

Moving Beyond Solitary Confinement: Making the Case for Public Safety

An Interview with Rick Raemisch
Director of the Department of Corrections, Colorado



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In 2011, when Tom Clements was hired as Director of the Colorado Department of Corrections (DOC), 1500 people – nearly 7 percent of the state’s prisoners – were in solitary confinement. A person stayed in a cell 23 hours a day, often for years. Then one day, often with no transition, he or she was on a bus going home. Tom Clements wanted to change the state’s use of solitary confinement, and in the two years he had in office, he cut the number of people in solitary confinement in half. But he didn’t get the chance to complete his work. On March 19, 2013, he opened the door of his home and was murdered by a man who had recently been released directly to the community from solitary confinement.

As Tom Clements’s successor, Rick Raemisch was charged by Governor John Hickenlooper with making the changes Tom Clements had not lived long enough to complete. The Governor wanted to limit or eliminate solitary confinement for people with mental illness. He wanted to understand and address the needs of people who were in solitary confinement for long periods. And he wanted to reduce the number of them released back to their community without preparation.

The new Director shared the passion for change, and he thought it would help him as a leader to understand something of what it felt like to endure solitary confinement. In January 2014 he had himself committed to an administrative segregation cell with a steel door and the bed, toilet, and sink bolted to the floor. He expected some quiet time, he says, but there was no quiet: only blaring televisions, banging, and the loud screaming of angry prisoners. The lights stayed on all night, and prisoners were awakened at intervals throughout the night for required checks by correctional officers. After only 20 hours, as he wrote in a *New York Times* editorial, he was wondering how long it would take for the experience to “chip away” at his sane mind.¹ What would it be like to endure this for years? What would it be like to endure it with mental illness?

A System Transformed

Today, Rick Raemisch says, a person walking through Colorado’s repurposed Supermax prison hears no banging and screaming, but instead, quiet voices. The maximum amount of time anyone spends in solitary confinement is one year, and that is only for the most violent offenders. When people go in, they know why they are there, and they know when they will get out. This is in sharp contrast to the “level” system used in many states, in which people must work their way down through different levels to earn release; one bad day can take you back to level one, and months can become years as the indefinite confinement goes on.

Today, no one is released directly from solitary to the community; instead, the state has developed a step down program to prepare people for community law. By state law, no one classified as seriously mentally ill can be held in solitary. The state has a total of 150 people in restrictive housing – less than 1 percent of the total prison population.

Owning the Vision, Moving as a Team

Director Raemisch did not make these changes by fiat. He knew his staff – especially the wardens and their staff – had to believe in them or the new policies would fail. Even more, he knew he needed their help. So the new Director invited those who knew the system best to help him change it.

His pitch was simple and direct. “We’ve lost sight of our mission,” he told his managers. “We’re using segregation to try to keep the *prisons* safe and easy to run. But what about the community? What about public safety?” People can easily end up in solitary for having a big mouth or not following the rules. The goal is efficiency. But what

¹ Rick Raemisch, *My Night in Solitary*. *New York Times*, February 21, 2014.

happens when they come home after all those years without human interaction? Rick Raemisch challenged his staff with a question: “Do you want someone who has been in solitary confinement for years moving next door?” If DOC’s primary mission is public safety, he asked, then how is returning someone to the community in worse shape than when they entered the system serving the public? “You’re saying someone is too dangerous to be in the general population, but we can release them directly back to the community? That’s a good policy?”

The Colorado team got it, and they got busy. Groups of corrections staff worked together from the ground up, debating issues and building a new process. Staff were all part of the policy change and helped develop new procedures. Minor offenses now result in minor sanctions: loss of the TV for a while, limited canteen, or a loss of privileges. New recruits are carefully trained not simply on the new procedures, but on the radically new philosophy behind them. Staff are safer because of the changes – inmate on staff assaults are the lowest since 2006 – but that doesn’t mean their jobs are easier. Now, officers are problem solvers and have some tools to prevent infractions. For example, an inmate can request time in a quiet de-escalation room. Instead of “blowing sky high,” the person can say, “I need some time out.”

No Map, No Road: But Moving Ahead Anyhow

On June 6, 2014, Colorado Governor John Hickenlooper signed legislation barring the state from placing people who are incarcerated and have serious mental illness (such as schizophrenia) in long-term solitary confinement. Today, the Director believes the system is in full compliance. How does he know? Before anyone is placed in segregation, he or she must be assessed for the presence of serious mental illness. Working as a team, clinical experts and correctional officers determine whether a mental illness may have caused the violation. If so, the response is treatment, not punishment.

People who are incarcerated with mental illness, many of whom were once held in solitary confinement, are housed in one of two prisons where they receive treatment. For Colorado, the Director says, there was no map and no road to where they wanted to go; but through trial and error and persistent teamwork, they are moving. The innovative “10 and 10” program ensures that people with serious mental illness are out of their cells at least 10 hours for treatment and 10 hours for recreation every week. Rick Raemisch says with satisfaction, “No more putting them in a cell 23 hours a day and letting the demons chase them around.”

The team tracks data with care to understand the results of the changes they are making, and the results are promising. Less use of restraints. Less violence. Fewer cell extractions. Fewer assaults. Less self-harm. Less recidivism. “We believe these reforms have led to safer institutions,” said Director Raemisch, “and in the long run, since 97% of our inmates return to the community, they have also led to safer communities.”

“This Can Be Done Anywhere”

Rick Raemisch does not believe the changes made in Colorado are the results of a unique set of circumstances. He believes any system can tackle the problem of excessive use of solitary confinement and succeed. He is currently working with other members of the American Correctional Association to develop new standards to help the field move forward. His share of “Catholic guilt,” he says, may be part of what drives him to “do the right thing.” His vision is partly faith driven: “But some of it is just because we are human beings.”

For those who want to change their systems, he has only encouragement. “You have to have a clear vision, and you have to push it. Talk about it. Explain the ‘why.’ Have some passion. Put a team together as passionate as you are – and go to work.”

Thank you, Colorado, for being a pathfinder in safe alternatives to solitary confinement!

