



**DEPARTMENT OF CORRECTIONS
Institutions**



Title:	Capacity Management	DOC Policy: 40.3.2
Effective:	5/1/15	Supersedes: 4/7/08
Applicability:	Staff working in Institutions, Office of Population Management, Correctional Rehabilitation, and Behavioral Health Services	
Directives Cross-Reference:	Prohibited Inmate Conduct – Div 105	
Attachments:	None	

I. PURPOSE

The purpose of this policy is to establish designated authority in managing institution bed capacity, utilize standardized methods in monitoring information system capacity population reports, develop a master bed capacity inventory record, and maintain consistent bed definitions for capacity management.

II. DEFINITIONS

A. Beds:

1. Emergency Bed: Beds created for short-term temporary use when an institution or special housing unit population exceeds permanent beds.
2. General Population Bed: Beds available to receive appropriately classified inmates Levels 1 through 4.
3. Permanent Bed: Permanent planned constructed space for inmate housing.
4. Program Bed: A housing location for the delivery of specific assessment or treatment programs.
 - a. Alcohol & Drug Treatment: Program beds that serve inmates who have a history of severe addiction and criminality, and designed to reduce recidivism by addressing each inmate's substance abuse and criminal risk factors. The program uses an evidenced-based cognitive behavioral curriculum in a therapeutic community and includes therapy groups, community-based work challenges and re-entry groups.
 - b. Alternative Incarceration Program (AIP): Highly structured program beds that include intensive interventions, rigorous personal responsibility and accountability, physical labor, and service to the community.
 - c. Intake Center: Beds designated for intake and assessment of inmates sentenced to the custody of the DOC.
 - d. Mental Health Day Treatment: Beds designated for mentally ill and

developmentally disabled inmates that provide intensive individual and group treatment on a designated unit.

5. Rental/Contracted Bed: Beds in a county or other state facility that DOC may use temporarily at a rate agreed upon by both parties.
6. Special Purpose Bed: Permanent planned constructed housing assignment separated from the general population.
 - a. Administrative Housing: Administrative housing beds for those inmates with safety concerns when no reasonable housing alternative is available.
 - b. Administrative Segregation: Administrative housing beds for those inmates whose notoriety, actions, or threats jeopardize the safety, security, and orderly operation of the facility, staff, visitors, or other inmates.
 - c. Behavioral Health Unit: An intensive behavioral management and skills training unit for inmates who are seriously mentally ill and maximum custody or adjudicated to Administrative Segregation housing.
 - d. Death Row: Beds designated for inmates that are sentenced to death and are separate from general population housing.
 - e. Disciplinary Segregation: Beds that separate an inmate from the general population of the facility in accordance to the DOC rule on **Prohibited Inmate Conduct and Processing Disciplinary Actions** (OAR 291-105). In minimum facilities – short term holding beds.
 - f. Infirmary: Beds that provide limited medical, dental and nursing services for patients with health care problems whose care may be managed in an in-patient setting. Services may include, but are not limited to, observation, isolation, first aid, nursing care, and post-operative care.
 - g. Intensive Management Unit: Beds designated for inmates scoring at custody Level 5 and demonstrate behaviors that cannot be controlled in other housing as indicated by high severity and/or chronic misconduct sanctions, escape activity, or security threat group activities causing serious management concerns.
 - h. Intermediate Care Housing (ICH): A mental health special housing unit that provides stabilization for those individuals that require transition from the MHI or BHU to a lower level of mental health care, or those individuals who are unable to effectively manage their symptoms in general population, and need increased observation and mental health care.
 - i. Mental Health Infirmary: A crisis response unit that provides short-term psychiatric crisis stabilization, evaluation and medication adjustment.
7. Seasonal Bed: Beds designed to house inmates in mobile camps.

B. Capacity:

1. Budgeted Capacity: Number of beds funded for staffing and available for occupancy.
2. Constructed Capacity: Number of beds constructed based on forecast. Constructed Capacity: Number of beds constructed based on forecast.
3. Extended Capacity: Short-term and emergency housing used to bridge the housing shortage until planned future capacity is constructed or until no longer required.
4. Operational Capacity: Number of inmates an institution can safely and effectively manage.
5. Planned Future Capacity: Beds not yet constructed or constructed but not yet activated, to accommodate future needs based on the population forecast.

III. POLICY

A. Responsibility and Management

1. The Office of Population Management has administrative oversight for the management of prison bed occupancy and capacity requirements for inmates housed in DOC facilities. Responsibilities include:
 - a. Provide gatekeeper authority for all DOC institution bed capacity.
 - b. Provide quality assurance by utilizing standardized bed capacity reports and consistent guidelines for bed type definitions.
 - c. Monitor capacity resource reports.
 - d. Maintain a master document articulating all temporary/emergency beds for each DOC facility for historical purposes.
2. The Office of Population Management Administrator or designee is responsible to assess and monitor bed capacity and population needs for the department to ensure efficient utilization of bed resources.

B. Procedures

1. Institutions may request a change in bed numbers or bed type. Any request shall be fully justified in writing and submitted to the Office of Population Management. The request shall include, but not be limited to, the following:
 - a. Information of the present bed count/type;
 - b. The specific change requested;
 - c. Estimated change in number or type of beds resulting from the request; and

- d. The resulting bed count/use after the change is completed.
2. The Office of Population Management Administrator or designee will:
 - a. Review all requests for changes in bed capacities and bed type with the Chief Financial Officer and the Assistant Director for Operations/designee. The decision to approve or deny will be communicated to all stakeholders.
 - b. Ensure all appropriate changes are made to the Correctional Information System (CIS) capacity and population programs, and Corrections Management Information System (CMIS). All information system changes shall be forwarded to the Operations Division and Research Unit.
3. The Office of Population Management shall maintain a permanent record, for historical purposes, of all approved changes to bed capacity.
4. The Chief Financial Officer shall work in concert with the Office of Population Management to ensure adequate budgetary resources are made available in administering the required beds in each institution.

IV. IMPLEMENTATION

This policy will be adopted immediately without further modification.

Certified: signature on file
Birdie Worley, Rules Coordinator

Approved: signature on file
Kim Brockamp, Deputy Director