng, Program Manager Census of Jails Program

Bureau of Justice Statistics

Zhen Zeng

E. Ann Carson, Acting Chief Corrections Unit

Bureau of Justice Statistics

Census of Jails



Every 5 to 6 years, the Bureau of Justice Statistics conducts the Census of Jails (COJ) to enumerate every jail facility in the United States, tracking jail population changes and characteristics. The COJ also collects facility information on capacity, staffing, and programs. BJS is authorized to conduct this survey under 42 USC § 3732, and may only use data collected under its authority for research and statistical purposes. This data collection has been approved by the Office of Management and Budget (OMB Control No: 1121-0100; Expiration Date: 03/31/2022). Additional information about the purpose, authority, and security of this data collection can be found at https://jailcensus.rti.org.

SUBJECT: RESPONSE REQUESTED: 2019 Census of Jails | << Jail Name>>

Dear <<Salutation>> <<Last Name>>:

We are writing to remind you of the upcoming August 2nd due date for your 2019 Census of Jails (COJ) submission. The COJ is a nation-wide data collection focused on local jails. Your participation helps ensure that the information Bureau of Justice Statistics collects from the census is accurate.

RTI International is the data collection agent for the 2019 COJ. Please submit your data online—

Website: https://jailcensus.rti.org

Username: «username»
Password: «password»
Submit by: August 2, 2019

For most jails, it takes about 2 hours and 30 minutes to complete the census form. You can complete the form in more than one session and you may also choose to forward this email to colleagues within your agency, if you feel they can help you complete the survey.

If needed, you can view the survey form and the FAQs at the website above. For assistance with completing this survey, contact RTI at <u>jailcensus@rti.org</u> or (866) 354-4992, Monday through Friday, 9 AM to 5 PM, EDT.

Thank you in advance for your participation in BJS's statistical programs.

Sincerely,

Then Zeng

Zhen Zeng, Program Manager Census of Jails Program

Bureau of Justice Statistics

E. Ann Carson, Acting Chief Corrections Unit

Bureau of Justice Statistics

Census of Jails



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SUBJECT: RESPONSE REQUESTED: 2019 Census of Jails | << Jail Name>>

Dear <<Salutation>> <<Last Name>>:

We would like to thank you for your past support for Bureau of Justice Statistics' (BJS) statistical programs and remind you that the Census of Jails (COJ) 2019 collection is overdue. BJS needs your prompt response to publish accurate and timely statistics on local jails and inmates. Please submit your data as soon as possible online—

Website: https://jailcensus.rti.org

Submit by: ASAP

If needed, you can view the survey form and the FAQs at the website above. For assistance with completing the survey, please contact our data collection team at <u>jailcensus@rti.org</u> or (866) 354-4992, Monday through Friday, 9 AM to 5 PM, EDT.

Thank you in advance for your help.

Sincerely,

Then Zeng

Zhen Zeng, Program Manager Census of Jails Program

Bureau of Justice Statistics

E. Ann Carson, Acting Chief

Corrections Unit

Bureau of Justice Statistics

Census of Jails



Every 5 to 6 years, the Bureau of Justice Statistics conducts the Census of Jails (COJ) to enumerate every jail facility in the United States, tracking jail population changes and characteristics. The COJ also collects facility information on capacity, staffing, and programs. BJS is authorized to conduct this survey under 42 USC § 3732, and may only use data collected under its authority for research and statistical purposes. This data collection has been approved by the Office of Management and Budget (OMB Control No: 1121-0100; Expiration Date: 03/31/2022). Additional information about the purpose, authority, and security of this data collection can be found at https://jailcensus.rti.org.



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, D.C. 20531

September 7, 2019

<<Salutation>> <ContactFirstName>> <<ContactLastName>>

<<Agency Name>>

<< Address 1>>

<< Address 2>>

<<City>>, <<State>> <<Zip>>

Dear <<Salutation>> <<Last Name>>:

I am writing to ask for your assistance in completing the Bureau of Justice Statistics' (BJS) 2019 Census of Jails (COJ). We would greatly appreciate if you would submit your 2019 form by **September 30, 2019**.

Your data, combined with data from other local jails, allows BJS to publish on national trends in jail populations. BJS is committed to disseminating accurate and timely statistics to inform the practices and policies of jails nationwide.

You may submit your data online—

Website: https://jailcensus.rti.org

Username: «username»
Password: «password»

If you prefer, you may download the 2019 COJ form from the website above, fill it out, and fax or mail it back to us.

If you have any questions about this survey, please contact our hotline at (866) 354-4992 Monday through Friday, 9 AM to 5 PM, EDT, or email <u>jailcensus@rti.org</u>. RTI International is BJS's data collection agent for the COJ.

BJS is authorized to conduct the COJ under 34 U.S.C. § 10132, and may only use data collected under its authority for research and statistical purposes. This data collection has been approved by the Office of Management and Budget (OMB Control No: 1121-0100; Expiration Date: 03/31/2022).

Thank you very much for your participation and continued support for BJS's statistical programs.

Sincerely,

Director

SUBJECT: RESPONSE REQUESTED: 2019 Census of Jails | << Jail Name>>

Dear <<Salutation>> <<Last Name>>:

Our records show that you have not completed the 2019 Census of Jails. We are writing to let you know that we are closing this data collection on **December 7, 2019**. Please submit your form as soon as possible at—

Website: https://jailcensus.rti.org

Username: «username» Password: «password»

Submit by: ASAP

If you have difficulty completing the survey by December 7, please contact us at (866) 354-4992 Monday through Friday, 9 AM to 5 PM, EDT, or email <u>jailcensus@rti.org</u>.

Thank you again for your participation. We look forward to receiving your form soon.

Sincerely,

Then Zeng

Zhen Zeng, Program Manager Census of Jails Program

Bureau of Justice Statistics

E. Ann Carson, Acting Chief Corrections Unit

Bureau of Justice Statistics

Census of Jails



Every 5 to 6 years, the Bureau of Justice Statistics conducts the Census of Jails (COJ) to enumerate every jail facility in the United States, tracking jail population changes and characteristics. The COJ also collects facility information on capacity, staffing, and programs. BJS is authorized to conduct this survey under 42 USC § 3732, and may only use data collected under its authority for research and statistical purposes. This data collection has been approved by the Office of Management and Budget (OMB Control No: 1121-0100; Expiration Date: 03/31/2022). Additional information about the purpose, authority, and security of this data collection can be found at https://jailcensus.rti.org.

January 9, 2019

Annual Survey of Jails/Census of Jails

Round 1 and 2 Cognitive Testing Findings and Recommendations

Final Report

Prepared for

Zhen Zeng

U.S. Department of Justice Office of Justice Programs Bureau of Justice Statistics 810 Seventh Street, NW Washington, DC 20531

Prepared by Amanda Smith **RTI International** 3040 Cornwallis Road Research Triangle Park, NC 27709

I. BACKGROUND AND PURPOSE

Since 2009, the Bureau of Justice Statistics (BJS) and RTI International have periodically revised forms for a variety of data collections efforts (e.g., the Annual Survey of Jails and the Census of Jails). The purpose of this task is to cognitively test newly-developed items (See *Attachment B* for new form items) that are being considered for future jail data collections to assess how well they work (i.e., are understood and are capturing intended data) when administered to a sample of the survey's target population. Participant feedback on the feasibility and burden of providing the requested data is also collected. This report provides –

- An overview of the sampling and recruitment procedures, as well as a table detailing response by strata.
- A description of the methodology used to conduct interviews.
- A condensed summary of findings from Round 1 of cognitive testing (See *Appendix A* for the full Round 1 Memorandum), followed by Round 2 findings and final recommendations for each item.
- A summary of global findings (i.e., general feedback that applies to the form as a whole), to include a discussion of survey timing and burden.

II. SAMPLING AND RECRUITMENT

Sampling Procedures

To ensure representation of distinct types of jails in the cognitive test RTI, in collaboration with BJS, identified several categories of facilities that we believed would have different perspectives and experiences responding to the form. Specifically, the following strata were identified and used to sample jails for cognitive testing –

- *Size:* Small jails (ADP of fewer than 200 inmates), medium jails (ADP between 200 and 999 inmates), and large jails (ADP of 1,000 or more inmates).
- *Overdose death rate (DR)*: Low (DR < 15.9) vs. high (DR >= 16.0) overdose death rate county.
- *Past response and data quality pattern:* High item response rate (reported 50% or more) and low item response rate (reported less than 50%) on the 2013 Census of Jails.

In total we sampled 177 jails across the strata noted above, resulting in 16 completed interviews in Round 1 and 17 completed interviews in Round 2¹. **Exhibit 1** provides a breakdown of completed interviews by sample strata for Round 1, Round 2, and Round 1 and 2 combined.

¹ The sample size was increased in Round 2 to account for the possibility of increasing the number of interviews to 25.

Exhibit 1. Completed Interviews by Strata

Round 1						
	Reported 50% or more		Reported less than 50%			
Size	DR < 15.9	DR >= 16.0	DR < 15.9	DR >= 16.0	Total	
Large: ADP > 1000	2	3	1	1	7	
Medium: ADP 200-999	0	1	3	2	6	
Small: ADP < 200	2	1	0	0	3	
Total	4	5	4	3	16	
Round 2						
	Reported 50% or more		Reported less than 50%			
Size	DR < 15.9	DR >= 16.0	DR < 15.9	DR >= 16.0	Total	
Large: ADP > 1000	3	1	1	0	5	
Medium: ADP 200-999	4	3	1	1	9	
Small: ADP < 200	1	1	1	0	3	
Total	8	5	3	1	17	
Round 1 and Round 2 Combined						
	Reported 50% or more		Reported less than 50%			
Size	DR < 15.9	DR >= 16.0	DR < 15.9	DR >= 16.0	Total	
Large: ADP > 1000	5	4	2	1	12	
Medium: ADP 200-999	4	4	4	3	15	
Small: ADP < 200	3	2	1	0	6	
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In addition to the strata above, jails that provide medication assisted treatment (MAT) were also of particular interest when testing the newly developed opioid items (questions 7-9). In total we completed interviews with 10 jails that operate MAT programs (5 in Round 1 and 5 in Round 2).

Recruitment

Selected jails were first contacted by BJS via a lead email that explained the purpose of the test and provided contact information for RTI. RTI followed up five days later with a reminder email to jails that had not responded to the initial request. We made a final contact attempt by phone three days after the RTI follow-up email.

For each agency that agreed to participate, we scheduled a telephone interview between the primary point of contact (POC) or their designee and one of three experienced RTI survey methodologists. After the interview was scheduled, we followed up with a confirmation email that (1) explained the interview would last approximately 60 minutes, (2) provided login

credentials for the survey website, and (3) requested they complete the questionnaire by a certain date before the interview. (See *Appendix D* for communication materials used at each contact).

We recruited and conducted sixteen interviews between August 21 and September 27 during Round 1 and seventeen interviews between November 28 and December 27 during Round 2. In total, thirty-three interviews were conducted throughout the duration of testing in 2018.

III. METHODOLOGY

During the interviews, we asked participants a series of open-ended questions that probed their interpretation and reaction to each item on the form. Interviewers followed an interview guide (*Appendix C*) that included an introductory script that was read verbatim to ensure that participants had a consistent understanding of the cognitive interview process. The guide also contained a list of "scripted probes" that interviewers used during the cognitive interview. Some probes were required; other probes were conditional and were used depending on responses received. When necessary, interviewers asked unscripted "spontaneous probes" (e.g., Could you tell me more about that?) to clarify answers or inquire more deeply about issues as they were raised by participants. Interviewers also probed to learn whether and how the data were recorded in information management systems and whether the data were difficult to retrieve in the requested formats. That is, we assessed the participants general understanding of what the question was asking, and the level of burden and their ability to respond to questions (i.e., retrieve and provide data).

After all interviews were completed, interviewers compiled all notes and analyzed participant feedback in conjunction with survey responses (e.g., was a complete response provided) to identify issues and suggest possible areas for improvement to questionnaire items. The following section provides a summary of those findings and suggested recommendations to form items.

IV. FINDINGS AND RECOMMENDATIONS

In general, POCs reported using their agency's information management systems or secondary record systems that data submitters maintained (e.g., spreadsheets, booking ledgers) to respond to questions. However, it is noted that in both rounds of testing many jails noted they either did not collect the requested data and/or had difficulty accessing and providing data in the requested format for several of the items.

For each item we present a condensed summary of Round 1 findings and form changes for reference (See *Appendix A* for the full Round 1 Memorandum), Round 2 findings, including any difficulties participants had when responding to items (e.g., interpreting item wording, following instructions etc.) and concerns or challenges with gathering and providing data, and final recommendations for each item.

ITEM 1 (CONFINED POPULATION)²

ROUND 1

Findings: Participants stated this question was clear and did not have any issues providing responses.

Recommendations/Changes Made: None

ROUND 2

Findings: Mirroring the findings from Round 1, participants stated this question was clear and did not have any issues providing responses.

Recommendations: None.

ITEM 2 (CONFINED POPULATION BY AGE AND SEX)

ROUND 1

Findings: Overall, participants understood this question, but they reported some difficulty providing the requested counts broken out by age group.

- Nine participants could only provide totals and juvenile counts (where applicable) by sex and followed the instructions to respond to 2a and 2g. Jail management systems were not able break out inmate population by age as requested, so they were unable to readily access this information.
- Seven participants were able to report counts by age and sex without issue.

Recommendations/Changes Made: None

ROUND 2

Findings: Similar to Round 1, the majority of participants did not appear to have difficulties interpreting the question, but some jails did have trouble providing counts.

- Four participants provided a response to 2a but left all other items in question 2 blank. These participants indicated they could access juvenile counts by sex but that their reporting system could not provide counts by age group *or* sex for adults.
 - One participant indicated during the interview that they realized after seeing the question again that they could have provided total counts by sex (2g) but did not do so on the survey.

² It is noted that this item was included on the form as a point of reference for the questions that followed and was not being tested for potential changes.

- Four participants were only able to provide counts to 2a and 2g. These participants indicated there was no straightforward way to break confined population into age groups as requested. It is noted these participants followed the instruction to provide counts for 2a and 2g without issue.
- Nine participants were able to provide the requested counts for all items without issue.

Recommendations: None. Based on the findings in Round 1 and Round 2, it appears the majority of participants do not have trouble interpreting this question.

ITEM 3 (NON-US CITIZENS)

ROUND 1

Findings: Overall, participants understood this question, but they reported some difficulty providing the requested counts.

- Nine participants could not provide accurate citizenship counts or estimates because they do not readily have access to this information in their systems and/or do not ask about citizenship status.
- Three participants specifically indicated they would need to review individual cases to provide citizenship data (3b). These participants also indicated that they would be unable to break down by convicted/unconvicted status unless they reviewed each case manually.
- Four participants were able to respond to this question without issue.

Recommendations/Changes Made: A checkbox was included on the web form (i.e., "check box if unknown") to reduce confusion for participants that were unable to respond.

ROUND 2

Findings: Mirroring the findings from Round 1 (Appendix A), the majority of participants understood the question and felt it was clear. Like Round 1, we continued to find some participants had difficulties with providing the requested data. However, the addition of the "unknown" checkboxes appeared to reduce confusion for participants that were unable to provide responses. The "unknown" checkboxes also appear to have improved data quality (i.e., a response was provided instead of leaving the item blank). However, response patterns for this item were varied. We found –

- Five participants provided a count for all the items. No issues were encountered with these participants.
- Four participants did not provide a response to 3a or 3b and checked the "number of non-US citizens is unknown" box.
- One participant provided "0" for 3a and 3b and checked the box for "number of non-US citizens is unknown."

- Two participants provided a response to 3a, left 3b blank, and checked the "number of non-US citizens is unknown" box.
- Two participants provided an estimate for 3a, entered "0" to 3b and checked the estimate box, answered "Count is unknown" to follow-up triggered by "0" response. These participants also checked the "number of non-US citizens is unknown" box.
- One participant provided estimate counts on 3a and 3b. They left 3b1-3 blank and checked the "number of convicted/ unconvicted unknown" box.
- One participant entered "0" for 3b, checked the estimate box, and indicated it was an estimate in the follow-up triggered by the "0" response.
- One participant provided a response to 3a and 3b but included US <u>and</u> non-US citizens in the convicted/unconvicted counts (3b1-3). It appears this participant did not see the instructions or follow instructions above 3b1 (i.e., "Of the non-US citizens...")

As indicated by the response patterns above, several participants had difficulties providing data for this item. Participants provided the following feedback about the difficulties they experienced providing data –

- Eleven participants explained that the information was "difficult" to obtain. Many of
 them explained that they either do not collect this information or they would need to look
 up the information manually as their systems are not designed to run reports on
 citizenship. These participants indicated that manual data abstraction would be very timeconsuming and as such left items blank.
- Similarly, seven participants indicated the instructions for how to count convicted and unconvicted inmates were clear, but of the breaking out counts of convicted/unconvicted would not be possible.
- Seven participants indicated the data they collected was based on self-reporting at the time of intake. Two of these participants questioned the accuracy of self-reporting and felt the data they collected on citizenship was not very accurate.

Recommendations: If BJS decides to include this item in future collections, we suggest interpreting data with caution. Many participants either could not provide a response or were so varied in their methods of determining and reporting citizenship that the data may not be valid and reliable.

ITEM 4 (FOREIGN-BORN CITIZENS)

ROUND 1

Findings: Overall, participants understood this question, but they reported some difficulty providing the requested counts. The majority of the participants had challenges with the exclusionary criteria under 4b (i.e., "Anyone born abroad to a U.S. citizen parent or parents.")

- Eleven participants stated they stated they did not track place of birth in their information systems
- Four participants provided counts for this question.
- Three participants stated they could not to follow the exclusionary criteria "Anyone born abroad to a U.S. citizen parent or parents." Two provided counts and one did not respond to the item.

Recommendations/Changes Made: A checkbox was included on the web form (i.e., "check box if unknown") to reduce confusion for participants that were unable to respond.

ROUND 2

Findings: Overall participants thought the question and include/exclude criteria were clear, but there was some difficulty providing the requested counts. Ten participants explained that the data are not readily available, and their information system does not have an easy way to run a report providing these data. In most cases, participants indicated they would have to go through individual files to gather the information. Of those that provided a value in 4b, most of the participants explained that it was too difficult to break them out by convicted or unconvicted status.

- Four participants provided a count for all items and no issues were encountered.
- One participant provided a response to 4a and 4b but included US <u>and</u> foreign-born inmates in counts for 4b1-3 (i.e., did not follow instructions above 4b1 "Of the foreignborn inmates...").
- Five participants did not provide a response to 4a or 4b and checked the "number of foreign-born inmates is unknown" box.
- Three participants provided estimated counts for 4a and/or 4b
 - One left 4b1-3 blank and checked the "number of convicted and unconvicted unknown" box.
 - One provided an estimate count for 4a, entered "0" for 4b and checked the estimate box, and indicated it was an estimate in the follow-up triggered by the "0" response.
 - One provided an estimate count for 4a, left 4b blank, checked "number of foreignborn inmates is unknown" box
- Two participants provided counts for 4a and 4b, left 4b1-3 blank and checked the "number of convicted and unconvicted unknown" box.
- Two participants entered "0" to 4b and checked the estimate box, answered "Count is unknown" to follow-up triggered by "0" response, and checked the "number of foreignborn inmates is unknown" box).

Recommendations: If BJS decides to include this item in future collections, we suggest interpreting data with caution. Many participants either could not provide a response or were so

varied in their methods of determining and reporting place of birth that the data may not be valid and reliable.

ITEM 5 (CONDITIONAL RELEASE)

ROUND 1

Findings: Overall, participants understood this question, but they reported some difficulty providing the requested counts.

- Six participants indicated they do not have a way to parse out counts for each category in item 5 and did not respond to the question.
- Five participants provided a partial response to the question. These participants were able to provide counts for bench warrants/detainers, probation, and parole, but had challenges responding to conditional release and/or pretrial release violation items.
- Five participants were able to provide a full response to this item. However, two of these participants indicated it was burdensome and difficult to provide this information.

Recommendations/Changes Made: The item was simplified to only request information probation and parole.

ROUND 2

Findings: The participants understood the question and most of them were able to provide responses to 5a and 5b. In some cases, participants were able to provide counts for probation violators, but not parole violators and vice-versa. The participants that had trouble providing a response explained that they could not look up the information for a specific day or would have to manually review inmate records. It would not be easy for some participants to determine if it was a probation or parole violation without checking individual records.

- Thirteen participants provided a count for all items and did not have any issues.
- One participant provided a response to the probation item but left the parole item blank. They explained that the probation count was "easy" to obtain, but that they do not have access to data on parole violations.
- One participant provided "0" for probation and responded with an estimate for parole. They indicated that it would be "easy" to determine parole as these data are included in their daily reports, but there would be no way to determine probation violators without a manual count.
- One participant provided "0" estimate count for both items. They explained that they were unable to provide these data as their reports would only allow them to pull the number of violators booked on that day, not the total number in custody.

• One participant could not provide counts. They indicated they would not be able to determine if they were probation or parole and would have to review individual reports. They left 5a and 5b blank.

Recommendations: None.

ITEM 6 (OFFENSE TYPE)

ROUND 1

Findings: Overall, participants understood this question, but they reported some difficulty categorizing and providing the requested counts.

- Seven participants indicated their information management systems do not break out inmates by offense type in a manner that maps easily to the categories in the form and they would need to manually tally counts.
- One participant indicated they could likely provide counts by offense type, but for probation and parole violators they would need to review each case individually to determine their original charge.
- Eight participants were able to provide a response to this item. However, two of these participants indicated the process was burdensome.

Recommendations/Changes Made: The number of categories was reduced to violent offenses, property offenses, other, and not known. A broader "public order offenses" category was added. The instructions on how to classify inmates was expanded to include the use of the jail system's offense severity code to determine most serious offense.

ROUND 2

Findings: Similar to Round 1, participants understood this question, but did have some difficulty categorizing and providing the requested counts. The participants who could not provide the requested counts by most serious offense stated that they would need to manually review inmate files to categorize these offenses as they do not readily have access to these data (e.g., a system query or report they could easily obtain). About half the participants explained that they track the offense for each inmate, but it would be difficult and time-consuming to gather this information.

- Nine participants provided counts for all items. Of these
 - Six participants did not report having any issues. Two of these participants provided estimate counts.
 - One participant indicated that probation and parole violators only show as probation/parole violators in the system (i.e., they do not have access to original/new charge information). They stated they included these counts under 6e ("All other").

- One participant was able to provide estimated counts, but indicated they had to review individual release orders to determine their original charge, which they felt was "a lot they were being asked to do."
- One participant indicated this was difficult to report because their system does not provide the number of persons, but rather the number of charges. This participant looked at individual records to determine their count and provided an estimate.
- Four participants left all the items blank and stated they were unable to provide responses. One of these participants also checked the estimate boxes.
- One participant provided a "0" response to all items and indicated that classifying by offense would require a lot of time
- Despite knowing the offense information for all inmates, three participants placed some, or all, of their inmates in the "Not Known" category (6f). These participants indicated it was too burdensome to break them out in the categories requested and provided the following feedback
 - One participant provided counts to 6a ("Violent offenses"), 6f ("Not known"), and 6h ("Total") only. They were able to break out 6a ("Violent offenses") and placed all other inmates in the "Not known" category (6f). They explained that they track offense information but breaking it out by category and most serious offense would be a manual process.
 - One participant entered a "0" count and checked the estimate boxes for 6a-e. They then placed all inmates in the "Not known" category (6f). They explained that they track offense information but it would be too burdensome to break out counts by most serious offense.
 - o One participant provided counts to 6f ("Not known") and 6h ("Total") only. They placed all inmates in the "Not known" category (6f). They explained that it is too difficult to break out counts by most serious offense.

For 6e ("All other"), participants explained that they included the following –

- Bond forfeitures, offenses that have already been heard by the magistrate, harassment of a public servant, offenses that have already been sentenced, and accidents involving damage to a vehicle/misdemeanor.
- Probation holds or drug code violators.
- Probation and parole violators that were only listed as holds for probation/parole violations in the system as they do not have data on the original or new charge.
- One participant shared that "There are so many other [offenses] out there that are not covered here that it is hard to say what they were. The categories are almost too broad to capture everyone."

Recommendations: To mitigate issues with agencies misreporting all data under the "Not Known" category (6f), BJS may want to consider instructing participants to only respond to 6h ("Total") if they are unable to categorize by most serious offense.

ITEM 7 (OPIOID 1)

ROUND 1

Findings: In general, participants understood this question, but they reported some issues with interpretation and burden.

- The majority of participants noted they had to coordinate with medical staff and/or a contract medical provider to obtain this information, which in some cases made responding burdensome.
- A few participants misinterpreted the term "medication-assisted treatment" to include providing OTC medication and as a result misreported in item 7 (i.e., responded yes to items 7f and 7g.)

Recommendations/Changes Made: A full definition of the term "medication-assisted treatment" was included in the question text of 7e to reduce confusion. Additionally, Round 1 form items 7f-h were revised and became subitems of 7e (i.e., 7e1-3).

ROUND 2

Findings: Similar to Round 1 findings, the majority of participants (13 out of 17) noted they needed to coordinate with medical staff to answer all or some of the questions in item 7. As such, some participants were unable to speak to how well the questions were understood by medical staff, or the difficulty these staff may have had when answering. Some participants also appeared to have limited knowledge of MAT programs and were unable to respond to some of our probes.

- Ten participants indicated they do not provide MAT, five indicated they do provide MAT, and two were unsure if their jail provided MAT.
 - Fifteen participants indicated they do screen inmates for opioid use disorders, with one participant responding no and one participant indicating they were uncertain. These participants left item 7b blank.
- The two participants that were uncertain if their jails provided MAT and were unable to respond to any of the questions in item 7. These participants left all items blank and provided the following feedback about why they were unable to respond
 - One participant indicated they tried to reach out to their medical division but the staff member that oversees this information was out of the office.
 - One participant indicated they work with a private company to conduct medical assessments. This company recently took over drug screenings and the jail had not received any data from them at the time of the interview.
- One participant skipped 7e and 7e1-3 and could not provide an explanation as to why these items were skipped since they coordinated with medical staff to complete the form.

- One participant provided conflicting responses. Specially, they responded "No" to item 7e and "Yes" to 7e1-3. This participant later indicated they do not provide MAT and as such should have responded "No" to 7e1-3.
- Thirteen participants provided a response to all items and did not appear to have trouble responding to the items.
 - Two of these participants skipped items 7e1-3 on the web but responded "No" to 7e. In each case medical staff filled out the PDF version of the form, which includes instructions to skip these items if 7e = "No." The participant then entered the values provided on the web, which BJS asked to be programmed differently from the PDF version.³
- Participants provided a variety of responses when asked if the item was difficult to answer –
 - Six participants reported challenges with providing a response to this item:
 - Three participants specifically indicated it was difficult trying to coordinate to obtain the information when asked if it was difficult to provide a response.
 - One participant indicated they did not understand the system used to pull the information.
 - One participant was uncertain whether they have a MAT program and was unsure how to respond. This participant indicated they work with a private company and do not have access to these data.
 - One participant indicated it "took some time" to respond as they were just starting their MAT program.
 - Nine participants reported it was "easy" to provide a response to this question. However, many of these participants did not respond to item 7 themselves and may have been unable to speak to potential difficulties other staff may have experienced.
 - Two participants said they were uncertain whether the staff they coordinated with had any difficulties responding.
- Thirteen participants indicated they felt the definition of medication-assisted treatment was clear. It is noted, however, that four participants indicated they were unsure of how the medical staff interpreted the definition of MAT and were unable to answer the probe

³ The web form contains instructions to skip 7e1-3 if 7e = "No", while the web form shows 7e1-3 regardless of response to 7e (i.e., does not skip/hide these items).

themselves. In general, it appears the definition added in Round 2 as a result of Round 1 testing decreased some participant confusion about the meaning of MAT.

Recommendations: To avoid issues with data quality (e.g., conflicting responses), and to mirror the PAPI version, we suggest only showing 7e subitems (i.e., 7e1-3) on the web if the participant answers "Yes" to 7e.

ITEM 8 (OPIOID 2)

ROUND 1

Findings: In general, participants who received this question said it was clear, but they reported some issues with interpreting the term "unique individuals," and had challenges accessing data to provide the requested counts.

- The majority of participants noted they had to coordinate with medical staff and/or a contracted medical provider to obtain this information, which in some cases made responding burdensome.
- Five facilities indicated they do not track screening and/or treatment information in their systems and compiling this data would be burdensome. These participants were unable to provide counts to 8b and/or 8c.
- Two participants that misinterpreted the term "medication-assisted treatment" and subsequently misreported in item 7 received this item in error and were unable to respond.
- Two participants were uncertain about what the term "unique individuals" meant.

Recommendations/Changes Made: The term "unique individuals" was clarified by including an explanation – "i.e., count multiple results/treatments for the same individual only once" – within the question. In item 8b and 8c the term "persons admitted" was changed to "new admissions reported."

ROUND 2

Findings: Similar to findings from Round 1 (See Appendix A) and item 7 above, 14 participants noted they had to coordinate with medical staff or their contract medical provider to obtain this information, which in some cases made responding burdensome. As was also the case for item 7, some of these participants appeared to have limited knowledge of MAT programs and were unable to respond to specific probes about how the medical staff responded.

All 17 participants received items 8a and 8b. Of these –

• Seven participants provided a count to 8a (new admissions) and 8b (number of new admissions screened) but were unable to respond to 8b1-2. It is noted that the number of

new admissions and new admissions screened matched in all these cases (i.e., they screen all admissions).

- o Two of these participants provided "0" counts for 8b1-2 instead of leaving the items blank but indicated they did not know counts and/or could not access data on the number of admissions that screened positive.
- Four participants only provided a response to 8a and left all other items blank.
- Five participants provided counts for all items.
 - Two of these participants may not have provided accurate data as they indicated they were uncertain by what the term "unique individuals" meant and had trouble interpreting the difference between 8b1 and 8b2. One also reported the same count (10) for the number of admissions screened, the number of admissions that screened positive, and the number of admissions that were treated for opioid withdrawal in item 8.
- One participant provided a "0" response to all items but indicated the counts were actually unknown. This participant indicated these would "take a while" to count and the data may not be available.

Nine participants received item 8c. Of those –

- Five participants did not respond to item 7e3 and—because 7e3 was blank—they received 8c in error. Two of these participants provided a "No" response to 7e and indicated they followed instructions on the PDF form to skip items 7e1-3.
- One participant provided a "No" response to item 7e but answered "Yes" to item 7e3. This participant indicated in the interview that they do not provide MAT and as such had responded in error to item 7. Not surprisingly, they were unable to answer 8c.
- Three participants correctly received the item (i.e., responded "Yes" to item 7e3). Of these, only one participant was able to provide counts. One participant left the item blank and one participant provided "0" estimate counts and indicated the medical staff did not readily have access to these data.

In general, we observed –

- Twelve participants had trouble interpreting the difference between 8b1 and 8b2/8c and 8c1. We received the following types of feedback when we asked participants to describe the difference between 8b1/8c and 8b2/8c1.
 - o Two indicated they felt the items were asking the same thing.
 - o Six said the items were confusing, or that they were unsure what they meant.
 - o Four participants provided incorrect interpretations, stating things like "Screening positive for opioid us vs. screening positive for multiple different substances,"

- and specifically referring to 8b2, "How many screened positive, got out, then came back and screened positive again. I would count them every time they came back and were positive."
- Despite the additional clarification provided to the term "unique individuals," these participants still had trouble interpreting the phrase. One participant suggested using the term "duplicate admissions."

Recommendations: As detailed above, participants had trouble providing counts of positive screenings (8b1-2) and withdrawal treatment (8c, 8c1). In most cases, participants indicated they did not have access to these data and/or they would be burdensome to compile. If BJS decides to include 8b1-2, 8c, and 8c1 in future collections, we suggest interpreting data with caution. Due to the level of difficulty reported with these items we would anticipate seeing high item nonresponse rates or data quality issues on these questions.

We also recommend ensuring that logic on item 8 accounts for screener items (i.e., 7b and 7e3) being skipped or left blank. We suggest skipping follow-up questions in item 8 if 7b and/or 7e3 are left blank to prevent participants from receiving questions that are not applicable, and thus confusing. Including logic on item 7 that hides items 7e1-3 unless a "Yes" answer is provided to 7e should also help mitigate this issue (e.g., respondents that complete the PDF version of the form and follow the skip instructions will not inadvertently receive 8c).

Finally, we suggest expanding on the current definition in items 8b2 and 8c1 to further clarify the term "unique individuals" as follows –

- 8b2: (i.e., if an individual is admitted and screens positive more than once during the 31-day reference period then only count **one** positive screening for that individual).
- 8c1: (i.e., if an individual is admitted and treated more than once during the 31-day reference period then count only **one** treatment for that individual).

ITEM 9 (OPIOID 3)

ROUND 1

Findings: In general, participants from MAT facilities that received this question were able to respond. One participant did note this would require a manual count.

Recommendations/Changes Made: None.

ROUND 2

Findings: In general, participants understood what item 9 was asking but did have some difficulties responding to the item. Eight participants received this item.

• Four participants received this item in error; three participants left item 7e blank and one participant received the item after providing conflicting responses on item 7. Two

participants provided a "0" count because they do not provide MAT treatment, one participant left the item blank and selected the estimate box, and one participant did not respond to the item at all.

- Five participants correctly received this item. Of those
 - o Two participants provided a "0" count.
 - One participant indicated it was difficult to coordinate with medical staff.
 - One participant indicated they started their program after July 31, 2018 so the "0" response provided reflected an actual count.
 - o Two participants did not provide a response to the item.
 - One participant provided a count for this item, but it is noted that this participant reported the same count (10) for the number of admissions screened, the number of admissions that screened positive, and the number of admissions that were treated for opioid withdrawal in item 8.

When asked if it was difficult to respond to this item, participants provided the following feedback –

- One participant indicated it was easy because they started their program after July 31,
 2018
- Three participants indicated they felt the question was difficult.
 - One participant indicated they gave the form to their medical staff and the staff were not able to provide a response. The participant was uncertain whether this was because the information is not being collected or is difficult to access.

Recommendations: Similar to item 9, participants had trouble providing accurate counts for this item. In most cases, participants indicated they did not have access to these data and/or they would be burdensome to compile. If BJS decides to include item 9 in future collections, we suggest interpreting data with caution. Due to the level of difficulty reported with these items we would anticipate seeing high item nonresponse rates or data quality issues.

We also recommend ensuring that logic on item 9 accounts for screener items (i.e., 7e) being skipped or left blank. We suggest skipping item 9 if 7e is left blank to prevent respondents from receiving a question that is not applicable, and thus confusing.

IV. GENERAL FINDINGS AND BURDEN ESTIMATES

Based on our observations, when participants had access to the requested data, they did not appear to find the survey difficult to complete. With the exception of items 8b2 and 8c1 (i.e., "unique individuals"), the majority of participants did not have issues with question comprehension. The primary issue observed during both Round 1 and Round 2 was participants' ability to provide data either because it wasn't available, or it was too burdensome to provide

(e.g., reviewing individual records). As such, we propose the following general recommendations to help reduce respondent burden and improve data quality –

- Several participants indicated it would be helpful to know in advance of the survey what new data BJS would be requesting so they could prepare queries/reports and coordinate with other staff as needed. We suggest sending a prenotice in advance of data collection that informs agencies of the topic(s) of the new data that will be requested. This may also help POCs that need to coordinate with other staff (e.g., medical staff) be able to respond in timely manner.
- We observed several occasions where "0" was entered if a response was unknown, either because data were unavailable or too burdensome to gather. To mitigate misreporting we suggest adding an instruction to the "General Instructions" section below the third bullet (i.e., "if the answer is "none" or "zero" …) that instructs participants to leave items blank if a count is unknown and an estimate cannot be provided.

Timing and Burden

To better understand the timing and burden, we asked participants how long it took them to complete the form, including the time it took to coordinate, compile data, and enter data on the web. Similar to Round 1, responses varied from about 20 minutes to a day or more (participants reporting a day or more were considering the time it took for them to receive requested data from other staff). Removing those that indicated it took a day or more (6 participants), the remaining responses ranged from 20-25 minutes to 2-3 hours, with 2-3 hours being the most common response.

When system timing data was reviewed, we found that the average response time was approximately 40 minutes and ranged from 4 minutes to 3 hours. The majority of participants also entered and exited the form multiple times. This suggests that they may have needed to collect data before returning to the survey instrument. As indicated in the item-by-item findings above, the majority of participants had to run queries, reports, or derive counts, as well coordinate with staff, to provide responses to some items. As such, system timing should be interpreted with caution and is not reflective of the total burden it takes to respond.

Appendix A: Round 1 Memorandum

Date: October 1, 2018

From: Amanda Smith, Cognitive Testing Task Leader

To: Zhen Zeng, Statistician

Subject: Round 1 Findings from ASJ/COJ Cognitive Testing

I. BACKGROUND AND PURPOSE

Since 2009, the Bureau of Justice Statistics (BJS) and RTI International have periodically revised forms for a variety of data collections efforts (e.g., the Annual Survey of Jails and the Census of Jails). The purpose of this task is to cognitively test newly-developed items that are being considered for future jail data collections to assess how well they work (i.e., are understood and are capturing intended data) when administered to a sample of the survey's target population. Respondent feedback on the feasibility and burden of providing the requested data is also collected. This memorandum provides a summary of findings from Round 1 of cognitive testing and provides recommendations for changes to be retested in Round 2.

II. SAMPLING AND RECRUITMENT

To ensure representation of distinct types of jails in the cognitive test RTI, in collaboration with BJS, identified several categories of facilities that we believed would have different perspectives and experiences responding to the form. In total we sampled 69 jails across a variety of strata, resulting in 16 completed cognitive interviews. **Exhibit 1** provides a breakdown of completed interviews by jail size (represented by average daily population [ADP]) and medication-assisted treatment (MAT) program status.

Exhibit 1. Round 1 Sample by Strata

Size	Total Sampled	MAT Completes ⁴	Total Completes
Large Jails: ADP > 1000	23	5	7
Medium: ADP 200-999	22	0	6
Small: ADP < 200	24	0	3
Total	69	5	16

⁴ Three jails were flagged in our sample as MAT facilities. Two additional jails indicated they operated MAT programs.

Selected jails were first contacted by a BJS lead email that explained the purpose of the test and provided contact information for RTI. RTI followed up five days later with a reminder email to jails that had not responded to the initial request. We made a final contact attempt by phone three days after the RTI follow-up email.

For each jail that agreed to participate, we scheduled a telephone interview between the primary point of contact (POC) or their designee and one of three experienced RTI survey methodologists. After the interview was scheduled, we followed up with a confirmation email that (1) explained the interview would last approximately 60 minutes, (2) provided login credentials for the survey website, and (3) requested they complete the questionnaire before the interview. We conducted the sixteen interviews between August 21 and September 27, 2018.

III. METHODOLOGY

During interviews, we asked participants a series of open-ended questions that probed their interpretation and reaction to each item on the form. Interviewers followed an interview guide that included an introductory script that was read verbatim to ensure that participants had a consistent understanding of the cognitive interview process. The guide also contained a list of "scripted probes" that interviewers used during the cognitive interview. Some probes were required; other probes were conditional and were used depending on responses received. When necessary, interviewers asked unscripted "spontaneous probes" to inquire more deeply about issues as they were raised by participants. Interviewers also probed to learn whether and how the data were recorded in information management systems and whether the data were difficult to retrieve in the requested formats. That is, we assessed burden and ability to respond to questions (i.e., retrieve and provide data).

After interviews were completed, interviewers compiled all notes and analyzed respondent feedback to identify issues and suggest possible areas for improvement to questionnaire items. The following section provides a summary of findings and suggested recommendations for retesting in Round 2 of cognitive testing.

IV. FINDINGS AND RECOMMENDATIONS

POCs reported using their agency's information management systems or secondary record systems that data submitters maintained to respond to questions. This section describes any difficulties participants had in interpreting items and any concerns or challenges with gathering and providing data for specific items.

ITEM 1 (CONFINED POPULATION)

<u>FINDINGS:</u> Participants stated this question was clear and did not have any issues providing responses. It is noted that this item was included on the form as a point of reference for the questions that followed and was not being tested for potential changes.

RECOMMENDATIONS: None.

ITEM 2 (CONFINED POPULATION BY AGE AND SEX)

<u>FINDINGS</u>: Overall participants understood this question, but there was some difficulty providing the requested counts broken out by age group.

- Nine participants could only provide totals and juvenile counts (where applicable) by sex. These participants indicated their jail management systems did not break out inmate population by age as requested, so they were unable to readily access this information. Providing these data would require participants to manually tally counts, which they indicated would be burdensome. While it was difficult for these participants to provide counts by age, they had no trouble interpreting the instructions and responding 2a and 2g as instructed when they were unable to provide counts by age group.
- Seven participants were able to report counts by age and sex without issue.

RECOMMENDATIONS: None.

ITEM 3 (NON-US CITIZENS)

<u>FINDINGS</u>: Overall participants understood this question, but there was some difficulty providing the requested counts.

- Nine participants indicated they understood what the question was asking but could not
 provide accurate citizenship counts or estimates because they do not track this
 information in their systems and/or stated that they do not ask about citizenship status.
- Three participants indicated they may be able to compile citizenship data by looking at
 individual intake reports but noted this would be time consuming. They also indicated
 that they would be unable to break down by convicted/unconvicted status unless they
 reviewed each case manually.
- Four participants were able to respond to this question without issue.

<u>RECOMMENDATIONS</u>: Given the number of participants that were unable to respond to this question accurately, we suggest including a checkbox on the web form to mirror the PAPI format (i.e., "Check box if the number of non-U.S. citizens is unknown." and "Check box if the numbers of convicted and unconvicted non-U.S. citizens are unknown.") to reduce respondent confusion. During the interview several participants that could not provide citizenship information pointed out the check box on the PDF version of the form and indicated they would have selected this option if it had been available.

ITEM 4 (FOREIGN BORN CITIZENS)

<u>FINDINGS:</u> Overall participants understood this question, but there was some difficulty providing the requested counts. The majority of the participants had challenges with the exclusionary criteria under 4b (i.e., "Anyone born abroad to a U.S. citizen parent or parents.")

- Eleven participants stated they stated they did not track place of birth in their information systems
 - Two of these participants said they could possibly get this information by reviewing each case individually to determine place of birth, but that it would be burdensome to compile.
- Four participants provided counts for this question.
 - Two of these participants indicated they were not able to follow the exclusionary criteria "Anyone born abroad to a U.S. citizen parent or parents," but provided counts of foreign-born inmates anyway.
 - One respondent used the counts from item 3 and assumed if an inmate was not a US citizen, they were foreign born. This respondent marked the item as an "estimate."
- One respondent indicated they do record birth country and could have answered the questions, but because they have no way of pulling parent's place of birth, they did not provide a response.

<u>RECOMMENDATIONS</u>: Given the number of participants that were unable to respond to this question accurately, we suggest including a checkbox on the web form to mirror the PAPI format (i.e., "Check box if the number of foreign-born inmates is unknown." and "Check box if the numbers of convicted and unconvicted foreign-born inmates are unknown.") to reduce respondent confusion. During the interview several participants that could not provide information on foreign-born inmates pointed out the check box on the PDF version of the form and indicated they would have selected this option if it had been available.

ITEM 5 (CONDITIONAL RELEASE)

<u>FINDINGS</u>: Overall participants understood this question, but there was some difficulty providing the requested counts.

• Six participants indicated they do not have a way to parse out counts for each category in item 5 and did not respond to the question.

- Three of these participants indicated they would may be able to obtain the requested counts, but it would require manually looking at individual records and categorizing them into the requested categories, which would be burdensome.
- Five participants provided a partial response to the question. These participants were able
 to provide counts for bench warrants/detainers, probation, and parole, but had challenges
 responding to conditional release and/or pretrial release violation items. A few
 participants also indicated there was some overlap between the categories that made it
 difficult to provide counts.
 - Two of these participants said they do not keep records on pretrial or conditional release and were only able to provide bench warrants/detainers and probation/parole.
 - One participant explained that if someone is a pretrial release violator, they are served a bench warrant and would thus be captured under the bench warrant/detainer category. Similarly, another respondent indicated they would have to do a record-by-record match to ensure there was no overlap in the counts they provided.
 - One participant explained they had inmates listed under an "other/miscellaneous" category, for which they included under 5e (other conditional release). They were also able to provide bench warrants/detainers and probation/parole.
- Five participants were able to provide a full response to this item. However, two of these participants indicated it was still burdensome and difficult to provide this information.
- In general, it appears there were no issues providing counts for bench warrants/detainers and probation and parole violators among those that could provide either a partial or full response for this item.

<u>RECOMMENDATIONS</u>: Consider adding an option to select if the number of pretrial and conditional release violators is unknown. BJS could also consider simplifying the question to only request information on bench warrants/detainers, probation, and parole to reduce respondent burden when compiling this information.

ITEM 6 (OFFENSE TYPE)

<u>FINDINGS</u>: Overall participants understood this question, but there was some difficulty categorizing and providing the requested counts.

• Seven participants indicated their information management systems do not break out inmates by offense type in a manner that maps easily to the categories in the form. The majority of these participants indicated they would need to tally information manually by reviewing charge codes and sentence lengths to group inmates under the requested

categories, which would be burdensome. One participant indicated they would need to work with the prosecutor's office to determine which offense carries the longest sentence as they have no way to determine sentence lengths.

- One participant indicated they could likely provide counts by offense type, but for probation and parole violators they would need to review each case individually to determine their original charge.
- Eight participants were able to provide a response to this item. However, some of these participants still had challenges when responding.
 - One participant that was able to provide responses indicated they used internal charge severity codes which do not include sentence length. They stated they assumed, but were uncertain, if the charge codes ranked as most severe carried the longest sentences.
 - Two participants indicated they were able to compile this information, but that it was burdensome.

<u>RECOMMENDATIONS</u>: Consider reducing the number of categories to violent offenses, property offenses, drug law violations, other (i.e., all other known offenses), and unknown to reduce respondent burden when compiling this information.

ITEM 7 (OPIOID 1)

<u>FINDINGS</u>: In general participants understood this question, but there were some issues with misreporting due to misinterpreting the term "medication-assisted treatment." The majority of participants also noted they had to coordinate with medical staff or their contract medical provider to obtain this information, which in some cases made responding burdensome.

- A few participants misinterpreted the term "medication-assisted treatment" and responded yes to items 7f and 7g. Two participating jails that were not flagged as MAT facilities indicated they provided "medication-assisted treatment" to inmates experiencing withdrawal symptoms (i.e., answered "yes" to 7g). When probed these participants indicated their medical staff would provide OTC medication to ease symptoms of withdrawal, but confirmed they did not administer narcotics (e.g., methadone, buprenorphine, naltrexone) at their facility.
- One MAT jail participant asked if 7f meant they *initiated* medication-assisted treatment. They understood 7e to mean the continuation of medication-assisted treatment but was uncertain if 7f was meant to determine if they *initiated* medication-assisted treatment to inmates newly identified as having opioid use disorder.

<u>RECOMMENDATIONS</u>: An example of "medication-assisted treatment" is provided once when the term is first used in 7e. In addition to 7e, consider also including the example (e.g., methadone, buprenorphine, naltrexone) in 7f and 7g.

We also suggest including a definition of the term "medicated-assisted treatment" in the instructions of the question as follows:

• The following questions are about opioids. Opioids are a class of drug that include heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin), hydrocodone (Vicodin), codeine, and morphine.

These questions also ask about your jail's practices and policies for providing "medication-assisted treatment." Medication-assisted treatment (MAT) refers to the use of FDA-approved medications, such as methadone, buprenorphine, and naltrexone, in the treatment of substance use disorders. It <u>does not</u> refer to providing non-prescription or over the counter medication to treat symptoms of opioid use disorder (e.g., withdrawal).

If 7f is intended to capture MAT facilities that <u>initiate</u> medication-assisted treatment, we suggest rewording the question as follows:

 Initiate medication-assisted treatment for inmates identified as having opioid use disorders

To further highlight the distinction between 7e and 7f we also suggest revising 7e as follows:

• Continue providing medication-assisted treatment (e.g., methadone, buprenorphine, naltrexone) to inmates who are admitted with a current prescription or were getting services from a methadone clinic prior to admission

ITEM 8 (OPIOID 2)

<u>FINDINGS</u>: In general participants that received this question said it was clear, but there were some issues with misreporting and challenges providing the requested counts. The majority of participants also noted they had to coordinate with medical staff or their contract medical provider to obtain this information, which in some cases made responding burdensome.

- For items 8b1 and 8b2 four facilities that responded "Yes" to 7b indicated they do not track this information in their systems and compiling this data would require manual tallying and/or coordination with medical staff/contract medical provider, which would be burdensome.
- One MAT jail participant indicated they do not have a code for withdrawal treatment and
 was unable to provide counts for 8c. They were able to provide responses to 8b without
 issue.

- As noted above in item 7, there were two participants that indicated "Yes" to 7g and/or 7f but were referring to non-narcotic and/or OTC medication provided by medical staff. That is, they do not actually provide FDA-approved MAT drugs (e.g., methadone, buprenorphine, naltrexone) and do not have a MAT program. As would be expected, these participants had difficulty responding to item 8c1. The recommendations provided in item 7 should mitigate this issue.
- Two participants that received items 8b2 where uncertain about what the term "unique individuals" meant.

RECOMMENDATIONS:

- Include a definition of the term "unique individuals" in the question instruction to prevent confusion.
- Implement changes suggested in item 7 to mitigate issues with participants erroneously receiving this item.

ITEM 9 (OPIOID 3)

FINDINGS:

• In general MAT facilities that received this question were able to respond. One participant did note this would require a manual count.

RECOMMENDATIONS: None.

IV. GENERAL FEEDBACK AND BURDEN ESTIMATES

Overall participants reported the form took longer than the estimated 30 minutes to complete. Responses ranged from 30 minutes to 24 hours. Excluding the 24-hour response, which was a clear outlier, the average time to complete the form was 2.3 hours.

Several participants indicated it would be good to know in advance of entering the survey what data BJS would be requesting so they could prepare queries and coordinate with other staff as needed. We suggest including instructions that point to the reference form so that it can easily be downloaded and shared as needed (e.g., "If you would like to review the information being requested prior to logging into the survey, or if you need to coordinate with other staff and/or outside agencies to gather the requested data, a PDF copy can be downloaded by clicking on the 'Reference Form' link at the top right of this page.").

Appendix B: Jail Survey Cognitive Test Form

OMB No.1121-0339 Approval Expires 02/28/2019

	2018 JAIL SI COGNITIVE				U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS AND ACTING AS COLLECTION AGENT: RTI INTERNATIONAL
		FORM COMPLE	TED BY—		
Name			Title		
Official Address			Telephone		
City			FAX		
State	Zip	Email			
Facility Name					

General Instructions

- Please complete the questionnaire online at jailsurveytest.rti.org.
- If you have questions about this cognitive test form, please call RTI, the collection agent for BJS, at 919-541-6249, or e-mail acsmith@rti.org.
- If the answer to a question is "none" or "zero," write "0" in the space provided.
- When exact numeric answers are not available, provide estimates and mark (X) in the checkbox beside each number that is estimated. For example 1234 ⊠

What to include and exclude in this data collection

INCLUDE-

- ✓ Confinement facilities usually administered by a local law enforcement agency, intended for adults but sometimes holding juveniles.
- ✓ All jails and city/county correctional centers that hold inmates beyond arraignment. Report data on all inmates, including those held in separate holding or lockup areas within your facilities.
- ✓ Special jail facilities (e.g., medical/treatment/release centers, halfway houses, and work farms).
- ✓ Temporary holding or lockup facilities if they are part of your combined function.
- ✓ Inmates held for other jurisdictions, including federal authorities, state prison authorities, American Indian or Alaska Native tribal governments, and other local jail jurisdictions.

<u>EXCLUDE</u>-

- X Facilities that are exclusively used as temporary holding or lockup facilities, where inmates are generally held for less than 72 hours and not held beyond arraignment.
- X Privately operated jails and facilities operated by two or more jurisdictions (i.e., multi-jurisdictional facilities). These jails will be contacted directly for this data collection.

BURDEN STATEMEN

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 30 minutes per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any action of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

Section I.	CONFINED I	POPULATION	J	3. C	On Jul	y 31, 2018, how many persons CONFIN	ED in
If the answer to a question is "none" or "zero," write "0" in the space provided.			" in the space			il facility were—	
When exact numeric answers are not available, provide estimates and mark (X) in the checkbox beside each number that is estimated. For example 1234 ⊠				b	. Not	U.S. citizens? Check box if the number of non-U.S. cunknown.	
that is estimated. For example 1234 Questions 1 through 6 and 9 ask about your inmate population on July 31, 2018. 1. On July 31, 2018, how many persons were CONFINED in your jail facility?			put who g., work nent) who diction. arded ng-term	jā	wer 1. 2. 3. Dn Jul Int lince	the non-U.S. citizens in item 3b, how mere— For persons with more than one status, restatus associated with the most serious of For convicted inmates, include probation parole violators with no new sentence. Convicted	eport the offense. and d and nown. ED in your
jails (e.g., electronic monitoring, house arrest, community service, day reporting, or work programs) who do NOT return to jail at night. 2. On July 31, 2018, how many persons CONFINED in			programs)	b	o. Out	the U.S. Virgin Islands, and Northern Ma Anyone born abroad to a U.S. citizen par parents. side the United States?	
your jail facility we If you cannot provid complete 2a (age 17 2g (total counts by s	e counts by ag 7 or younger by		se		✓ EX0	ELUDE— Anyone born in a foreign country. CLUDE— Anyone born in Puerto Rico, Guam, the Ulsands, and Northern Marianas	J.S. Virgin
a. Age 17 or younger	Male	Female	Total		Х	Anyone born abroad to a U.S. citizen par parents.	ent or
b. 18–24						Check box if the number of foreign-boinmates is unknown.	rn
c. 25–34					Of t	he foreign-born inmates in item 4b, ho e—	w many
d. 35–44					•	For persons with more than one status, r status associated with the most serious of	
e. 45–54					•	For convicted inmates, include probation parole violators with no new sentence.	and
f. 55 or older					1.	Convicted	
g. TOTAL (Sum of items 2a to 2f should equal item 2g)					2. 3.	TOTAL (Sum of items 4b1 and 4b2 should equal item 4b)	d and
						unconvicted foreign-born inmates are	unknown.

	ocodion in Pacific Procedure, of fold recentle,
On July 31, 2018, how many persons CONFINED in your jail facility were—	SCREENING AND TREATMENT
a. Probation violators	The following questions are about opioids. Opioids are a class of
b. Parole violators	drug that include heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as
	oxycodone (OxyContin), hydrocodone (Vicodin), codeine, and
On July 31, 2018, how many persons CONFINED in your jail facility, regardless of conviction status, had as their most serious offense—	morphine. 7. As a matter of policy, does your jail facility –
Classify inmates with more than one charge/offense by the	
most serious charge/offense. The most serious charge/offense is the one crime for which the person could	✓ INCLUDE testing, screening, and treatment that are conducted either on or off facility grounds.
receive the longest jail/prison sentence. Alternatively, it can	a. Conduct routine urinalysis tests on
be determined by your jail system's offense severity code, if available.	inmates during intake for the detection
For probation and parole violators, please include the most	of opioids Yes O No
serious original or new charge/offense.	b. Screen inmates during intake for opioid use disorder with a
a. Violent offense	questionnaire or interview Yes No
✓ INCLUDE homicide, rape/sexual assault,	c. Provide overdose education to inmates
robbery, domestic violence, aggravated and simple	identified as having opioid use
assault, and other violent offenses.	disorders O Yes O No
b. Property offense	d. Initiate behavioral or psychological
✓ INCLUDE larceny/theft, burglary, vandalism,	treatment for inmates identified as having opioid use disorders Yes No
fraud, motor vehicle theft, stolen property offenses, arson, forgery and counterfeiting,	e. Provide medication-assisted treatment
and other property offenses.	to inmates. Medication-assisted treatment (MAT)
c. Drug law violation	refers to the use of FDA-approved
✓ INCLUDE offenses relating to the unlawful	medications, such as methadone, buprenorphine, and naltrexone, in the
possession, distribution, sale, use, growing,	treatment of substance use disorders.
or manufacturing of narcotic drugs.	It does not refer to providing non-prescription or over the counter medication to treat
d. Public-order offenses	symptoms, such as withdrawal, associated with opioid use disorders Yes O No
✓ INCLUDE weapons offenses, obstruction of justice,	
traffic, driving while intoxicated or driving under the influence of alcohol or drugs, drunkenness,	If NO to item 7e, SKIP to item 7f.
vagrancy, disorderly conduct, unlawful assembly,	Continue MAT for inmates who are admitted with a current prescription or were
morals, commercialized vice, escape, AWOL, flight to avoid prosecution, immigration violations, rioting,	getting services from a methadone
abandonment, nonsupport, invasion of privacy,	clinic prior to admission • Yes • No
liquor law violations, and tax evasion.	2. Initiate or continue MAT for those
e. All other known offenses and infractions not specified in 6a to 6d	identified as having opioid use disorders Yes O No
infractions not specified in 6a to 6d	3. Initiate MAT for inmates identified
f. Not known	as experiencing opioid withdrawal Yes No
h. TOTAL (Sum of items 6a to 6f	f. Continue providing prescription opioids
should equal item 1)	to inmates with acute or chronic pain
	admitted to your facility with a current prescription from a health care
	professional prior to admission Yes No
	g. Initiate providing opioids to inmates to relieve acute or chronic pain Yes No
	100 2 100

h. Provide overdose reversal medications such as naloxone (Narcan) to inmates with opioid use disorders to take with them at the time of release from jail	9. On July 31, 2018, how many inmates CONFINED in your jail facility were receiving medication-assisted treatment for opioid use disorders? Be sure to include persons on transfer to treatment facilities but who remain under your jurisdiction
8. During the 31-day period between July 1, 2018, and July 31, 2018— a. How many persons were new admissions to your jail facility?	
X Returns from escape, work release, medical appointments/treatment facilities, furloughs, bail/bond releases, and court appearances. If NO to item 7b, SKIP to item 8c b. Of the new admissions reported in item 8a, how many were screened with a questionnaire or interview (7b) for opioid use disorder	
If NO to item 7e3, SKIP to item 9. c. Of the new admissions reported in item 8a, how many did your jail facility treat for opioid withdrawal (7e3)	

Participant's Name

Facility Name

Appendix C: Cognitive Interview Guide – Round 1 and Round 2

BJS Jail Survey Cognitive Test Interview Guide - Round 1

Participant's Position		
Interviewer		
Date		
Start time		
End time		
Introduction, part 1: Hello, my name behalf of the Bureau of Justice Statistic roday's discussion about BJS's new jaid FYES → continue to part 2 of the intr	s (BJS). Thank you for your l survey questions. Is this sti	willingness to participate in
IF NO → When would be a convenient	time for me to call back? _	[THANK
RESPONDENT AND END CALL]		

Introduction, part 2: Great! We are conducting this interview to improve the design of BJS's Census of Jails and Annual Survey of Jails, which collect inmate population data from local jails. I will be asking you questions about any challenges you may have encountered while taking the cognitive test survey recently. This discussion should take approximately 60 minutes. Your participation is completely voluntary. You may decline to answer any and all questions and may stop at any time.

We will review the form together and I will ask you questions about specific items. If you have issues with anything I don't specifically ask you about, please feel free to mention them too. We want your honest opinion about what is confusing or difficult to answer. Please keep in mind that there are no right or wrong answers to my questions. Our goal is to develop questions that are clear and easy to answer. BJS will not publish or release individual jail responses collected from the cognitive test.

Do you have the form you completed for [FILL FACILITY NAME]? We will reference this form throughout the interview. [GIVE PARTCIPANT TIME TO LOCATE FORM IF THEY DON'T HAVE IT IN FRONT OF THEM. IF NEEDED, EMAIL THE PARTICIPANT A COPY OF THEIR FORM.]

Lastly, please note that I will be taking notes during the interview. This will ensure that we accurately record your responses.

Do you have any questions before we begin? [ANSWER ANY QUESTIONS AND THEN BEGIN INTERVIEW]

1. CONFINED

On May 31, 2018, how many persons were CONFINED in your jail facility?

INCLUDE—

- ✓ Persons on transfer to treatment facilities but who remain under your jurisdiction
- ✓ Persons held for other jurisdictions
- ✓ Persons in community-based programs (e.g., work release, day release, or drug/alcohol treatment) who return to jail at night
- ✓ Persons out to court while under your jurisdiction.

EXCLUDE—

- X Persons under your jurisdiction who are boarded elsewhere
- X Inmates who are AWOL, escaped, or on long-term transfer to other jurisdictions
- X Persons in community-based programs run by your jails (e.g., electronic monitoring, house arrest, community service, day reporting, or work programs) who do NOT return to jail at night.

Probes:

- 1. Are the inclusion/exclusion instructions for this question clear or confusing? (Please explain)
- 2. Do you have difficulty applying the criteria in reporting the confined population? (Please explain)

2. AGE

On May 31, 2018, how many persons CONFINED in your jail facility were—

If you cannot provide counts by age and sex, please complete 2a (age 17 or younger by sex) and 2g (total counts by sex).

Male Female Total
a. age 17 or younger
b. between 18 and 24
c. between 25 and 34
d. between 35 and 44
e. between 45 and 54

f. 55 or older

g. Total

Probes:

1. Is it easy or difficult to count inmates by age and sex? (Please explain)

- 2. Are the instructions under this question clear or confusing? (Please explain)
- 3. **[IF ANY COUNT IS MISSING]:** Can you explain why you are unable to provide (some of) the requested counts?
- 4. [IF 2a AND 2g ARE MISSING]: Can you provide the total number of inmates by sex and the number of juveniles by sex?

3. NON-US CITIZENS

On May 31, 2018, how many persons CONFINED in your jail facility were—

- a. U.S. citizens?
- b. Not U.S. citizens?

Of the non-U.S. citizens in item 3b, how many were—

- For persons with more than one status, report the status associated with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.
- 1. Convicted
- 2. Unconvicted
- 3. TOTAL (Sum of items 3b1 and 3b2 should equal item 3b)

Probes:

- 1. Is it easy or difficult to provide counts of non-U.S. citizens? (Please explain)
- 2. Are the instructions for how to count convicted and unconvicted inmates clear or confusing? (Please explain)
- 3. **[IF ANY COUNT IS MISSING]:** Can you explain why you are unable to provide (some of) the requested counts?

[Probe IF 0 COUNT IS GIVEN FOR 3B and "The count of non-US citizens is unknown" is selected]

4. **[IF A POSITIVE COUNTS IS GIVEN FOR 3B]:** Is the count of non-U.S. citizens you provided based on the current citizenship status, or the status at time of birth?

4. FOREIGN BORN CITIZENS

On May 31, 2018, how many persons CONFINED in your jail facility were—

a. In the United States?

INCLUDE—

- ✓ Anyone born in the United States, Puerto Rico, Guam, the U.S. Virgin Islands, and Northern Marianas.
- ✓ Anyone born abroad of U.S. citizen parent or parents.
- b. Outside the United States?

INCLUDE—

✓ Anyone born in a foreign country.

EXCLUDE—

- X Anyone born in Puerto Rico, Guam, the U.S. Virgin Islands, and Northern Marianas.
- X Anyone born abroad of U.S. citizen parent or parents.

Of the foreign-born inmates in item 4b, how many were—

- For persons with more than one status, report the status associated with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.
- 1. Convicted
- 2. Unconvicted
- 3. TOTAL (Sum of items 4b1 and 4b2 should equal item 4b)

Probes:

- 1. Are the inclusion/exclusion instructions for clear or confusing? (Please explain)
- 2. Do you have difficulty applying the criteria in reporting the number of foreign-born inmates confined in your jail facility? (Please explain)
- 3. Is it easy or difficult to provide counts of inmates who are foreign born? (Please explain)
- 4. **[IF ANY COUNT IS MISSING]:** Can you explain why you are unable to provide (some of) the requested counts?
 - a. [Probe IF 0 COUNT IS GIVEN FOR 4B and "The count of foreign-born inmates is unknown" is selected]

5. CONDITIONAL RELEASE

On May 31, 2018, how many persons confined in your jail were—

- a. Bench warrants/detainer
- ✓ INCLUDE failure to appear and contempt of court.
- b. Other pretrial release violators

- ✓ INCLUDE persons released on bond/bail, their personal recognizance, house arrest/electronic monitoring, and other pretrial release violations.
- c. Probation violators
- d. Parole violators
- e. Other conditional release violators

- 1. Are the categories for question 5 clear or confusing?
- 2. Are the inclusionary instructions for who to include in item 5a clear or confusing? 5b?
- 3. Are there any other examples that you feel should be added to the inclusion criteria for 5a? 5b?
- 4. Do you keep records on conditional release status for all of your inmates?
 - a. **[IF NO]:** How did you come up with your answers? Did you exclude those inmates? Provide estimates?
- 5. **[IF AGENCY USED "OTHER" CATEGORIES (b or e)]:** What violations did you include under the "other" category in 5b? 5e?
- 6. Is it easy or difficult to provide counts of the various categories of conditional release violators?
 - a. [IF DIFFICULT] Which categories? (Please explain)

6. OFFENSE TYPE

On May 31, 2018, how many persons CONFINED in your jail facility, regardless of conviction status, had as their most serious offense, the one crime for which the person could receive the longest jail/prison sentence—

For probation and parole violators, please include the most serious **original or new** charge.

- a. Violent offense
- ✓ INCLUDE homicide, rape/sexual assault, robbery, domestic violence, aggravated and simple assault, and other violent offenses
- b. Property offense
- ✓ INCLUDE larceny/theft, burglary, vandalism, fraud, motor vehicle theft, stolen property offenses, arson, forgery and counterfeiting, and other property offenses
- c. Drug law violation
- ✓ INCLUDE offenses relating to the unlawful possession, distribution, sale, use, growing, or manufacturing of narcotic drugs

- d. Driving while intoxicated or under the influence of alcohol or drugs
- e. Weapons offense
- f. All other known offenses and infractions not specified in 6a to 6e.
- g. Not known
- h. TOTAL (Sum of items 6a to 6g should equal item 1)

- 1. In your own words, can you tell me what this question is asking?
- 2. Are the instructions about probation and parole violators clear or confusing? (Please explain)
- 3. Do you know the offense for all of your inmates?
 - a. **[IF NO]:** How did you come up with your answers? Did you use the not known category? Exclude those inmates? Provide estimates?
- 4. **[IF A NUMERICAL ANSWER WAS PROVIDED FOR 6f]:** What types of offenses and infractions did you include in item f ("All other known offenses and infractions not specified in 6a to 6e.")?
- 5. **[IF THE AGENCY USED THE "NOT KNOWN" CATEGORY]:** Can you explain why you are unable to provide offense information for inmates included in 6g?
- 6. Is it easy or difficult to obtain inmates counts by the most serious offense? (Please explain)
- 7. Are there any additional categories that you feel should be included in this question?

7. OPIOID 1

As a matter of policy or practice, does your jail facility –

- ✓ INCLUDE testing, screening, and treatment that are conducted either on or off facility grounds.
 - a. Conduct routine urinalysis tests on inmates during intake for the detection of opioids
 - b. Screen inmates during intake for opioid use disorder with a questionnaire or interview
 - c. Provide overdose education to inmates with opioid use disorders

- d. Provide behavioral or psychological treatment for inmates identified as having opioid use disorders
- e. Provide medication-assisted treatment (e.g., methadone, buprenorphine, naltrexone) to inmates who are admitted with a current prescription or were getting services from a methadone clinic prior to admission
- f. Provide medication-assisted treatment for those identified as having opioid use disorders
- g. Provide medication-assisted treatment for inmates identified as experiencing opioid withdrawal
- h. Provide prescription opioids to inmates with acute or chronic pain admitted to your facility with a current prescription from a health care professional prior to admission
- i. Provide opioids to inmates to relieve acute or chronic pain.
- j. Provide overdose reversal medications such as naloxone (Narcan) to inmates with opioid use disorders to take with them at the time of release from jail
- k. Link inmates with opioid use disorder to medication-assisted treatment in community care upon release

- 1. Does your jail screen inmates for opioid use disorders? If so, how?
 - a. Do you have a medication-assisted treatment program?
- 2. Overall, is it easy or difficult to answer this question? Which items are difficult? (Please explain)
- 3. What do you think we mean by the term "medication-assisted treatment"?
- 4. Do you think there is a difference between items 7e and 7f?
 - a. **[IF YES]** What do you think the difference is?
- 5. Do you think there is a difference between items 7h and 7i?
 - a. **[IF YES]** What do you think the difference is?
- 6. Do you provide medication-assisted treatment to all inmates identified with opioid use disorders, or just select groups of inmates with disorders?
 - a. [IF THE LATTER] Which groups are included in treatment?
- 7. Did you have to ask someone else in your jail to answer any items? Which ones? (Please explain)

8. OPIOID 2

During the 31-day period between May 1, 2018 and May 31, 2018,

a. How many persons were new admission to your jail facility?

INCLUDE—

- ✓ Persons officially booked into and housed in this facility by formal legal document and by the authority of the courts or some other official agency
- ✓ Repeat offenders booked on new charges
- ✓ Those persons serving a weekend sentence coming into the facility for the first time EXCLUDE—
- X Returns from escape, work release, medical appointments/treatment facilities, furloughs, bail/bond releases, and court appearances
- b. Of those persons admitted in item 8a, how many were screened with a questionnaire or interview (7b) for opioid use disorder?
 - 1. How many screened positive for opioid use disorders?
 - 2. How many screened positive were unique individuals?
- c. Of those persons admitted in item 8a, how many did your jail facility treat for opioid withdrawal (7g)?
 - 1. How many treated for opioid withdrawal were unique individuals?

Probes:

- 1. In your own words, can you tell me what information we are requesting in 8a? 8b? 8c?
- 2. Are the include/exclude instructions for item 8a clear or confusing? (Please explain)
- 3. Is it easy or difficult to provide the data on opioid disorder screening? On treatment of opioid disorders? (Please explain)
- 4. Did you have to ask someone else in your jail to answer these questions?
- 5. Can you provide the number of unique inmates identified as having opioid use disorder for the one-year period from June 1, 2017 to May 31, 2018?
- 6. Is it easy or difficult to provide the count of "unique individuals"?

9. OPIOID 3

On May 31, 2018, how many inmates CONFINED in your jail facility were receiving medication-assisted treatment for opioid use disorders? Be sure to include persons on transfer to treatment facilities but who remain under your jurisdiction.

- 1. In your own words, can you tell me what this question is asking?
- 2. Is it easy or difficult to answer this question?

3. Did you have to ask someone else in your jail to answer this question?

General Questions and Wrap-up

I have a just few more questions about the survey form as a whole. As you answer these questions, please think about all the questions that we have discussed today.

- 1. At the beginning of the survey, instructions are given on how to indicate the answer is an estimate through the use of checkboxes. Did you read those instructions? Are the instructions clear or confusing? Did you remember to use those checkboxes as you took the survey?
- 2. Did you experience any difficulties while trying to access or take the survey?
- 3. Approximately how long did it take you to complete these questions?

Thank you very much. That was all the questions I have for you today. Do you have any questions for me?

BJS Jail Survey Cognitive Test Interview Guide - Round 2

Facility Name	_	
Participant's Name		
Participant's Position		
Interviewer		
Date		
Start time		
Introduction, part 1: Hello, my name	is [INTERVIEWER NAMI	E] and I'm with RTI calling or
pehalf of the Bureau of Justice Statistics	s (BJS). I'm calling to cond	luct your cognitive test on
BJS's new jail survey questions. Is this	still a convenient time to ta	ılk?
IF YES \rightarrow continue to part 2 of the intro	oduction	
IF NO → When would be a convenient	time for me to call back? _	[THANK
RESPONDENT AND END CALL]		

Introduction, part 2: Great! We are conducting this interview to improve the design of BJS's Census of Jails and Annual Survey of Jails, which collect inmate population data from local jails. I will be asking you questions about any challenges you may have encountered while taking the cognitive test survey recently. This discussion should take approximately 60 minutes. Your participation is completely voluntary. You may decline to answer any and all questions and may stop at any time.

We will review the form together and I will ask you questions about specific items. If you have issues with anything I don't specifically ask you about, please feel free to mention them too. We want your honest opinion about what is confusing or difficult to answer. Please keep in mind that

there are no right or wrong answers to my questions. Our goal is to develop questions that are clear and easy to answer. BJS will not publish or release individual jail responses collected from the cognitive test.

Do you have the form you completed for [FILL FACILITY NAME]? We will reference this form throughout the interview. [GIVE PARTCIPANT TIME TO LOCATE FORM IF THEY DON'T HAVE IT IN FRONT OF THEM. IF NEEDED, EMAIL THE PARTICIPANT A COPY OF THEIR FORM.]

Lastly, please note that I will be taking notes during the interview. This will ensure that we accurately record your responses.

Do you have any questions before we begin? [ANSWER ANY QUESTIONS AND THEN BEGIN INTERVIEW]

4. CONFINED

On July 31, 2018, how many persons were CONFINED in your jail facility?

INCLUDE—

- ✓ Persons on transfer to treatment facilities but who remain under your jurisdiction
- ✓ Persons held for other jurisdictions
- ✓ Persons in community-based programs (e.g., work release, day release, or drug/alcohol treatment) who return to jail at night
- ✓ Persons out to court while under your jurisdiction.

EXCLUDE—

- X Persons under your jurisdiction who are boarded elsewhere
- X Inmates who are AWOL, escaped, or on long-term transfer to other jurisdictions
- X Persons in community-based programs run by your jails (e.g., electronic monitoring, house arrest, community service, day reporting, or work programs) who do NOT return to jail at night.

Probes:

- 3. Are the inclusion/exclusion instructions for this question clear or confusing?
 - a. [IF CONFUSING]: Which criteria are unclear or confusing?
- 4. Did you have difficulty applying the criteria in reporting the confined population?
 - a. [IF YES]: What difficulties did you have?

5. AGE

On July 31, 2018, how many persons CONFINED in your jail facility were—

If you cannot provide counts by age and sex, please complete 2a (age 17 or younger by sex) and 2g (total counts by sex).

Male Female Total

- a. age 17 or younger
- b. between 18 and 24
- c. between 25 and 34
- d. between 35 and 44
- e. between 45 and 54
- f. 55 or older
- g. Total

Probes:

- 5. Are the instructions under this question clear or confusing?
 - a. [IF CONFUSING]: Which criteria are unclear or confusing?
- 6. Is it easy or difficult to provide counts of inmates by age and sex?
 - a. [IF DIFFICULT]: What makes this difficult?
- 7. How did you determine inmate counts by age and sex? (IF NEEDED: Could you explain the process you used to compile these data?)
- 8. **[IF ANY COUNT IS MISSING]:** Can you explain why you are unable to provide (some of) the requested counts?

6. NON-US CITIZENS

On July 31, 2018, how many persons CONFINED in your jail facility were—

- a. U.S. citizens?
- b. Not U.S. citizens?

Of the non-U.S. citizens in item 3b, how many were—

- For persons with more than one status, report the status associated with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.
- 1. Convicted
- 2. Unconvicted
- 3. TOTAL (Sum of items 3b1 and 3b2 should equal item 3b)

- 5. Is it easy or difficult to provide counts of non-U.S. citizens?
 - a. [IF DIFFICULT]: What makes this difficult?
 - b. Is data on non-U.S. inmates readily available?

- 6. Are the instructions for how to count convicted and unconvicted inmates clear or confusing?
 - a. **[IF CONFUSING]:** What is confusing about these instructions?
- 7. [IF ANY COUNT IS MISSING OR THE UNKNOWN BOX IS SELECTED]: Can you explain why you are unable to provide (some of) the requested counts?
- 8. **[IF A POSITIVE COUNTS IS GIVEN FOR 3B]:** How did you determine your count for non-U.S. citizens?
 - a. Is the count of non-U.S. citizens you provided based on the current citizenship status, or the status at time of birth?

10. FOREIGN BORN CITIZENS

On July 31, 2018, how many persons CONFINED in your jail facility were—

a. In the United States?

INCLUDE—

- ✓ Anyone born in the United States, Puerto Rico, Guam, the U.S. Virgin Islands, and Northern Marianas.
- ✓ Anyone born abroad of U.S. citizen parent or parents.
- b. Outside the United States?

INCLUDE—

✓ Anyone born in a foreign country.

EXCLUDE—

- X Anyone born in Puerto Rico, Guam, the U.S. Virgin Islands, and Northern Marianas.
- X Anyone born abroad of U.S. citizen parent or parents.

Of the foreign-born inmates in item 4b, how many were—

- For persons with more than one status, report the status associated with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.
- 1. Convicted
- 2. Unconvicted
- 3. TOTAL (Sum of items 4b1 and 4b2 should equal item 4b)

- 5. Are the inclusion/exclusion instructions for clear or confusing?
 - a. **[IF CONFUSING]:** What is confusing about these instructions?

- 6. Did you have difficulty applying the criteria in reporting the number of foreign-born inmates confined in your jail facility?)
 - a. [IF DIFFICULT]: What makes this difficult?
- 7. Is it easy or difficult to provide counts of inmates who are foreign born?
 - a. [IF DIFFICULT]: What makes this difficult?
- 8. How did you determine counts for foreign born inmates? (IF NEEDED: Could you explain the process you used to pull these data?)
 - a. Is data on foreign born inmates readily available?
- 9. **[IF ANY COUNT IS MISSING OR UNKNOWN BOXES CHECKED]:** Can you explain why you are unable to provide (some of) the requested counts?

11. CONDITIONAL RELEASE

On July 31, 2018, how many persons confined in your jail were—

- a. Probation violators
- b. Parole violators

Probes:

- 7. Is it easy or difficult to provide counts of probation violators? Parole violators?
 - a. [IF DIFFICULT]: What makes this difficult?
- 8. How did you determine counts for probation violators? Parole violators? (IF NEEDED: Could you explain the process you used to pull these data?)
 - a. Are these data readily available?

12. OFFENSE TYPE

On July 31, 2018, how many persons CONFINED in your jail facility, regardless of conviction status, had as their most serious offense—

Classify inmates with more than one charge/offense by the most serious change/offense. The most serious charge/offense is the one crime for which the person could receive the longest jail/prison sentence. Alternatively, it can be determined by your jail system's offense severity code, if available.

For probation and parole violators, please include the most serious **original or new** charge.

- a. Violent offense
- ✓ INCLUDE homicide, rape/sexual assault, robbery, domestic violence, aggravated and simple assault, and other violent offenses
- b. Property offense

- ✓ INCLUDE larceny/theft, burglary, vandalism, fraud, motor vehicle theft, stolen property offenses, arson, forgery and counterfeiting, and other property offenses
- c. Drug law violation
- ✓ INCLUDE offenses relating to the unlawful possession, distribution, sale, use, growing, or manufacturing of narcotic drugs
- d. Public-order offenses
- ✓ INCLUDE weapons offenses, obstruction of justice, traffic, driving while intoxicated or driving under the influence of alcohol or drugs, drunkenness, vagrancy, disorderly conduct, unlawful assembly, morals, commercialized vice, escape, AWOL, flight to avoid prosecution, immigration violations, rioting, abandonment, nonsupport, invasion of privacy, liquor law violations, and tax evasion.
- e. All other known offenses and infractions not specified in 6a to 6d.
- f. Not known
- g. TOTAL (Sum of items 6a to 6f should equal item 1)

- 8. In your own words, can you tell me what this question is asking?
- 9. Did you notice the instructions for parole and probation violators?
 - a. [IF YES]: Were these instructions clear or confusing?
 - b. **[IF CONFUSING]:** What is confusing about these instructions?
- 10. Is it easy or difficult to provide counts by most serious offense?
 - a. [IF DIFFICULT]: What makes this difficult?
 - b. Could you explain how you determined most serious offense for inmates with multiple charges/offenses?
- 11. Do you know the offense for all of your inmates?
 - a. **[IF NO]:** How did you come up with your answers? Did you use the not known category? Exclude those inmates? Provide estimates?
- 12. [IF A NUMERICAL ANSWER WAS PROVIDED FOR 6e]: What types of offenses and infractions did you include in item e ("All other known offenses and infractions not specified in 6a to 6d.")?
- 13. [IF THE AGENCY USED THE "NOT KNOWN" CATEGORY]: Can you explain why you are unable to provide offense information for inmates included in 6g?

13. OPIOID 1

As a matter of practice, does your jail facility –

- ✓ INCLUDE testing, screening, and treatment that are conducted either on or off facility grounds.
 - a. Conduct routine urinalysis tests on inmates during intake for the detection of opioids
 - b. Screen inmates during intake for opioid use disorder with a questionnaire or interview
 - c. Provide overdose education to inmates identified as having opioid use disorders
 - d. Initiate behavioral or psychological treatment for inmates identified as having opioid use disorders
 - e. Provide medication-assisted treatment for inmates. Medication-assisted treatment (MAT) refers to the use of FDA-approved medications, such as methadone, buprenorphine, and naltrexone, in the treatment of substance use disorders. It does not refer to providing non-prescription or over the counter medication to treat symptoms, such as withdrawal, associated with opioid use disorders
 - 1. Continue MAT to inmates who are admitted with a current prescription or were getting services from a methadone clinic prior to admission
 - 2. Initiate or continue MAT for those identified as having opioid use disorders.
 - 3. Initiate MAT for inmates identified as experiencing opioid withdrawal
 - f. Continue providing prescription opioids to inmates with acute or chronic pain admitted to your facility with a current prescription from a health care professional prior to admission
 - g. Initiate providing opioids to inmates to relieve acute or chronic pain.
 - h. Provide overdose reversal medications such as naloxone (Narcan) to inmates with opioid use disorders to take with them at the time of release from jail
 - i. Link inmates with opioid use disorder to medication-assisted treatment in community care upon release

- 8. Did you have to ask someone else in your jail to answer any items?
 - a. [IF SOMEONE ELSE ANSWERED ANY ITEMS]: Which items?
- 9. Overall, was it easy or difficult to provide answers to this question?
 - a. Which items were difficult?
- 10. Does your jail screen inmates for opioid use disorders? If so, how?
- 11. When answering 7e, did you read the definition of medication-assisted treatment program?
 - a. Was anything about the definition unclear or confusing?
 - b. **[IF CONFUSING]:** What is confusing about the definition?

- 12. [IF YES TO 7e] Do you provide medication-assisted treatment to all inmates identified with opioid use disorders, or just select groups of inmates with disorders?
 - a. [IF THE LATTER] Which groups are included in treatment?

14. OPIOID 2

During the 31-day period between July1, 2018 and July 31, 2018,

d. How many persons were new admission to your jail facility?

INCLUDE—

- ✓ Persons officially booked into and housed in this facility by formal legal document and by the authority of the courts or some other official agency
- ✓ Repeat offenders booked on new charges
- ✓ Those persons serving a weekend sentence coming into the facility for the first time EXCLUDE—
- X Returns from escape, work release, medical appointments/treatment facilities, furloughs, bail/bond releases, and court appearances
- e. Of the new admissions reported in item 8a, how many were screened with a questionnaire or interview (7b) for opioid use disorder?
 - 3. How many screened positive for opioid use disorders?
 - 4. How many screened positive were unique individuals (i.e., count multiple positive results the same individual only once)?
- f. Of the new admissions reported in item 8a, how many did your jail facility treat for opioid withdrawal (7e3)?
 - 2. How many treated for opioid withdrawal were unique individuals (i.e., count multiple treatments for the same individual only once)?

- 7. Did you have to ask someone else in your jail to answer any items?
 - a. [IF SOMEONE ELSE ANSWERED ANY ITEMS]: Which items?
- 8. Is it easy or difficult to provide the requested data on opioid disorder *screening*?
 - a. [IF DIFFICULT]: What makes this difficult?
- 9. Is it easy or difficult to provide the requested data on *treatment* of opioid disorders?
 - a. [IF DIFFICULT]: What makes this difficult?
- 10. Are the include/exclude instructions for item 8a clear or confusing?
 - a. **[IF CONFUSING]:** What is confusing about these instructions?

- 11. In your own words, can you tell me the difference between 8b1 and 8b2? Between 8c and 8c1?
 - a. How did you interpret "unique individuals"?
- 12. Would you be able to provide the number of unique inmates identified as having opioid use disorder for a one-year period?
- 13. Is it easy or difficult to provide the count of "unique individuals"?
 - a. [IF DIFFICULT]: What makes this difficult?

15. OPIOID 3

On July 31, 2018, how many inmates CONFINED in your jail facility were receiving medication-assisted treatment for opioid use disorders? Be sure to include persons on transfer to treatment facilities but who remain under your jurisdiction.

Probes:

- 4. In your own words, can you tell me what this question is asking?
- 5. Is it easy or difficult to answer this question?
 - a. [IF DIFFICULT]: What makes this difficult?
- 6. Did you have to ask someone else in your jail to answer this question?

General Questions and Wrap-up

I have a just few more questions about the survey form as a whole. As you answer these questions, please think about all the questions that we have discussed today.

- 4. At the beginning of the survey, instructions are given on how to indicate the answer is an estimate through the use of checkboxes. Did you read those instructions? Are the instructions clear or confusing?
 - a. [IF NEEDED]: Did you remember to use those checkboxes as you took the survey?
- 5. Did you experience any difficulties while trying to access or take the survey?
- 6. Approximately how long did it take you to complete these questions? Please include the time it took to coordinate with other staff, compile/pull data, and enter it into the form.
- 7. Do you have any comments that you wish to share about your experience completing the survey?

Thank you very much.	That was all the questions I have for you today.	Do you have any
questions for me?		

End time			

Appendix D: Communication and Recruitment Materials

D1. Initial introduction email (Sent from BJS)

Dear [POC name],

I am writing to invite you to participate in the Bureau of Justice Statistics (BJS) Jail Survey Cognitive Test. BJS, in partnership with RTI International, is testing nine new survey questions for its jail data collections. The new questions ask about the demographic characteristics of jail inmates, offense type, and opioid testing and treatment programs.

I understand that you recently participated in the 2018 Annual Survey of Jails (ASJ). Thank you for taking the time to provide your agency's data to BJS. The Jail Survey Cognitive Test is a different study, focusing on identifying wording issues or technical difficulties with new survey questions. The test consists of two activities. The first is to take a short online survey with the new items. The second is to participate in a follow-up telephone interview to discuss your responses and experience taking the survey. The interview will take about 60 minutes and can be scheduled at a time and date that works best for you. BJS will not release information collected from the cognitive test. The results will only be used to identify potential issues with question wording.

Your participation is completely voluntary; however, your feedback is important and will greatly help us improve the 2019 Census of Jails and future Annual Survey of Jails. If you are willing to participate, please contact Elizabeth Smith at RTI by email (esmith@rti.org) or telephone (919-541-5984). Elizabeth will set up an interview for you and email the survey link to you. She will also follow up with you if we have not heard from you in a few days.

For questions or concerns, please contact our task leader at RTI, Amanda Smith, at acsmith@rti.org or 919-541-6249 or me directly at zhen.zeng@usdoj.gov or 202-598-9955.

Thank you for your time and consideration. We look forward to hearing from you.

Sincerely,
Zhen Zeng
Statistician, Bureau of Justice Statistics
Project Manager of Annual Survey of Jails and 2019 Census of Jails

D2. Recruitment follow-up email (Sent from RTI 5 days after initial lead email from BJS)

Dear [POC Name],

Recently, you received an e-mail from the Bureau of Justice Statistics (BJS) inviting you to participate in a cognitive test of new survey questions for its jail data collections. I'm following up today to request your participation. The feedback you provide will help make the 2019 Census of Jails and future Annual Survey of Jails more pertinent and easier to answer.

The cognitive test consists of two activities. The first is to take a short online survey that contains the new items. The second is to participate in a follow-up telephone interview with RTI staff to discuss your responses and experience taking the survey. The call will last about one hour and can be scheduled at a time and date that works best for you.

BJS will not publish or release individual jail responses collected for the cognitive test. The results will be used solely to identify potential issues with question wording.

If you are able to participate in this cognitive test, please contact me at esmith@rti.org or 919-541-5984 so I may send you the survey link and schedule a time/date for us to discuss your responses. If you would like to participate, but feel you are not the best person to complete the survey, please send me contact details for the person to contact at your agency. If you have any questions about the cognitive test, please do not hesitate to contact me.

Thank you very much for your time and consideration.

Sincerely, Elizabeth Smith BJS Jail Survey Cognitive Test Team RTI International

D3: Interview scheduling call script

Hello, I'm [Name] calling from RTI on behalf of the Bureau of Justice Statistics. Thank you for participating in the Bureau of Justice Statistics' Jail Survey Cognitive Test. We'd like to set up a time to talk to you about BJS's new jail survey questions. The goal is to better understand any issues with the questions so we can improve our surveys. We will first e-mail you a survey link. After you've completed the survey, we will call you back to ask questions about the difficulty of the questions and the terminology. We anticipate the conversation will last an hour. Is there a time next week that works for you? [If participant does not answer, leave a voicemail with the information above]

D4. Confirmation e-mail with web link for the survey and instructions for completing form before interview (Sent from RTI no later than 1 day after scheduling interview)

Dear [Participant's name],

Thank you for agreeing to participate in the Bureau of Justice Statistics (BJS) Jail Survey Cognitive Test. We have scheduled your interview on [MM/DD/YYYY at 00:00 am/pm] with [INTERVIEWER NAME].

Please complete the survey at the website below by [INSERT DATE 2 BUSINESS DAYS BEFORE THE SCHEDULED INTERVIEW]:

[SURVEY LINK]

BJS will not publish or release any of the information collected from this cognitive test. The results will be used solely to identify potential issues with the new questions.

If you have any questions regarding the cognitive test or experience any technical difficulties when completing the form or generating a report of your responses, please contact me at esmith@rti.org or 919-541-5984.

Sincerely, Elizabeth Smith BJS Jail Survey Cognitive Test Team RTI International

D5. E-mail to remind respondents to fill out the cognitive test form (Sent from RTI 2 days before appointment, if form has not been completed)

Dear [Participant's name],

You are currently scheduled for an interview on [MM/DD/YYYY at 00:00 am/pm] for the Bureau of Justice Statistics (BJS) Jail Survey Cognitive Test, but we have not yet received the survey form from you. The survey takes about 30 minutes to complete and needs to be completed as soon as possible so we can discuss your experience taking the survey at the scheduled interview.

Please complete the survey at the link below:

[SURVEY LINK]

BJS will not publish or release any of the information collected from this cognitive test. The results will be used solely to identify potential issues with question wording.

If you experience any technical difficulties on the survey website or would like to reschedule the interview, please contact me at esmith@rti.org or 919-541-5984.

Sincerely, Elizabeth Smith BJS Jail Survey Cognitive Test Team RTI International

D6. Final contact attempt - Call script

Hello, my name is Lizzie Smith and I am calling on behalf of the Bureau of Justice Statistics.

I am calling to follow up on a recent invitation you received to participate in the Bureau of Justice Statistics (BJS) Jail Survey Cognitive Test. [IF YOU ARE SPEAKING WITH THE POC, do you have a moment to speak with me?]

We are currently testing six new survey questions for BJS's jail data collections and would like to get your feedback. Your participation is completely voluntary; however, your feedback is important to BJS and will help us improve the 2019 Census of Jails and future Annual Survey of Jails.

The cognitive test consists of two activities – a short online survey consisting of the new questions and a follow-up telephone interview to discuss your responses and experience taking the survey. The call will last about 60 minutes and can be scheduled at a time and date that works best for you. The survey and follow-up interview will help BJS identify wording issues or technical difficulties with the new questions.

[IF YOU ARE SPEAKING WITH THE POC, Would you, or a delegate, be available to help us test these new questions?]

[IF YOU ARE LEAVING A VM, if you are willing to participate, please contact me by telephone (919-541-5984) to set up an interview.]

Comments for OMB Docket 1121-0100 (84 FR 4539)

Agency Information Collection Activities; Proposed eCollection eComments Requested; Reinstatement, With Change, of a Previously Approved Collection for Which Approval Has Expired: 2019 Census of Jails

Contact

Todd D. Minton, Bureau of Justice Statistics, 810 Seventh Street NW, Washington, DC 20531 (email: Todd.Minton@usdoj.gov; telephone: 202-305-9630).

Comments from the Office of Surveillance and Epidemiology (OSE) in the Center for Drug Evaluation and Research (CDER)/Food and Drug Administration (FDA)

The intersection of opioid use disorder (OUD) treatment and incarceration is of great interest to FDA in addressing the current opioid crisis. In particular, FDA is interested in the utilization of medication-assisted treatment (MAT) in correctional institutions during incarceration and just prior to release.

We suggest that items 4 (n), (o), (p), and (q), as described in the brief abstract of the instrument published in the FR Notice, be expanded in scope to capture greater detail, as is feasible, on the specific MAT drug products being used in correctional facilities. Both the public health and criminal justice literatures have called attention to limited treatment options for OUD available to offenders in correctional settings.(1-15) Most notably, publications in the lay and academic press have noted that opioid agonist-based treatment for withdrawal and OUD has been virtually unavailable in jails and prisons. Generally, it would be valuable to know the number and proportion of inmates with opioid use disorders who receive MAT, and with which drugs (i.e., buprenorphine, methadone, naltrexone), both while incarcerated and just prior to discharge.

FDA and other agencies within HHS are also seeking to increase community access and use of naloxone to reverse acute opioid overdose. The distribution of naloxone to offenders at the time of release from jails and prisons has been widely discussed in light of extremely high rates of opioid overdose observed soon after release.(16-18) These interventions have also been widely embraced in other countries, including the UK.(19, 20) However, there are few data on the scale of such programs in the US. We therefore also recommend collecting information on naloxone availability and distribution within corrections facilities, and particularly distribution of naloxone at time of release to inmates with opioid use disorder.

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- 15. Wildeman C, Wang EA. Mass incarceration, public health, and widening inequality in the USA. Lancet 2017;389(10077):1464-1474.
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This letter is in response to the Bureau of Justice Statistics request for comments on the proposed reinstatement and update of a previously approved data collection, the 2019 Census of Jails (Census). The National Association of Counties (NACo) and the Pew Charitable Trusts are writing to express our strong support for reinstating this data collection and to provide suggestions on ways to improve the proposed instrument.

The "Jail Inmates in 2016" publication reported that there were over 740,000 people in jail at midyear, and over 10 million jail admissions. This represents a significant number of Americans, and a significant expense borne primarily by counties and local government. However, these figures are estimates based on the 2013 census. Absent more recent data from the 2019 Census' collected facility-level information, it will be impossible to accurately assess the number of individuals in jail by sex, race/ethnicity and adult or juvenile status, conviction and sentencing status and offense charges of those held, average daily population, operating expenditures, and other data. These statistics are an invaluable resource for policymakers, administrators, and those paying for jails, the taxpayers. It is also critical information for organizations researching and analyzing jails. We urge the Bureau of Justice Statistics to reinstate the 2019 Census.

In addition to supporting the continuation of the Census generally, we have the following suggestions regarding changes to the proposed questionnaire.

- 1. Having information on the number of detained individuals by sex AND race/ethnicity (e.g. number of white women, Hispanic men, etc.) would be valuable to understanding the different issues facing these populations. We recommend asking for data by both sex and race/ethnicity, instead of separate questions for each.
- 2. Evidence suggests that jails house many people with serious mental illness. Adding a question on whether jails screen individuals for these conditions, and prevalence rates if they do, would assist in understanding the scope of this issue.
- 3. We recommend expanding the focus of questions related to substance testing, screening and treatment to include all substances, not just opioids. Local jails are seeing a significant uptick in methamphetamine and cocaine use in many counties, and including all substances use rather than just opioids will help create more comprehensive programs to tackle the issue.

The collection of the data requested by BJS for the Census is routine for most jurisdictions. The potential burdens accompanying responding to the survey are outweighed by the value gained through obtaining a broader and more accurate picture of jails in the U.S. We support a renewed investment of federal dollars towards improving the systems we rely on for safety and justice. Thank you for your consideration.

Matthew D. Chase

CEO

National Association of Counties

attheDehoe

Michael Williams

Senior Manager, Public Safety Performance Project

The Pew Charitable Trusts

Attachment M



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April 15, 2019

Jeffrey Anderson Director, Bureau of Justice Statistics Office of the Attorney General Department of Justice 819 Seventh Street NW, Room 2413 Washington, DC 20531

Re: Adding questions relating to opioid use disorder to the 2019 Census of Jails.

Dear Director Anderson:

I am writing in response to 84 FR 4539 regarding the 2019 Census of Jails.

The Pew Charitable Trusts is a non-profit research and policy organization. The Substance Use Prevention and Treatment Initiative (SUPTI) works to advance state and federal policies that address the toll of substance misuse, including expanded access to evidence-based treatment. This letter addresses the addition of questions relating to opioid use disorder to the 2019 Census of Jails.

Pew's substance use work recognizes the disproportionate burden of substance use disorders (SUDs) among incarcerated individuals. Nationally, from 2007-2009 (the latest nationwide data available), 63 percent of people serving sentences in jails met the medical criteria for a SUD pertaining to opioids or other depressants (excluding alcohol), marijuana, cocaine, methamphetamine or other stimulants, hallucinogens, or inhalants, while only 5 percent of the total general population age 18 or older met such criteria. Upon release to the community, people who were incarcerated face a high risk of overdose. For example, a New York City study found that individuals discharged from jails were more than twice as likely to die from drug-related causes as other city residents within the two-week period after release.

Providing treatment during incarceration directs resources to a population in need of services and can prevent fatal overdose upon release. For example, after introducing all three forms of medications approved by the Food and Drug Administration for opioid use disorder (OUD) treatment into its Department of Corrections, post-incarceration overdose deaths decreased by 61 percent in Rhode Island compared with deaths in the period prior. This was the main factor contributing to a 12 percent reduction in overdose fatalities statewide.ⁱⁱⁱ

Despite the need for treatment in correctional settings, and the ability for this treatment to save lives, little is known about the extent to which jails offer this treatment or even routinely screen for OUD. Accordingly, Pew encourages the Bureau of Justice Statistics (BJS) to add questions regarding OUD to the 2019 Census of Jails Forms CJ-3 and CJ3-A. This comment letter offers

suggestions for refining the proposed data collection instrument so that this important information can be collected.

The addition of the opioid questions acknowledges the need to better understand how the opioid overdose epidemic affects some of the most vulnerable people in the United States – people with criminal justice system involvement. The goal of the new opioid questions in the 2019 Census of Jails should be to collect data on prevalence of substance use and SUD for people in jails, to understand how people are screened and treated for SUD within the facility (including withdrawal management), and how people reentering the community from incarceration are connected to medical and behavioral health services post-release. The responses to the opioid questions will provide a high-level understanding of how jails address OUD. However, the questions require additional detail to determine the type of screening and OUD treatment provided.

Suggested improvements to proposed data collection instrument

Overall Comments on Single Facility Jail Form Section IV and Jurisdiction Form Section III The questions in Single-Facility Jail Form Section IV and Jurisdiction Form Section III are limited to screening and treatment for OUD. While OUD rates have risen, so have rates for other SUDs. For example, after declining in the mid-2000s, between 2008 and 2015, amphetamine-related hospitalizations (which includes methamphetamine) increased from 55,000 to 206,000. The prevalence of alcohol-use disorder and high-risk drinking also increased between 2001-2002 and 2012-2013. For these reasons, Pew recommends adding questions relating to the screening and treatment of other substance-use disorders, including alcohol, stimulants, and polysubstance use.

Questions 24 (Single Facility Jail Form) and 13 (Jurisdiction Form)

- 24a and b (Single Facility Jail Form); 13a and b (Jurisdiction Form)
 - Responses 24a, 24b, 13a, and 13b ask only about activities conducted during intake. Because some facilities conduct health screenings and assessments after intake, the questionnaire as currently worded will not capture these activities. Consider asking first if routine urinalysis and screening for OUD are conducted, and then add a follow up question to learn when these activities occur.

BJS should also consider asking about the screening and assessment tools used by jails. This would help researchers understand the use of validated, evidence-based screening and assessment tools in jail settings.

- 24e (Single Facility Jail Form) and 13e (Jurisdiction Form)
 - O The instructions to this question should make clear that medication-assisted withdrawal is not the same as medication-assisted treatment. As written, a respondent could interpret the instructions to mean that they should respond yes even if opioid-agonist medications are made available *only* for the management of withdrawal symptoms.

This question should elicit separate responses for each of the three medications for OUD treatment: buprenorphine, methadone, and naltrexone. The three medications are governed by varying sets of federal regulations. Asking about the medications separately will help researchers to understand the extent to which each medication is available.

Further, the medications vary in contraindications, interactions with drugs used to treat other conditions, and potential side effects. Patients also differ in which medication is most likely to lead to treatment success. Because of these factors, the decision regarding the right medication to take for OUD should be made jointly by the prescriber and the patient^{vi} and jails should offer all three medications. Asking about the medications separately will allow researchers to track the degree to which jails are implementing this best practice.

- O These questions should also distinguish between initiating and continuing Medication Assisted Treatment (MAT), FDA-approved medications for OUD used in combination with behavioral health therapy. Anecdotal evidence suggests that jails are likelier to continue medication for persons entering the facility already on MAT than to initiate treatment to medication-naive patients. While continuing MAT is important for increasing access to care, jails also represent a setting in which people with OUD can be identified and begin treatment. Vii Asking about initiation and continuation separately will help researchers understand the extent to which jails are serving as a site where people enter treatment.
- These questions should also ask about the populations that are eligible to receive MAT. For example, a jail may offer MAT only to pregnant patients or exclude people who are state responsibility, serving a sentence, or detained for immigration services. As written, a jail could respond that they provide MAT to incarcerated persons even if it is restricted to their pregnant patient population only.
- 24i (Single Facility Jail Form) and 13i (Jurisdiction Form)
 - Linkages to care can encompass many activities, including giving patients a list of providers in the community, jail-based staff making appointments pre-release, and community providers coming into the jail to develop care plans. Consider asking about these activities separately. As written, both a jail that supplies a list of nearby treatment options and a jail that offers robust care management could respond as linking persons soon to be released from incarceration to care in the community.

BJS should also consider asking about whether the jail provides a supply of buprenorphine or oral naltrexone prior to release for the patient to take until he or she receives ongoing care from a community provider. Providing these bridge medications for OUD could help reduce the post-incarceration risk of overdose by ensuring there is no lapse in OUD treatment medications before the individual is able to receive treatment in the community.

Questions 25c (Single Facility Jail Form) and 14c (Jurisdiction Form)

These questions should define treatment for opioid withdrawal. The American Society of Addiction Medicine recommends the use of opioid agonists or alpha-2 adrenergic agonists (e.g., clonidine or lofexidine) for managing withdrawal. VIII Providing fluids alone is not sufficient. The question should define clinically appropriate withdrawal management so that researchers can understand the extent to which jails are following clinical guidelines in this area.

Questions 26 (Single Facility Jail Form) and 15 (Jurisdiction Form)

As recommended with questions 24 (Single Facility Jail Form) and 13 (Jurisdiction Form), these questions should ask separately about the number of persons receiving buprenorphine, methadone, and naltrexone.

Thank you for the opportunity to provide comments on the proposed revisions to the Census of Jails. The new data on the identification and treatment of opioid use disorders will be invaluable to researchers seeking to understand the extent to which people in jails can access treatment and the adoption of best practices relating to MAT by jails. If you have any questions or need additional information, please contact (REDACTED CONTACT INFORMATION).

Sincerely,

Elizabeth Connolly Project Director, Substance Use Prevention and Treatment Initiative

ⁱ Jennifer Bronson et al, "Drug Use, Dependence, and Abuse Among State Prisoners and Jail Inmates, 2007-2009," Bureau of Justice Statistics (June 2017), https://www.bjs.gov/content/pub/pdf/dudaspji0709.pdf.

ii Sungwoo Lim et al, "Risks of Drug-Related Death, Suicide, and Homicide During the Immediate Post-Release Period Among People Released from New York City Jails, 2001–2005," *American Journal of Epidemiology* 175, no. 6 (2012): 519-526, https://doi.org/10.1093/aje/kwr327.

^{iv} Tyler N.A. Winkelman, Lindsay K. Admon, and Latasha Jennings, "Evaluation of Amphetamine-Related Hospitalizations and Associated Clinical Outcomes and Costs in the United States," *JAMA Network Open* 1, no. 6 (2018):e183758, https://doi.org/10.1001/jamanetworkopen.2018.3758.

^v Bridget F. Grant, et al, "Prevalence of 12-Month Alcohol Use, High-Risk Drinking, and DSM-IV Alcohol Use Disorder in the United States, 2001-2002 to 2012-2013: Results From the National Epidemiologic Survey on Alcohol and Related Conditions, *JAMA Psychiatry* 74, no. 9 (2017):911-923, https://doi.org/10.1001/jamapsychiatry.2017.2161.

vi American Society of Addiction Medicine, "The ASAM National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use," (2015), https://www.asam.org/docs/default-source/practice-support/guidelines-and-consensus-docs/asam-national-practice-guideline-supplement.pdf.

vii National Sheriffs Association, "Jail Based Medication-Assisted Treatment: Promising Practices, Guidelines, and Resources for the Field (October 2018), https://www.sheriffs.org/publications/Jail-Based-MAT-PPG.pdf. viii American Society of Addiction Medicine, "The ASAM National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use."

From:
To:
Subject:
Date:
Attachments:

Dear Todd Minton-

The "quality and utility of the information to be collected can be enhanced" by BJS's 2019 census of jails collecting data on the number of pregnant people who are admitted to jails and the outcomes of those pregnancies—specifically live births, stillbirths, miscarriages, terminations, and maternal deaths.

The number of incarcerated women continues to rise. Most of these women are of childbearing age, and some of them will be pregnant upon entry. This is not a trivial matter. What happens to those pregnancies while women are in custody has profound consequences for the next generation. It is essential that we know just how many pregnant women are in the correctional system and the outcomes. This information can help jails, health care providers, lawmakers, and others understand the demographic scope of pregnancy in corrections in order to design and improve health care services, laws, and programs that can ensure safe and optimal results for children of incarcerated mothers. Just as it is important to have information on deaths in custody, so is it important to know about births in custody.

Such data collection is feasible. My team at Johns Hopkins collected 1 year of prospectively reported de-identified pregnancy data from 22 state prison systems, federal Bureau of Prisons, and 6 jails, including the nation's 5 largest jails. Results were recently published in the <u>American Journal of Public Health</u>, with an <u>editorial</u> describing the need for a broader collection. The jail data we collected represent only 5% of the female jail population and it is skewed toward large, urban jails. We need more representative data from a larger sample of jails. BJS is in a unique position to collect such data from a more comprehensive sample of jails.

I urge BJS to enhance the quality and utility of its information by adding pregnancy data to its 2019 census of jails.

Sincerely,

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Carolyn Sufrin, MD, PhD

Dept. of Gyn/Ob & Center for Medical Humanities and Social Medicine
Johns Hopkins School of Medicine
Dept. of Health, Behavior & Societey
Johns Hopkins Bloomberg School of Public Health
Author of Jailcare: Finding the Safety Net for Women Behind Bars
Project director of Pregnancy in Prison Statistics Project



April 15, 2019

Todd Minton Bureau of Justice Statistics 810 Seventh Street NW Washington, DC 20531

Submitted via email: Todd.Minton@usdoj.gov

RE: 84 FR 4539, 2019 Census of Jails

Dear Mr. Minton.

On behalf of the Campaign for Youth Justice (CFYJ), we write to offer comments on the Department of Justice's Bureau of Justice Statistics' (BJS) information collection request regarding the 2019 Census of Jails.

CFYJ is a national organization whose mission is to end the practice of prosecuting, sentencing, and incarcerating youth under the age of 18 in the adult criminal justice system. The strategic goals of CFYJ are to reduce the total number of youth prosecuted in the adult criminal justice system and to decrease the harmful impact of trying youth in adult court. We accomplish this through both federal and state-level advocacy by urging lawmakers to pass laws to keep youth out of the adult criminal justice system. The Census of Jails both informs our work and assists in assessing our success in removing youth from adult jails across the country.

The number of youth in adult jails has continued to decline in the past decade.¹ This trend was spurred by numerous states passing laws to keep youth out of the adult criminal justice system, including raising the age of criminal court jurisdiction. There are only four states where youth under the age of 18 are still automatically charged as adults: Texas, Georgia, Wisconsin, and Michigan.² Several states that have raised the age of criminal jurisdiction have only just begun the implementation process, or will start in the near future.³ States have also taken steps to limit the pathway to criminal court for youth, including limiting the pathways of transfer to the adult system and restoring judicial discretion to limit the statutory exclusion of youth from juvenile court and to limit prosecutorial discretion in directly filing a young person's case in adult court.⁴

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¹ ZHEN ZENG, U.S. DEPT. OF JUSTICE, OFFICE OF JUSTICE PROGRAMS, BUREAU OF JUSTICE STATISTICS, JAIL INMATES IN 2016 (Feb. 2018), *available at* https://www.bjs.gov/content/pub/pdf/ji16.pdf.

² In Another Big Year for "Raise the Age" Laws, One State Now Considers All Teens as Juveniles, CHRONICLE OF SOCIAL CHANGE (June 25, 2018), https://chronicleofsocialchange.org/youth-services-insider/juvenile-justice-raise-the-age-vermont-missouri-state-legislation.

³ Meghan Holmes, *Raise the Age Redirects 17-year-olds to Juvenile Justice System*, THE LA. WEEKLY (Mar. 4, 2019), http://www.louisianaweekly.com/raise-the-age-redirects-17-year-olds-to-juvenile-justice-system/

⁴ JEREE THOMAS, CAMPAIGN FOR YOUTH JUSTICE, RAISING THE BAR: STATE TRENDS IN KEEPING YOUTH OUT OF ADULT COURTS (2015 – 2017), available at

http://www.campaignforyouthjustice.org/images/StateTrends Repot FINAL.pdf.



In addition to new state laws limiting the detention of youth in adult jails, Congress recently reauthorized the key piece of federal legislation that sets national standards for justice-involved youth. The Juvenile Reform Act of 2018 reauthorized the Juvenile Justice and Delinquency Prevention Act (JJDPA) and was signed into law on December 21, 2018.⁵ The JJDPA provides many protections for justice-involved youth, including ensuring youth are removed from adult jails and lock-ups. Previously, that protection only applied to youth charged as delinquent. Under the updated law, states have within three years of enactment of the law to remove all youth, including those certified as adults, from adult jails and lock-ups, unless a court finds it is in the interest of justice to keep the young person in an adult facility.⁶ As laws that raise the age of criminal responsibility, laws that limit the additional pathways of youth into the adult criminal justice system, and the updates to the JJDPA are implemented, the BJS Jail Census will be critical in monitoring the impact of these reforms.

Beyond collecting information on whether youth under 18 who are in adult jails are charged as adults, it would be helpful to disaggregate the data of youth held in adult jails by race. Despite the tremendous reforms in removing youth from the adult system, the racial disparities are increasing. In 2014, Black youth were 14% of the youth population nationally, but 52.5% of the youth transferred to adult court by juvenile court judges, the highest percentage of Black youth transferred in nearly thirty years of data collection. By disaggregating the data in this way, advocates and lawmakers will be able to more effectively assess the impact of reform laws and determine how to address racial and ethnic disparities in the juvenile and criminal justice system.

Finally, we urge you to continue including the question regarding whether a facility is under a court order or consent decree for specific conditions of confinement. Consent decrees are a key legal instrument of federal civil rights enforcement, yet, in one of his final acts as Attorney General, Jeff Sessions severely limited the scope of consent decrees. Under this new policy, federal consent decrees will be limited in the scope of reforms they can require, there will be restrictions as to which tools DOJ can use to monitor compliance with a decree, and federal oversight must end much earlier than is typically needed to comply with reforms. Given this

⁵ The Juvenile Justice Reform Act of 2018, H.R. 6964, 115th Cong. (2018).

⁶ CAMPAIGN FOR YOUTH JUSTICE, JUVENILE JUSTICE AND DELINQUENCY PREVENTION (JJDPA) FACT SHEET SERIES, CORE PROTECTIONS: JAIL REMOVAL/SIGHT AND SOUND SEPARATION (Feb. 2019), available at http://www.act4jj.org/sites/default/files/resource-

files/Jail%20Removal%20and%20Sight%20and%20Sound%20Separation%20Fact%20Sheet 0.pdf.

⁷ Child Population by Race in the United States, KIDS COUNT DATA CENTER, THE ANNIE E. CASEY FOUND., https://datacenter.kidscount.org/data/tables/103-child-population-by-

race#detailed/1/any/false/870,573,869/68,69,67,12,70,66,71,72/424 (last visited Apr. 12, 2019); M. Sickmund, A. Sladky, and W. Kang, *Easy Access to Juvenile Court Statistics: 1985-2014*, https://www.ojjdp.gov/ojstatbb/ezajcs/ (last visited Apr. 12, 2019).

⁸ Jeff Sessions, *Avoid Harmful Federal Intrusion*, USA TODAY (Apr. 17, 2017, 4:34 PM), https://www.usatoday.com/story/opinion/2017/04/17/jeff-sessions-avoid-harmful-federal-intrusion-editorials-debates/100579848/.

⁹ Memorandum from The Attorney General on Principles and Procedures for Civil Consent Decrees and Settlement Agreements with State and Local Government Entities (Nov. 7, 2018), *available at* https://www.justice.gov/opa/press-release/file/1109681/download.



new directive from the former Attorney General, it is now imperative that DOJ report on this data so the civil rights of children can be protected.

The critical need for strong consent decrees is evident when you look at places like New York City. In 2015, after a two-and-a-half-year investigation into severe abuse of inmates at Rikers Island and months of negotiation, New York City entered into a consent decree that included a host of reforms, with a particular focus on the safety of teenage inmates. While abuse of teens at Rikers was particularly rampant, perhaps the most notorious case was that of Kalief Browder's, who was only 16-years old when he was brought to Riker's and accused of a crime for which he was ultimately acquitted. Video footage revealed Kalief, who committed suicide after he was released from the jail, being beaten by a group of inmates and later slammed to the ground by a corrections official.

The widely publicized case of Kalief Browder and the consent decree ultimately led the New York state legislature to pass a bill that raised the age at which youth can be tried as adults in the criminal justice system, and required youth to be removed from Rikers Island.¹³ In October 2018, the 16- and 17-year-olds housed at Rikers were moved to a juvenile facility in the Bronx, where they will now receive access to age-appropriate services and programming.¹⁴ Without the consent decree, chances are very likely that those teens would still be housed in Rikers where, as recent as the spring of 2017, federal monitors reported that guards continued "to use excessive force at an 'alarming rate."¹⁵

As stories of horrific jail conditions continue to invade the news, ¹⁶ and given the DOJ's new policy with regards to consent decrees, it is imperative that BJS continue to collect this information as part of the Jail Census. This data will help civil rights attorneys and advocates

¹⁰ Benjamin Weiser, *New York City Settles Suit Over Abuses at Riskers Island*, NY TIMES (June 22, 2015), https://www.nytimes.com/2015/06/23/nyregion/new-york-city-settles-suit-over-abuses-at-rikers-island.html; Letter from Preet Bharara, U.S. Atty. to Judge James C. Francis, IV, United States Magistrate Judge (June 22, 2015) available at https://www.justice.gov/usao-sdny/file/479956/download.

¹¹ Hope Reese, *The Case for Shutting Down New York City's Rikers Island Jail*, Vox (June 7, 2018, 12:20 PM), https://www.vox.com/conversations/2018/6/7/17434206/shut-down-rikers-island-jail-new-york-city-kalief-browder. ¹² Jessica Glenza, *Abuse of Teen Inmate at Rikers Island Caught on Surveillance Cameras*, THE GUARDIAN (Apr. 25, 2015), https://www.theguardian.com/us-news/2015/apr/24/rikers-island-prison-footage-guard-abused-teen-kalief-browder.

¹³ Jeree Thomas, *Remembering Kalief Browder: The State of Youth In Adult Jails And Prisons Two-Years After Kalief Browder's Death*, HUFFINGTON POST (June 6, 2017), https://www.huffingtonpost.com/entry/remembering-kalief-browder-the-state-of-youth-in-adult_us_59371d25e4b04ff0c4668280?section=us_black-voices.

¹⁴ Jan Ransom, *Teenagers Were Moved Off Rikers for Safety. Their Brawls Came, Too*, NY TIMES (Oct. 3, 2018), https://www.nytimes.com/2018/10/03/nyregion/rikers-island-teenagers-horizon.html.

¹⁵ Rikers Island Guards Still Using Excessive Force at 'Alarming Rate,' Report Says, CBS New York (Apr. 3, 2017, 10:48 PM), https://newyork.cbslocal.com/2017/04/03/rikers-island-guards-force/ ("The report said inmates have been unnecessarily struck in the head while handcuffed, slammed against walls, put into chokeholds and doused with pepper spray.").

¹⁶ Adam Ferrise, Cuyahoga County Officials Ignored Union's Warning of 'Deplorable' Conditions at Jail for Years Prior to Inmate Deaths, THE PLAIN DEALER (Jan. 23, 2019), https://www.cleveland.com/metro/2019/01/cuyahoga-county-officials-ignored-unions-warning-of-deplorable-conditions-at-jail-for-years-prior-to-inmate-deaths.html (describing reports that Cuyahoga County Jail inmates were "crammed in pods for up to 23 hours a day," that they were served moldy food, and forced to sleep on mats on the floor.); Emily Luxen, Former Inmate Describes Poor



track whether the government is holding jails accountable for their failure to protect the constitutional rights of inmates.

We urge BJS to continue to collect this critical information and consider our request to disaggregate by race the data on youth in adult jails. We thank you for this opportunity to comment on this important matter. Please feel free to contact us with any questions.

Sincerely,

Rachel Marshall

Federal Policy Counsel

(REDACTED CONTACT INFORMATION)

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Eachel Marchill

Marcy Mistrett

Chief Executive Officer

(REDACTED CONTACT INFORMATION)



April 16, 2019

Todd Minton
Bureau of Justice Statistics
810 Seventh Street NW
Washington, DC 20531

Submitted via email: Todd.Minton@usdoj.gov

RE: 84 FR 4539, 2019 Census of Jails

Dear Mr. Minton,

The National Disability Rights Network appreciates the opportunity to comment on the Department of Justice's Bureau of Justice Statistics' (BJS) information collection request regarding the 2019 Census of Jails.

The National Disability Rights Network (hereinafter "NDRN") is the non-profit membership association of protection and advocacy (P&A) agencies that are located in all 50 States, the District of Columbia, Puerto Rico, and the United States Territories. In addition, there is a P&A affiliated with the Native American Consortium which includes the Hopi, Navajo and San Juan Southern Paiute Nations in the Four Corners region of the Southwest. P&A agencies are authorized under various federal statutes to provide legal representation and related advocacy services, and to investigate abuse and neglect of individuals with disabilities in a variety of settings. The P&A System comprises the nation's largest provider of legally-based advocacy services for persons with disabilities.

The number of youth in adult jails has continued to decline in the past decade.¹ This trend was spurred by numerous states passing laws to keep youth out of the adult criminal justice system, including raising the age of criminal court jurisdiction. There are only four states where youth under the age of 18 are still automatically charged as adults: Texas, Georgia, Wisconsin, and Michigan.² Several states that have raised the age of criminal jurisdiction have only just begun the implementation process, or will start in the near future.³ States have also taken steps to limit the pathway to criminal court

 1 ZHEN ZENG, U.S. DEPT. OF JUSTICE, OFFICE OF JUSTICE PROGRAMS, BUREAU OF JUSTICE STATISTICS, JAIL INMATES IN 2016 (Feb. 2018), available at https://www.bjs.gov/content/pub/pdf/ji16.pdf.

² In Another Big Year for "Raise the Age" Laws, One State Now Considers All Teens as Juveniles, CHRONICLE OF SOCIAL CHANGE (June 25, 2018), https://chronicleofsocialchange.org/youth-services-insider/juvenile-justice-raise-the-age-vermont-missouri-state-legislation.

³ Meghan Holmes, Raise the Age Redirects 17-year-olds to Juvenile Justice System, THE LA. WEEKLY (Mar. 4,

for youth, including limiting the pathways of transfer to the adult system and restoring judicial discretion to limit the statutory exclusion of youth from juvenile court and to limit prosecutorial discretion in directly filing a young person's case in adult court.⁴

In addition to new state laws limiting the detention of youth in adult jails, Congress recently reauthorized the key piece of federal legislation that sets national standards for justice-involved youth. The Juvenile Reform Act of 2018 reauthorized the Juvenile Justice and Delinquency Prevention Act (JJDPA) and was signed into law on December 21, 2018.⁵ The JJDPA provides many protections for justice-involved youth, including ensuring youth are removed from adult jails and lock-ups. Previously, that protection only applied to youth charged as delinquent. Under the updated law, states have within three years of enactment of the new law to remove all youth, including those certified as adults, from adult jails and lock-ups, unless a court finds it is in the interest of justice to keep the young person in an adult facility.⁶ As laws that raise the age of criminal responsibility, laws that limit the additional pathways of youth into the adult criminal justice system, and the updates to the JJDPA are implemented, the BJS Jail Census will be critical in monitoring the impact of these reforms.

While we agree with our colleagues on the need to disaggregate the data of youth held in adult jails by race, we also believe it would be helpful to disaggregate the data of youth held in adult jails by disability. People with intellectual disabilities are more likely to be arrested, convicted, sentenced to and victimized in prison. Once in the criminal justice system, these individuals are less likely to receive probation or parole and tend to serve longer sentences due to an inability to understand or adapt to prison rules.7 With barely any accessible data on youths with disabilities in adult prisons, we are unable to adequately address the unique challenges faced by the youth with disabilities in adult court. By disaggregating the data in this way, advocates and lawmakers will be able to more effectively assess the impact of reform laws and determine how to address racial, ethnic, and youth with disabilities disparities in the juvenile and criminal justice system.

Finally, we urge you to continue including the question regarding whether a facility is under a court order or consent decree for specific conditions of confinement. Consent decrees are a key legal instrument of federal civil rights enforcement, yet, in one of his final acts as Attorney General, Jeff Sessions severely limited the scope of consent

^{2019),} http://www.louisianaweekly.com/raise-the-age-redirects-17-year-olds-to-juvenile-justice-system/

 $^{^4}$ Jeree Thomas, Campaign for Youth Justice, Raising the Bar: State Trends in Keeping Youth Out of Adult Courts (2015 – 2017), available at

http://www.campaignforyouthjustice.org/images/StateTrends Repot FINAL.pdf.

⁵ The Juvenile Justice Reform Act of 2018, H.R. 6964, 115th Cong. (2018).

⁶ CAMPAIGN FOR YOUTH JUSTICE, JUVENILE JUSTICE AND DELINQUENCY PREVENTION (JJDPA) FACT SHEET SERIES, CORE PROTECTIONS: JAIL REMOVAL/SIGHT AND SOUND SEPARATION (Feb. 2019), available at http://www.act4jj.org/sites/default/files/resource-

files/Jail%20Removal%20and%20Sight%20and%20Sound%20Separation%20Fact%20Sheet 0.pdf.

⁷ Davis, Leigh Ann. "Resources." *The Arc* | *People with Intellectual Disability in the Criminal Justice System: Victims & Suspects*, Aug. 2009, www.thearc.org/sslpage.aspx?pid=2458.

decrees.8 Under this new policy, federal consent decrees will be limited in the scope of reforms they can require, there will be restrictions as to which tools DOJ can use to monitor compliance with a decree, and federal oversight must end much earlier than is typically needed to comply with reforms.9 Given this new directive from the former Attorney General, it is now imperative that DOJ report on this data so the civil rights of children can be protected.

The critical need for strong consent decrees is evident when you look at places like New York City. In 2015, after a two-and-a-half-year investigation into severe abuse of inmates at Rikers Island and months of negotiation, New York City entered into a consent decree that included a host of reforms, with a particular focus on the safety of teenage inmates. 10 While abuse of teens at Rikers was particularly rampant, perhaps the most notorious case was that of Kalief Browder's, who was only 16-years old when he was brought to Riker's and accused of a crime for which he was ultimately acquitted. 11 Video footage revealed Kalief, who committed suicide after he was released from the jail, being beaten by a group of inmates and later slammed to the ground by a corrections official. 12

The widely publicized case of Kalief Browder and the consent decree ultimately led the New York state legislature to pass a bill that raised the age at which youth can be tried as adults in the criminal justice system, and required youth to be removed from Rikers Island. 13 In October 2018, the 16- and 17-year-olds housed at Rikers were moved to a juvenile facility in the Bronx, where they will now receive access to age-appropriate services and programming.¹⁴ Without the consent decree, chances are very likely that those teens would still be housed in Rikers where, as recent as the spring of 2017, federal monitors reported that guards continued "to use excessive force at an 'alarming rate."15

⁸ Jeff Sessions, Avoid Harmful Federal Intrusion, USA TODAY (Apr. 17, 2017, 4:34 PM), https://www.usatoday.com/story/opinion/2017/04/17/jeff-sessions-avoid-harmful-federal-intrusion-editorialsdebates/100579848/.

⁹ Memorandum from The Attorney General on Principles and Procedures for Civil Consent Decrees and Settlement Agreements with State and Local Government Entities (Nov. 7, 2018), available at https://www.justice.gov/opa/press-release/file/1109681/download.

¹⁰ Benjamin Weiser, New York City Settles Suit Over Abuses at Riskers Island, NY TIMES (June 22, 2015), https://www.nytimes.com/2015/06/23/nyregion/new-york-city-settles-suit-over-abuses-at-rikers-island.html; Letter from Preet Bharara, U.S. Atty. to Judge James C. Francis, IV, United States Magistrate Judge (June 22, 2015) available at https://www.justice.gov/usao-sdny/file/479956/download.

¹¹ Hope Reese, The Case for Shutting Down New York City's Rikers Island Jail, Vox (June 7, 2018, 12:20 PM), https://www.vox.com/conversations/2018/6/7/17434206/shut-down-rikers-island-jail-new-york-city-kalief-browder. ¹² Jessica Glenza, Abuse of Teen Inmate at Rikers Island Caught on Surveillance Cameras, THE GUARDIAN (Apr. 25, 2015), https://www.theguardian.com/us-news/2015/apr/24/rikers-island-prison-footage-guard-abused-teen-kalief-

browder.

¹³ Jeree Thomas, Remembering Kalief Browder: The State of Youth In Adult Jails And Prisons Two-Years After Kalief Browder's Death, HUFFINGTON POST (June 6, 2017), https://www.huffingtonpost.com/entry/rememberingkalief-browder-the-state-of-youth-in-adult us 59371d25e4b04ff0c4668280?section=us black-voices.

¹⁴ Jan Ransom, Teenagers Were Moved Off Rikers for Safety. Their Brawls Came, Too, NY TIMES (Oct. 3, 2018), https://www.nytimes.com/2018/10/03/nyregion/rikers-island-teenagers-horizon.html.

¹⁵ Rikers Island Guards Still Using Excessive Force at 'Alarming Rate,' Report Says, CBS New York (Apr. 3, 2017, 10:48 PM), https://newyork.cbslocal.com/2017/04/03/rikers-island-guards-force/ ("The report said inmates have

As stories of horrific jail conditions continue to invade the news, ¹⁶ and given the DOJ's new policy with regards to consent decrees, it is imperative that BJS continue to collect this information as part of the Jail Census. This data will help civil rights attorneys and advocates track whether the government is holding jails accountable for their failure to protect the constitutional rights of inmates.

We urge BJS to continue to collect this critical information and consider our request to disaggregate by race and disability the data on youth in adult jails. If you have any questions please contact (CONTACT INFORMATION REMOVED)

Sincerely,

Curt Decker

Executive Director

been unnecessarily struck in the head while handcuffed, slammed against walls, put into chokeholds and doused with pepper spray.").

¹⁶ Adam Ferrise, *Cuyahoga County Officials Ignored Union's Warning of 'Deplorable' Conditions at Jail for Years Prior to Inmate Deaths*, THE PLAIN DEALER (Jan. 23, 2019), https://www.cleveland.com/metro/2019/01/cuyahoga-county-officials-ignored-unions-warning-of-deplorable-conditions-at-jail-for-years-prior-to-inmate-deaths.html (describing reports that Cuyahoga County Jail inmates were "crammed in pods for up to 23 hours a day," that they were served moldy food, and forced to sleep on mats on the floor.); Emily Luxen, *Former Inmate Describes Poor Conditions in Cheatham Co. Jail*, News Channel 5 (Mar. 29, 2019, 9:35 PM), https://www.newschannel5.com/news/former-inmate-describes-conditions-in-cheatham-county-jail ("Cramped quarters, fights, and lack of hygiene products are common problems in the Cheatham County Jail according to a former inmate.").

From: (REDACTED EMAIL ADDRESS)

To: Minton, Todd (OJP)

Subject: 2019 Census of Jails/ Public Comment Date: Friday, February 15, 2019 4:53:38 PM

Dear Mr. Minton:

In response to public and private interests, I started a research business for the primary purpose of protecting the American people by upholding the Constitution of the United States and strengthening homeland security.

During the course of my research, I discovered loopholes in the system of jail census and would like to offer my observations for consideration.

The processing of inmates seems inconsistent: an inmate can avoid classification as a recidivist by the fairly simple useage of false identification. This provides a great disservice and danger to the American public, especially in regards to violent repeat offenders who avoid detection. A recent example comes to mind: a foreign born neighbor was exhibiting behaviors consistent with those sexual offenders. By searching the NSOPW (National Sex Offender Public Website), I was eventually able to locate this person (albeit heavily disguised and using an alias) as a compliant offender with the DC Metropolitan Police Department. He had circumvented the system by registering in a jurisdiction where he neither lived nor worked. This suggested that he was intentionally avoiding detection. I then further cross referenced his alias through the NSOPW and discovered that he was a violent offender in Cook County, IL. I contacted the IL State Police and was told that he had been deported to Mexico in 2012. Since he was living in my apartment complex, he had evidently re-entered the country under his known name. Because he was a foreign national, I searched the Interpol website and discovered that he is a Libyan national wanted by the authorities of Slovakia. I immediately contacted the proper authorities and left the matter in their capable hands.

Within the US, inmates work the jail circuit using false identification, or register in one jurisdiction, change their names and fail to update their records.

Perhaps most astonishing was a newspaper article I happened upon which provided the photos and brief bios of California's death row inmates. Imagine my surprise when I recognized many of the offenders as residents of my community in Montreat, North Carolina. I cross referenced their names against the CDCR (California Dept of Corrections and Rehabilitation) database and confirmed that the newspaper article was not a hoax; indeed, these were death row inmates who had committed horrific crimes. I concluded that they must be fugitives; if plea deals or other arrangements had been made, the CDCR database would reflect this. Inmates may exploit the mental health circuit, escaping by circumventing the reduced security of hospitals. To complicate matters, the names of the criminally insane are withheld from the public under the auspices of privacy. I suspect that inmates may also absond from minimum security facilities through habeus corpus schemes.

The concurrent serving of sentences under multiple aliases and jurisdictions not only puts the American people in grave danger but may also be a source of fraud. Taxpayers are bilked for the costs and legal representation of inmates not even incarcerated in their jurisdiction. In order to streamline the census system, each offender must have one identity and one record only. Some semblance of this information must be made available so the public may make proactive and informed decisions and participate in public safety. In this age of globalization, public safety can quickly become an issue of national security.

Thank you for taking the time to consider my observations.

Respectfully submitted,

(REDACTED CONTACT INFORMATION, CITY and STATE LOCATION)