



Department of Public Safety and Correctional Services

Office of the Secretary

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INMATE GRIEVANCE OFFICE

The Honorable Tom Coburn
U.S. Senator
172 Russell Senate Office Bldg.
Washington, DC 20510

Dear Senator Coburn:

The following information is provided in response to your questions from the United States Senate Committee on Judiciary hearing on Hearing on "Human Rights at Home: Mental Illness in U.S. Prisons and Jails", which was heard on September 15, 2009.

1. What type of training does correctional staff receive in the Maryland Department of Corrections (MDOC) to enable them to recognize and appropriately react to inmates with mental illness? How often does staff receive such training?

All incoming Maryland Division of Correction (DOC) recruits receive 5 weeks of training academy as well as one week of pre-service training. This contains a number of mental health related training modules including management of inmates in crisis, suicide awareness, cognitive intervention, and basic information about mental health issues such as depression.

In addition, all DOC staff members are required to attend annual in-service training ranging from a total of three to five days dependant upon the institution. This training includes information related to mental health issues, particularly the methods to address suicidal inmates.

2. Does the MDOC have mental health professionals on staff at every institution? If not, why not?

Our DOC contracts mental health services (psychiatrists, psychiatric nurses and/or nurse practitioners from an outside vendor who operates within the conditions of a contractual agreement. Additional clinical services are provided by appropriately licensed DOC personnel.

3. What changes should be made in the MDOC to improve the way it evaluates and treats mentally ill offenders?

The primary issues are access to specialized training and sufficient resources. Ideally each state would operate mental health facilities to care for the needs of mentally ill offenders. Under the current system, we would need access to sufficient training for our correctional staff. Correctional facilities are not designed to care for the specific needs of mentally ill offenders. Additionally, sufficient licensed professional staffing levels would have to be increased in order to better treat co-occurring issues in the areas of substance abuse and somatic illness that often accompany mental illness.

4. How often are new programs established to treat mentally ill offenders?

- a. Are all current programs available at all institutions? If not, why not?

Recently, our DOC has implemented a system of mission specific style correctional institutions. As part of this we have identified specific institutions that are appropriate to address specific inmate needs. We have invested in the establishment of Special Needs Units to manage severe mentally ill populations and have initiated programs to address gender specific treatment.

- b. In the Maryland DOC, do female offenders suffer more than male offenders from mental illness?

Our treatment team is going to more fully evaluate this issue and will respond by February 5, 2010.

- c. If so, are the mental health treatment programs structured differently for women given their greater susceptibility to mental illness?

5. Does Maryland have a mental health court system? If so, have you seen a difference in the number of inmates you incarcerate since these courts were established?

Maryland does not have a mental health court system, based upon the model and suggested best practices at the national level, we would be supportive of the establishment of one in the future.

- a. If not, how do you know that the needs of mentally ill inmates are being met?

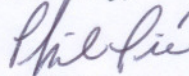
It is clear that more is needed within corrections to properly care for the needs of the mentally ill offenders. If their specific illness goes untreated, it often presents itself through criminal behavior. Developing solid community resources is part of the solution as well as adequate training and sufficient resources.

b. What is the educational background of your mental health professionals?

- *Clinical psychologists have a Ph.D., and have been professionally licensed.*
- *Mental Health Professional Counselors – Master Level in Psychology and Licensed as an LCPC*
- *Psychology associates – Master Level in Psychology*

Thank you again for your leadership in advancing the issue of mental illness within the nation's correctional facilities. I would be happy to answer any follow up questions.

Sincerely,



Phil Pie
Assistant Secretary
Treatment Services