

John Howard Association of Illinois

375 East Chicago Avenue, Suite 529 Chicago, IL 60611 Tel. 312-503-6300 Fax. 312-503-6306 www.thejha.org

Monitoring Tour of Sheridan Correctional Center August 25, 2010

Summary: Intense, expensive, successful.

On Aug. 25, 2010 four representatives of the John Howard Association of Illinois conducted a monitoring tour of Sheridan Correctional Center. Sheridan is a medium security male prison located approximately 70 miles south west of Chicago. It is the nation's largest prison fully dedicated to substance abuse treatment and has a capacity to house approximately 1,380 inmates.

An increasing body of evidence shows that the substance abuse treatment at Sheridan is successful at deterring people from returning to prison after their release. The prison offers extensive educational and vocational opportunities, which are known to deter recidivism.

In 2004 Sheridan was dedicated to deal with inmates who have a history of substance abuse. About 40 percent of its inmates are confined on drug-related convictions, 3 percent for driving while under the influence of alcohol and the remainder for such offenses as burglary, robbery and assault. People convicted of murder or rape are not eligible for Sheridan.

Kenneth Osborne has been warden of Sheridan for two months. He said he has 20 years of experience in substance abuse and corrections. Warden Osborne said treatment of substance abuse makes a prison more manageable and safer for inmates and staff.

He also said he has encountered resistance from some staff at Sheridan, who he says believe he is too lenient towards inmates. This is often the case when a prison's management incorporates a rehabilitative attitude towards incarceration.

"I was told this week I show more sympathy for the prisoners than the staff," Warden Osborne said. He indicated he is confident his view of Sheridan's mission will prevail.

The Program

Sheridan operates on the Therapeutic Community model, an immersive residential program that includes group encounters, cognitive skill building, individual counseling, 12-step programs, education, work opportunities, and a comprehensive program for reentry to society.

Some programs are confrontational in nature or involve peer counseling. On release from Sheridan, ex-inmates are required to participate in aftercare. This may involve residing in a half-way house, recovery home or transitional living center, participating in community based treatment, and work.

The program is a joint effort involving WestCare, Treatment Alternatives for Safe Communities, Safer Foundation, and state agencies.

Only inmates with nine to 24 months remaining on their sentence are eligible for Sheridan. The nine-month minimum is considered necessary for inmates to fully benefit from the program. Inmates who fail to observe Therapeutic Community or prison rules can be transferred to another state prison.

Previously Sheridan housed general population inmates as well as those undergoing treatment for substance abuse. General population inmates were recently moved out of the prison and by November Sheridan will exclusively house inmates with substance abuse problems.

It appears some of the new inmates going to Sheridan are not aware they are expected to participate in the prison's intensive substance abuse program.

Representatives of JHA interviewed six new inmates chosen at random who said they did not want or need substance abuse therapy. Some described themselves as tricked into going to Sheridan.

On the other hand, inmates who were completing the program and nearing discharge were enthusiastic.

"I needed to listen to somebody else instead of listening to myself," one inmate said. "The most important thing I learned is I don't have to come back."

He said he was due for release the previous week, but the state's suspension of an early release program meant he would spend six more months in prison.

The inmate said he accepted that he must spend more time in prison than he originally thought. "Acceptance is a big thing in my life," he said.

Another inmate who was successful in the program said he had been imprisoned six times for a total of 12 years. He is 28 years old.

"I used to use the excuse about living in poverty in that crazy neighborhood," he said. He said his family abandoned him because of his behavior, and he is determined to show them he has changed.

David Olson, chairman of Loyola University's Department of Criminal Justice, along with others, has studied Sheridan since the prison began its Therapeutic Community effort more than six years ago.

In a report set to be released shortly, Olson found that Sheridan inmates who successfully complete their aftercare are 50 percent less likely to return to prison than individuals in a comparison group of ex-inmates. The percentage of inmates successfully completing aftercare has risen in recent years, another positive sign.

The emphasis on treatment is not cheap. It costs \$43,607 a year to house an inmate at Sheridan. By way of comparison, the average Illinois state prison inmate costs about \$25,000 a year, while an inmate held at Tamms Supermax costs the state \$64,116 a year.

Observations: Sheridan's approach to substance abuse and education appears to work. While definitely a prison, the atmosphere at Sheridan is more relaxed than is usually the case behind bars. Sheridan's therapeutic staff seemed genuinely concerned about the rehabilitation of offenders. However, some new inmates were not aware of the intensive nature of the program and are resistant to therapy.

Recommendations: Inmates should be clearly informed of the nature of treatment at Sheridan before being assigned to the prison. Also, Warden Osborne has the right to expect the full support of his staff, which he said is not uniformly the case. His subordinates who disapprove of the rehabilitation goal of Sheridan should be offered retraining or transfer to another prison.

Educational and Vocational Programs

Compared to most prisons, Sheridan has a rich offering of educational and vocational programs.

The Home Builders Institute offers classes in carpentry, building and apartment maintenance, plumbing, masonry and electrical work serving 133 inmates. Waiting lists are generally short.

The Illinois Manufacturing Foundation offers a course in machining and related computer technology serving 26 inmates. Those who complete the 12-month course acquire sophisticated skills. There is no waiting list.

Illinois Valley Community College offers remedial schooling and vocational training in horticulture, warehouse, food preparation and welding serving 244 inmates. Some classes have no waiting list.

Sheridan's Adult Basic Education program has 120 student inmates, with 155 on a waiting list. There are 32 inmates enrolled in GED related classes and no waiting list. Eighteen students are studying to become barbers.

Observation: The Home Builders Institute and the Illinois Manufacturing Association are to be commended for their involvement in prison vocational education. The Illinois Valley Community College offering of classes is

valuable. It is empirically proven that vocational and academic education reduces the likelihood that a former inmate will ever return to prison.

Recommendation: The Illinois Department of Corrections should look for more industry groups or associations willing to host vocational programs in prisons around the state.

Medical Care

As is typical of Illinois prisons, Sheridan's medical unit is understaffed and a particularly important position is vacant.

Sheridan has gone without a Health Care Unit Administrator since March. The Health Care Unit Administrator's duties include management of the infirmary. Those responsibilities are currently filled by the Nursing Director. The Health Care Unit Administrator is a state job and not outsourced.

Sheridan is authorized for 10 Registered Nurses. But the prison has only seven, and the number will drop to six because of a pending departure. A nurse is on premises every hour of the year.

Although the average inmate is 32, some are afflicted with the medical disorders associated with substance abuse. Medical staff noted that a 28-year-old inmate, a heavy cocaine user, suffered two heart attacks while incarcerated.

Medical staff appears to be managing well despite the vacant positions. Staff says the health care unit offers appropriate continuity of care. The prison, which is composed of 75 buildings on 80 acres, is equipped with an emergency car filled with medical supplies so staff can rapidly reach and treat inmates.

Prison management reports that 184 inmates are receiving psychiatric care, and 124 receive psychotropic medication, none involuntarily (these number fluctuate frequently). Inmates with serious mental illness are not assigned to Sheridan.

Recommendations: Fully staff the nursing and Health Care Unit Administrator positions. The Illinois Department of Corrections should also consider providing emergency medical cars to its other large, spread out prisons.

Other Facts and Observations

By one important measure, Sheridan is a notable success. The prison seldom needs to confine inmates to their cells around the clock, a practice called lockdown. Lockdowns are imposed for a number of reasons, including fighting, searches for contraband, and gang activity. In general, the fewer the lockdowns the better the prison. Sheridan has averaged just seven days of lock down a year since it opened. Comparable Illinois prisons averaged 22 days of lockdown per year during the same period.

Alcohol is the most commonly abused substance among Sheridan's population. Marijuana is the second most common substance. Heroin has displaced cocaine and methamphetamine to become the third most common substance. One therapist at Sheridan said heroin use first began increasing in Cook County and in recent years radiated out to smaller communities throughout Illinois. The heroin is relatively pure and said to come from Afghanistan.

Cells, housing units, the infirmary and other areas viewed by JHA appeared clean and orderly. Some inmates did say insects are a problem, particularly in the segregation unit.

Each year the John Howard Association receives and replies to more than 1,300 inmate letters asking for help or detailing complaints from every prison in Illinois. But JHA receives very few letters from Sheridan inmates.

This report was written by Robert Manor, Prison & Jail Monitor for the John Howard Association. He may be reached at (312) 503-6302 or rmanor@thejha.org.

JHA Board Member Frank Nicholas and JHA Citizen Observers Mariya Kozlova, Burt Raabe and Beth Webb contributed to this report.

Since 1901, JHA has provided public oversight of Illinois' juvenile and adult correctional facilities. Every year, JHA staff and trained volunteers inspect prisons, jails and detention centers throughout the state. Based on these inspections, JHA regularly issues reports instrumental in improving prison conditions.

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