The Bureau of Prisons ended FY2018 with 3,901 fewer inmates than the prior year. This is the fifth consecutive year of decreases in the inmate population after 34 years of increases. However, the Bureau remains crowded in high, medium and low security facilities.

Residential Reentry

The BOP contracts with Residential Reentry Centers (RRCs), also known as halfway houses, to provide assistance to inmates who are nearing release. RRCs help inmates gradually rebuild their ties to the community and facilitate readjustment. Approximately 17-19 months prior to an inmate’s release, an RRC referral recommendation is made based on risk factors such as programming and treatment needs. Higher risk offenders are the Bureau’s first priority. Home detention monitoring is done by either the RRC or via the Federal Location Monitoring Program with US Probation. An inmate’s length of placement could be up to 12 months.

Mental Health Care Levels

Mental health care levels (of which there are four) are used to classify inmates based on their need for mental health services. Facility placement ranges from Care Level 1 facilities - which are for inmates who do not require significant mental health care - to Care Level 4 facilities for inmates who require inpatient psychiatric care.

Medical Care Levels

Medical Care Levels (of which there are four), are used to align an inmate’s medical needs with institution capabilities (including community medical resources). Care Level 1 facilities are assigned to generally healthy inmates, while Care Level 4 facilities are reserved for inmates who require daily nursing care or therapy.

Education Status

Inmates who do not have a verified General Educational Development (GED) credential or high school diploma are required to attend an adult literacy program for a minimum of 240 instructional hours or until a GED is achieved, whichever occurs first. Non-English-speaking inmates must take English as a Second Language.

Staffing Ratios

The inmate-to-staff ratio is an important factor in maintaining institution safety. The BOP staffs facilities based on various factors including facility security level, inmate population and facility programs and capabilities.

Drug Treatment Participants

The BOP’s drug abuse treatment strategy has grown and changed as advances have occurred in substance abuse treatment field. The BOP offers a variety of programs to generate positive outcomes (by reducing relapse and criminality), ranging from residential programs, non-residential programs, drug education, and transitional drug treatment in the community.

To learn more about the BOP, visit http://www.bop.gov