



# Crisis in Corrections: The DOC Staff Shortage and the Inmate Experience

---

Jason Vitello, MSW, CCJRC Manager of Equity and Community Development  
Christie Donner, CCJRC Executive Director

# Crisis in Corrections

## The DOC Staff Shortage and the Inmate Experience

Colorado's prison system, like many across the country, have a staffing crisis. [1] In some ways, the prison staffing crisis is not unique, as American cities, counties, and states everywhere are experiencing public sector labor shortages. [2] But the consequences of a prison staff shortage are especially dire and have led to lockdowns, increased violence, threats of strikes, and one state recently deployed the National Guard to supplement DOC staff. [3]

In 2023, the Mission Square Research Institute surveyed 249 state and local government human resource managers, and 77% said that finding correctional officers was one of the most challenging hiring tasks. [4] Because working conditions are getting tougher, experienced corrections employees are leaving, which puts more pressure on those who stay. [5] In addition to having a staff vacancy rate above 20% [6], the Colorado DOC also reported that almost 25% of its workforce is within 5 years of retirement eligibility. [7]

While much has been written about the problems in prison understaffing from the perspective of those who work there, this report is the first in Colorado and potentially across the country – to examine the impacts of the labor shortage as experienced by the people who are incarcerated. This fall, CCJRC surveyed over 400 individuals incarcerated in Colorado and the results are devastating.

People lack access to essential services like medical, dental, and mental health care. People are unable to participate in education, employment, treatment, and other programs that help prepare them for a successful release. The shortage has also resulted in many safety and mental health challenges, inadequate interactions with case managers, more segregation and lockdowns, and challenges staying connected to their loved ones. Simply put, because of the staff shortage, DOC is not able to fulfill its organizational mission, responsibilities, and constitutional mandates.

The results of this study should add to the legislative urgency to find a true solution to the crisis in corrections, especially since the DOC is requesting an additional 500 prison beds in its FY24-25 budget request, after receiving 700 more beds in the current fiscal year. [8]

Although CCJRC does not oppose attempts to increase staffing through improved salaries or other benefits, it is also clear that these efforts, alone, will not solve this crisis – we've tried that. In the past two years, DOC has received almost \$200 million to help close the staffing gap, but growth in the prison population is outpacing the net increase in DOC staff.

DOC is utilizing other strategies that are dangerous and worrisome including requiring correctional officers to work overtime, reassigning program staff and case managers to security posts, and lowering the hiring age to 18. These are crisis management strategies, not best practices. Despite all these efforts, the crisis in corrections hasn't lessened. As shared by DOC at their Joint Budget Committee hearing, the state demographer has advised them that the DOC workforce is simply not coming back to its previous levels. [9] This is a reality we all must face.

What has been missing is any intentional effort to reduce the prison population in order to better align the number of staff, beds, inmates and programs/services. Although the prison population is growing, there has been a substantial slowing in that growth. Consequently, modest efforts to reduce the prison population could neutralize the growth rate so that increases in DOC staff could actually make a difference.

Strengthening the Prison Population Management Measures law, addressing the gaps in prison programming through training inmates and partnering with community providers, and creating a corrections oversight committee are among the recommendations included in this report.

CCJRC is honored to partner with **One Voice United** to include the perspective from correctional staff in this report. We hope this report helps lawmakers and the public better understand the problem and provides recommendations that could help address the crisis in corrections.

[1] See Lindsay Toomer, "Low Staffing at Prisons in Colorado Leads to Unsustainable Working Conditions," Colorado Newsline, Jan. 3, 2023; Keri Blakinger, "As Corrections Officers Quit in Droves, Prisons Get Even More Dangerous," The Marshall Project, Nov. 1, 2021.

[2] See Darreonna Davis, "Teachers, Police Officers, Healthcare Workers: Here Are The Public Sector Jobs Still Struggling To Fill Roles," Forbes, Aug. 15, 2023.

[3] Prendergast, Alan, "The Hard Cell: The Turmoil Inside Colorado's Understaffed Prisons," Westword, November 8, 2023

[4] Geral Young, "State and Local Workforce: 2023 Survey Findings," Mission Square Research Institute, June 2023

[5] Thrush, Glen, "Short on Staff, Prisons Enlist Teachers and Case Managers as Guards," New York Times, (May 1, 2023)

[6] Joint Budget Committee, Staff Budget Briefing FY2024-25, Department of Corrections, (December 6, 2023) at 21.

[7] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at 10.

[8] Joint Budget Committee, Staff Budget Briefing FY2024-25, Department of Corrections, (December 6, 2023) at 10-11.

[9] Ms. Ashley Clark, DOC budget director, in response to question from JBC member at the DOC budget hearing on December 14, 2023.

# Statement from One Voice United

Andy Potter | Founder, One Voice United ([onevoiceunited.org](http://onevoiceunited.org))  
December 2023



One Voice United (OVU) is dedicated to ensuring that the Officers and non-custody staff who make up the second largest stakeholders in the correctional system have a rightful seat at the table as the nation looks to reform.

No one knows better the failure of the current system than the men and women who witness those failures firsthand every day. We believe that it is those same professionals and the unions that represent them that have the greatest potential to be the drivers of reform. We also believe that absent their voices, meaningful, sustainable, reform will remain illusionary.

Although four members of the OVU Leadership Team have over 100 years of combined experience in corrections, at our core what informs us, is our access to the hundreds of thousands of correctional and parole officers and non-custody personnel working in the trenches today. After multiple surveys and numerous convenings with these professionals, retention and recruitment have emerged as two of the most critical issues the profession faces.

Understaffing impacts every aspect of the correctional experience no matter which side of the gate you are on. Understaffing not only impacts our ability to maintain a safe environment and provide much needed services and programming to the incarcerated population, its impact ripples throughout the entire system and creates multiple layers of stress on both staff and those incarcerated. Our administrators and middle managers are not exempt from these stresses either. They often find themselves facing the ire and concerns of both line staff and those incarcerated and squeezed by inadequate budgets, underfunded mandates, and politically motivated rather than correctional sound policies.

Studies point to a myriad of physical and mental health issues that a career in corrections are directly related to. Custody staff have a PTSD rate of 34%, ten times higher than the national average (non-custody staff a 27% rate!). We lose 15 years of life expectancy to do this job. Our average age at death is 60 compared to 75 for the general population. Our divorce and substance abuse rates are higher than any other public safety profession, and our suicide rates are double that of police officers. Fifty-four percent of new hires leave in the first two years of employment and three Officers take their own lives every week. These numbers are not only shameful, but they are also wholly unsustainable. Given that the research which established these statistics was done prior to the pandemic, which has led to an even greater exodus of staff exacerbating an already very dangerous situation, we fear the damage is even worse than these numbers illustrate. The impacts of understaffing, however, are felt equally whether you live or work there.

For those incarcerated it can disrupt every aspect of not only the day to day existence behind the walls but the chance to get needed programming, or medical attention, making a court date, going to classes, getting substance abuse counseling, getting mail, having visits, going to the library, getting yard time or time out of the cell, making a phone call, seeing your attorney, even taking a shower or getting toilet paper can be contingent on the number of staff available.

For staff it results in numerous extra shifts via forced overtime, loss of family time, doing two or even three jobs at once. Loss of sleep, high blood pressure, poor nutrition, and trauma, trauma, trauma every day. There is no “correcting” going on with those numbers, staff are all just trying to stay alive. There is no time to meet annual training mandates or introduce new techniques for existing staff. Academy classes are also being shortened and hiring standards lowered, which only exacerbates the situation. Introducing ill-equipped poorly trained cadets into an environment that will eat them up and spit them out in under two years is simply perpetuating the downward spiral.

When violence breaks out, or there is a medical emergency the men and women working on shift are 911. They are the first responders no matter how minor or major the incident. When they don’t have the numbers to respond the damage may be far more severe. It is not an understatement to say that improper staffing creates many more life and death situations than would normally be the case.

So, what’s the answer; better pay and benefits, increased hiring standards, better training? Unfortunately, although those are clearly needed, they are band aids that will do little to address the core issues we face. What about reducing the prison population? That should be considered a part of the effort to address the immediate crisis and would provide some relief from the current pressures on the system. However, more work needs to be done to address core deficiencies, high recidivism rates, and the nearly 90 billion taxpayer dollars per year we pay to sustain the status quo.

OVU has worked with dozens of corrections unions and numerous reform groups over the past six years seeking to find areas of common ground from which to build a healthier and safer framework for reform. Although we know the hard work lies ahead, we are bolstered by our recent experiences with union leaders, line staff, and reform advocates, including the Colorado Criminal Justice Reform Coalition. There is a willingness emerging to, at the very least, explore where and how best we might align to address the crisis in corrections. At One Voice United we are committed to doing all we can to build bridges where barriers exist with hopes for a better way forward for us all.

# Inmate Survey Results

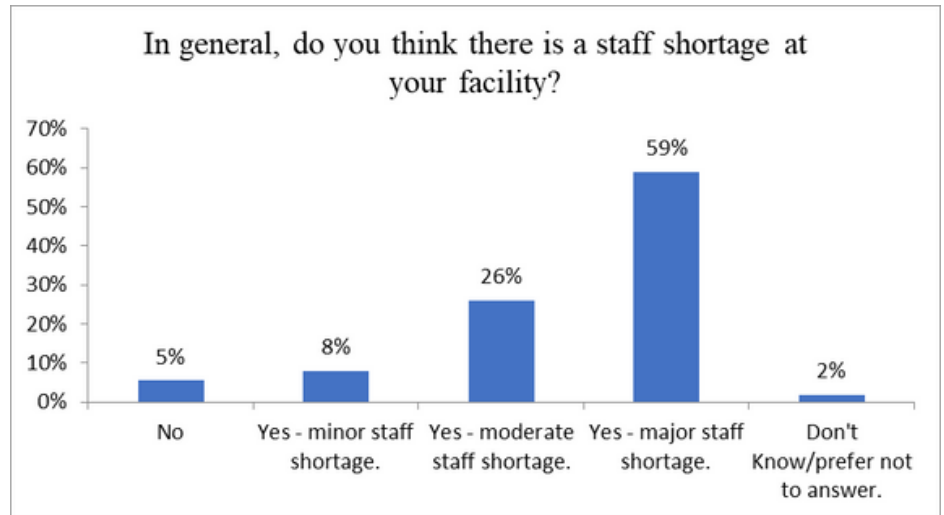
## Impact of DOC Staffing Crisis on People in Prison

In the fall of 2023, CCJRC surveyed over 400 people currently incarcerated in Colorado to better understand how the lack of staff is affecting them. The results clearly show that there continues to be a severe staff shortage. As a result, access to essential services like medical, dental, and mental health care has been severely compromised. It has also made it much more challenging to participate in education, employment, treatment, and other programs that help prepare people for a successful release from prison. The shortage has also resulted in many safety and mental health challenges, inadequate interactions with case managers, more segregation and lockdowns, and challenges staying connected to their loved ones.

### DOC Staff Shortage

An overwhelming 93% of respondents say there is a staffing shortage at their facility, and 85% say that the shortage is either significant or moderate.

The next series of questions asked about safety and basic prison functions. A strong majority do not believe that their facility is staffed well enough to maintain safety, which has resulted in an increase in both violence and drug use within the prisons.



Let us know whether you agree or disagree with the following statements regarding your current facility.	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree	DK/NA
It is sufficiently staffed to maintain safety.	38%	29%	20%	10%	3%
It is sufficiently staffed to provide consistent access to the gym and/or recreation yard for physical exercise.	55%	22%	13%	9%	1%
It is sufficiently staffed to provide consistent access to the library and law library.	41%	26%	23%	10%	1%
It is sufficiently staffed to ensure meals are provided on a consistent and timely basis.	26%	23%	33%	17%	1%
It is sufficiently staffed to ensure mail service is provided on a consistent and timely basis.	28%	22%	33%	15%	1%
It is sufficiently staffed to ensure my medications are provided on a consistent and timely basis.	34%	20%	24%	14%	9%
The staff shortage at my facility has negatively impacted my health or mental health.	16%	9%	21%	52%	3%
The staff shortage at my facility has negatively impacted my safety.	15%	19%	31%	30%	5%
The staff shortage at my facility has resulted in an increase in physical altercations and tension.	11%	11%	30%	42%	6%
The staff shortage at my facility has increased substance misuse.	12%	7%	18%	50%	13%
The staff shortage at my facility has negatively impacted my successful reentry.	9%	7%	20%	56%	9%
Due to the staffing shortage, my time in prison has been more idle and less productive.	8%	6%	15%	68%	2%
DOC has been able to hire more staff, so the staff shortage is getting better.	41%	21%	24%	8%	6%
The new staff DOC has hired seems to be adequately trained and competent.	48%	29%	15%	5%	4%

Even basic prison functions like going to the gym or the library, medication, and mail service are not consistent. 84% said their time has become more idle and less productive which has negatively affected both their mental health and their ability to successfully reintegrate back into the community after release.

Despite the efforts of DOC, the majority don't think the staffing situation has improved and over three-quarters don't think the newly hired staff have enough training to be competent.

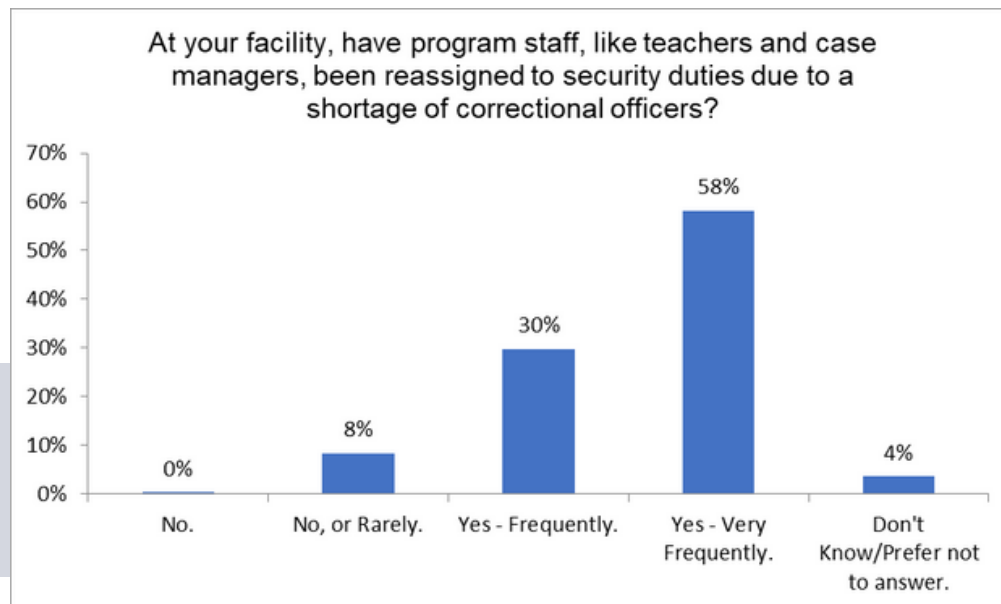
*"Staff shortage at my facility results in an increase in drugs, physical altercations and tension and negativity, impacting staff and inmate safety."*

*"I am an older man in my 60's, veteran, and in an incentive unit. I have been stolen from and extorted from. I live in constant fear and just recently a fellow veteran was beaten to death...DOC is a time bomb waiting to explode."*



## Staff Reassignments

The next series of questions relates to the experience of having staff reassigned to security duties and its impact. 88% report that case managers and program staff are frequently having to perform security duties because there aren't enough correctional officers.



*"Staff work 12-18 hour shifts. Everyone is pent up and pissed off. This place is a time bomb!"*

*"Case managers work security 50% of their time."*

*"Some of the newly hired staff are very difficult to deal with because they are very young (18 to 21 years)."*

## Staff Shortage and Access to Services

The next section demonstrates how the staff shortage has severely and negatively impacted incarcerated people's ability to get the services they need, and the quality of these services. Alarming, this is especially true for clinical-related services such as medical, dental, and behavioral health care.

Inmates are also facing substantial challenges accessing rehabilitative and self-improvement programming such as vocational training, education, parenting, or reentry classes.

Most people report that the need for more staff is a significant reason they can't get the clinical care and programming they need.

*"They have no programs and then deny parole for non-program compliance."*

How easy is it for you to have timely access to the following services and programs at your facility?	Very Difficult	Somewhat Difficult	Subtotal difficult combined	Somewhat Easy	Very Easy	Don't Need or Want	Not Offered	Don't know or No answer
Dental Care	66%	21%	87%	7%	1%	4%	1%	0%
Health Care	51%	34%	86%	8%	3%	3%	0%	0%
Vocational/Employment	57%	16%	73%	5%	2%	4%	14%	1%
Education Classes	43%	29%	72%	11%	3%	7%	6%	1%
Correctional Industry Jobs	58%	13%	70%	5%	3%	4%	17%	1%
Other Self-Improvement Classes (Like, 7 Habits, Anger Management, Victim Impact, etc.)	36%	29%	65%	18%	5%	4%	7%	1%
Mental Health Treatment	36%	27%	63%	13%	2%	20%	2%	0%
Reentry Classes	33%	26%	59%	11%	3%	15%	10%	1%
Medication	27%	30%	57%	22%	8%	13%	1%	0%
Drug/Alcohol Treatment	36%	17%	53%	8%	3%	32%	4%	1%
Parenting Classes	30%	15%	44%	6%	3%	27%	19%	2%
Peer Recovery Support	24%	19%	43%	19%	8%	23%	7%	0%
Sex Offense Treatment	26%	4%	29%	2%	2%	45%	21%	2%

*"Earlier this year a gentleman killed himself due to medical staff turning him away for mental health reasons."*

If you have had difficulty accessing services or programs, to what extent do you think this difficulty is due to a staff shortage?	Staff Shortage main reason	Staff Shortage partially the reason	Subtotal - staff shortage is a reason	Staff Shortage not the reason	Don't Know or No Answer
Education Classes	58%	23%	81%	17%	3%
Vocational/Employment Training	63%	17%	80%	17%	3%
Health Care	41%	36%	78%	22%	1%
Dental Care	47%	28%	76%	23%	1%
Mental Health Treatment	41%	30%	71%	23%	5%
Other Self-Improvement Classes (Like, 7 Habits, Anger Management, Victim Impact, etc.)	46%	25%	71%	22%	8%
Reentry Classes	45%	25%	70%	24%	6%
Drug/Alcohol Treatment	42%	26%	69%	24%	7%
Correctional Industry Job	48%	19%	66%	29%	5%
Parenting Classes	43%	21%	64%	28%	8%
Medication	30%	33%	63%	31%	6%
Peer Recovery Support	33%	22%	55%	37%	9%
Sex Offense Treatment	40%	10%	50%	39%	12%

*"I am currently a chronic cancer care patient in the DOC. Because of staffing shortages, I am rarely able to see a provider; I'm afraid for my wellbeing everyday."*

*"I have been incarcerated for 25 years and have never seen prison this bad. We are basically being warehoused. There are very few programs or educational classes... no one wants to work here."*

Most also report that they are not satisfied with the quality of services at their facility. This means that even if services and programs are available, they aren't meeting the needs of people in prison. The conclusion is clear, the shortage of staff is a major barrier to the health, well-being, and rehabilitation of inmates.

If you have been able to access any of the following services and programs at your current facility, how satisfied are you with the quality of services and programs offered?	Very Unsatisfied	Somewhat Unsatisfied	Subtotal Unsatisfied	Somewhat Satisfied	Very Satisfied	Subtotal Satisfied	Not Offered	Don't Know or No Answer
Dental Care	54%	20%	74%	14%	6%	19%	6%	1%
Health Care	49%	24%	73%	20%	5%	25%	2%	0%
Vocational/Employment Training	49%	13%	63%	8%	3%	11%	24%	3%
Mental Health Treatment	35%	24%	59%	23%	4%	27%	7%	7%
Education Classes	40%	18%	59%	16%	6%	22%	14%	4%
Medication	34%	24%	58%	24%	9%	33%	4%	4%
Reentry Classes	37%	20%	57%	13%	3%	16%	20%	8%
Correctional Industry Jobs	46%	10%	56%	8%	3%	12%	29%	4%
Other Self-Improvement Classes (Like, 7 Habits, Anger Management, Victim Impact, etc.)	33%	19%	52%	24%	7%	32%	14%	3%
Drug/Alcohol Treatment	33%	18%	51%	16%	5%	20%	20%	9%
Parenting Classes	30%	13%	44%	8%	3%	11%	36%	10%
Peer Recovery Support	23%	17%	40%	25%	8%	32%	19%	9%
Sex Offense Treatment	27%	3%	30%	4%	2%	6%	52%	13%

*"I am a front-line war vet and have bad PTSD and they punish me for being unable to work some places and make me jump through hoop after hoop because of my mental health issues."*

*"I would like to leave with better tools to stay away from the CDOC. Please help me. Due to the staffing shortage there is nothing to do in prison but get in trouble and do drugs. I do not want to go backward.s. I would like to rehabilitate myself. I am at that age. I am tired."*

# Case Management

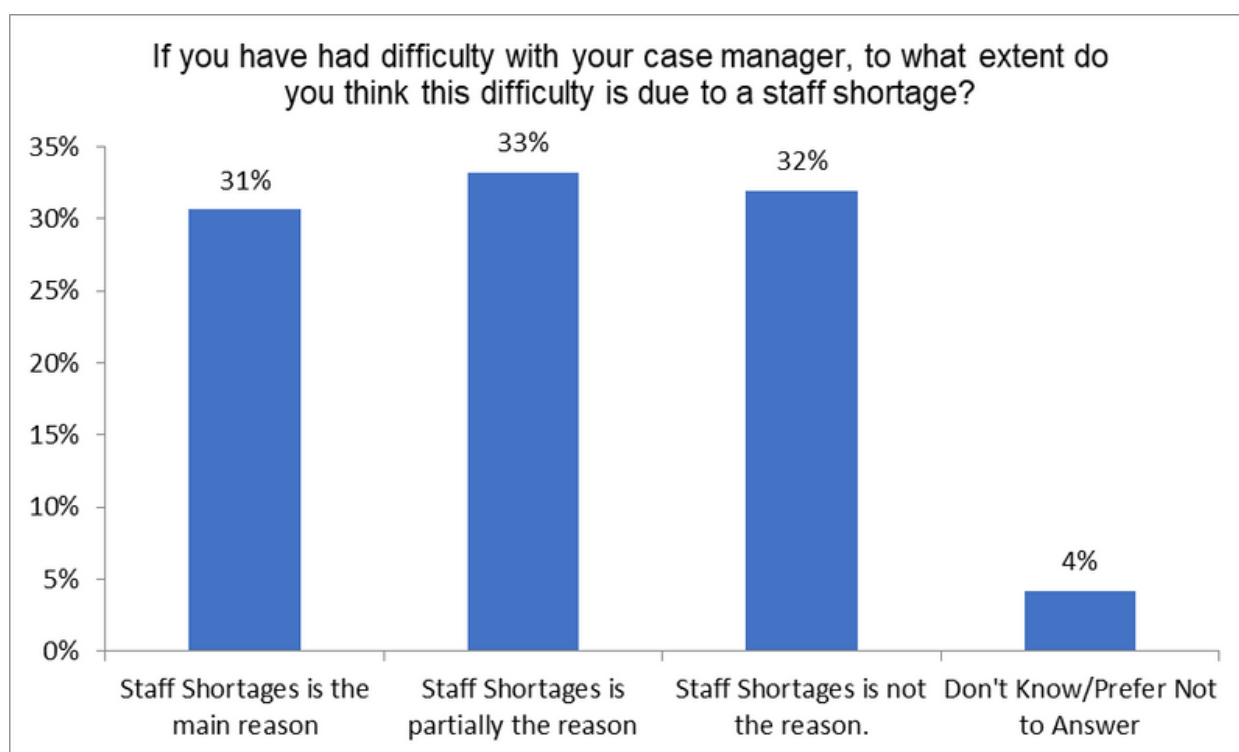
The case manager plays a vital role in an inmate's life and success. The data reveals significant concerns about that relationship.

In sum, most inmates are not happy with the relationship or the help they receive from their case manager, and two-thirds believe that the staff shortage is a cause.

*"For a good year and a half I didn't see my case manager. She was posted somewhere else to do officer duties."*

Let us know whether you agree or disagree with the following statements regarding your case managers.	Strongly Disagree	Somewhat Disagree	Subtotal Disagree	Somewhat Agree	Strongly Agree	Subtotal Agree	Don't Know or No Answer
It is easy to meet with my case manager.	43%	21%	65%	18%	16%	34%	1%
My case manager helps me get into the programming and services that I need.	43%	17%	60%	20%	14%	34%	6%
My case manager spends the right amount of time with me.	43%	16%	59%	22%	17%	39%	2%
My case manager helps me with developing an adequate parole plan and submitted it to the Parole Board in a timely manner.	40%	16%	56%	7%	11%	18%	26%
My case manager communicates well with me.	37%	18%	55%	22%	22%	44%	2%
My case manager listens to me.	30%	20%	49%	26%	22%	48%	3%
My case manager submitted my referral to community corrections in a timely manner.	33%	9%	41%	6%	10%	16%	43%

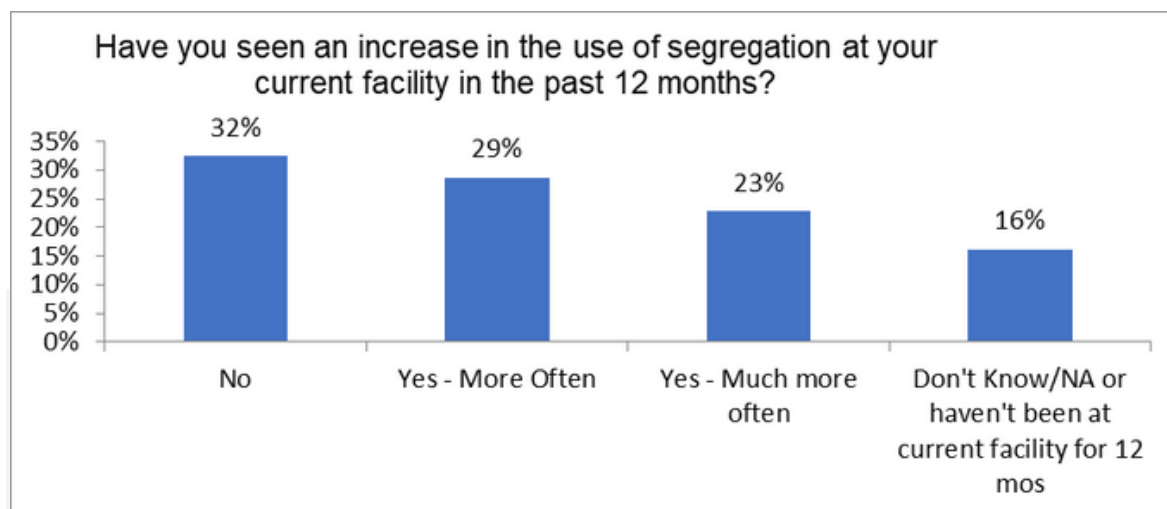
*"We do not have a staff shortage problem as much as we have an overcrowding problem. People are not being sent to halfway houses in a timely manner. Case management is a mess and under trained."*



*"It's not our job to get you out of here, it's our job to keep you in." – said a Case Manager III to an inmate*

# Segregation and Lockdowns

Most respondents also say there has been an inappropriate increase in segregation and facility/unit lockdowns. An overwhelming majority believe staff shortages contribute to the increased use of segregation and lockdowns. Equally troubling is the fact that almost 80% believe that staff does not have the training or competence to respond to mental health or medical emergencies; 90% of female respondents expressed this concern.

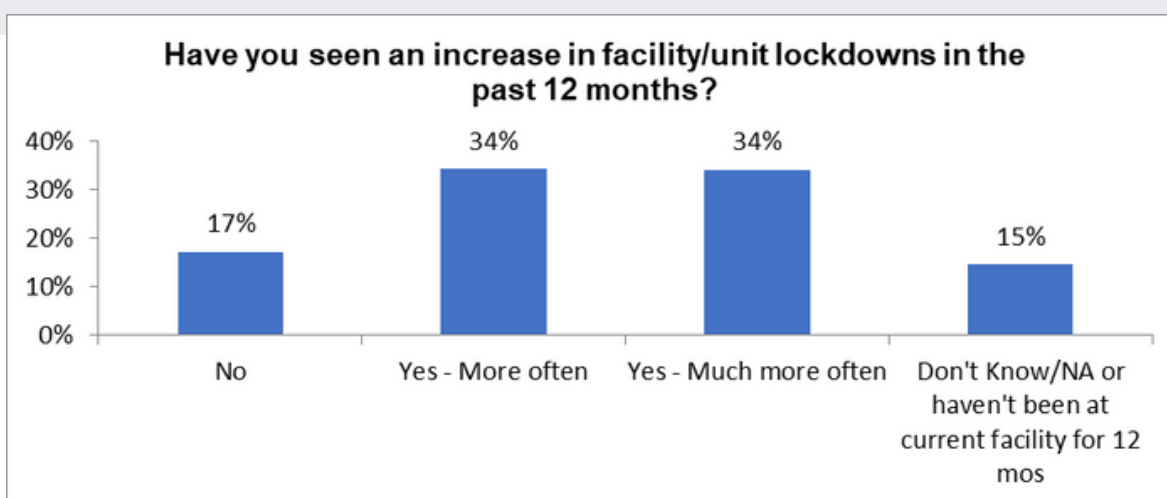


*"We are locked down 3-4 mornings per week."*

*"Lockdowns often last for days, depriving us of needed recreation, canteen/commissary, etc."*

Let us know whether you agree or disagree with the following statements.	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree	Don't Know or No Answer
Segregation is being used appropriately and only for incarcerated people who pose a real safety threat to others.	36%	20%	25%	8%	11%
Segregation is being inappropriately used to manage incarcerated people with serious mental health needs.	13%	13%	25%	32%	16%
Staff is adequately trained and equipped to appropriately respond to mental health or medical emergencies.	61%	19%	9%	5%	7%

*"Staff are overworked and are not in a competent headspace when confronted on issues and tend to escalate to unauthorized use of force and neglect protocols for de-escalation."*



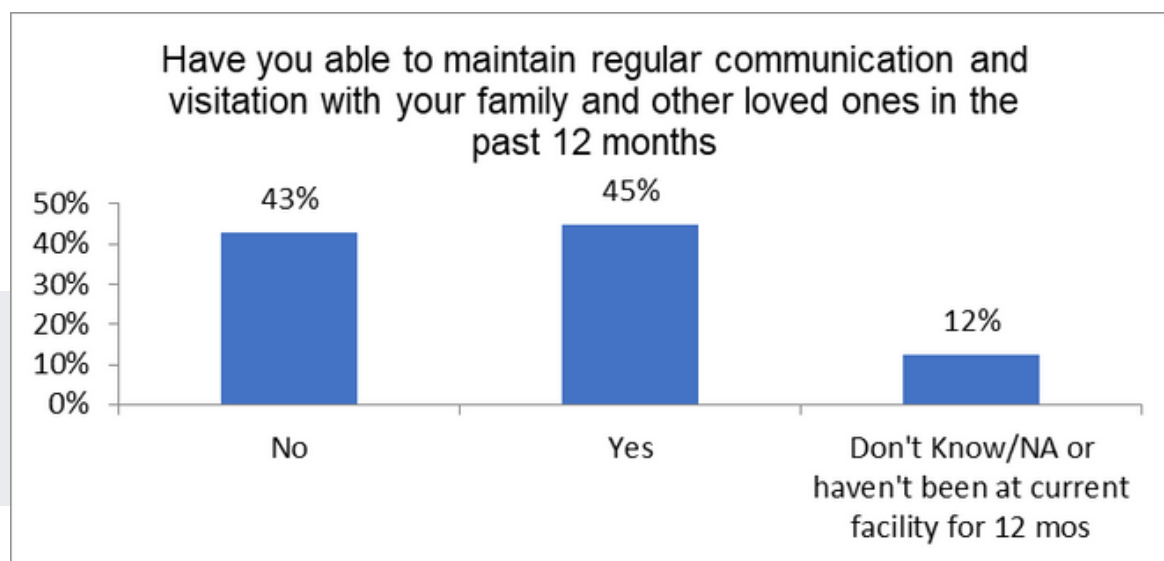
*"They use seg a lot to contend with mental illness ... violence and drugs are out of control, as well as sexual assault."*

To what extent do you think the use of segregation or facility/unit lockdowns is due to staff shortage?	Staff Shortage the main reason	Staff Shortage is partially the reason	Subtotal Staff Shortage is a reason	Staff Shortage is not the reason	Don't Know Prefer Not to Answer
Segregation	24%	39%	62%	34%	4%
Facility/Unit Lockdowns	47%	31%	78%	20%	1%



# Contact and Communication with Family and Loved Ones

Healthy personal and community ties are key to rehabilitation and a successful return to society. This data shows that for many, the staffing shortage has negatively affected communication and connections with their loved ones.



*"Due to phone system and staff shortages, I have not contacted my wife for 2 months."*

*"I can't even get my Grandma's phone number on the phone list; she is in hospice."*

To what extent do you think staffing shortages have made it harder for you to maintain regular contact with your family and loved ones through telephone/video, mail, and in-person visitation	Staff Shortages are the main reason	Staff Shortages are partially the reason	Subtotal staff shortage reason	Staff Shortages are not the reason	Don't know/prefer not to answer
Telephone/Video	22%	24%	47%	52%	2%
Mail	27%	33%	60%	37%	3%
In-person visitation	28%	24%	52%	44%	5%

*"There is only one telephone video in our pod of about 80 people. There are 4 telephones in my pod. Because of staffing problems there is no control over who is first, second, third, on the phone. Inmates control it often resulting in confrontations."*

*"In person visits have been reduced, video visits often fail, mail is weeks late, visit applications take months to process."*

# DOC Budget and Prison Population

*To provide further context, the next sections of the report provide more detail on the DOC budget, FY24-25 budget request, and the prison population projections.*

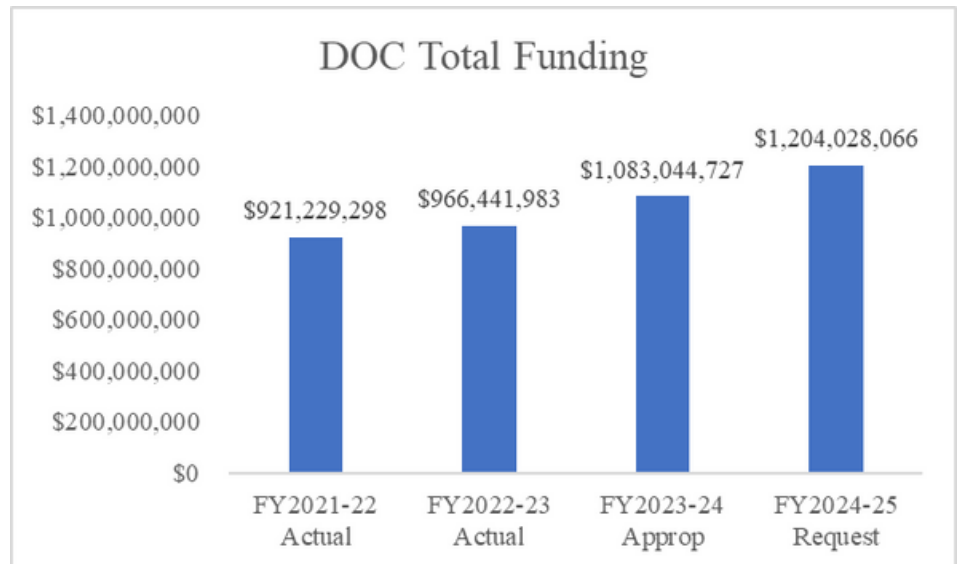
The DOC budget request for FY24-25 is \$120 million more than the current year's budget and a staggering \$283 million, or 25%, larger than FY21-22. [5]

In its FY24-25 budget request, DOC is requesting funding to add almost 500 more prison beds after receiving funding for 700 additional prison beds in the current fiscal year. [6]

R1 requests an increase of \$7.2 million and 11 FTE to add 253 male private prison beds and 80 female state prison beds at La Vista Correctional Facility.

R4 requests an increase of \$8 million and 28.3 FTE for 148 beds and medical care to open female transgender units at Denver Women's Correctional Facility (48 beds) and Sterling Correctional Facility (100 beds).

DOC also highlighted that it has one of the largest deferred maintenance and capital needs, with a total of 165 projects at a cost of just under \$2 billion. [7]



## State Investment to Address the DOC Staffing Crisis

In the past two years, DOC has received approximately \$192 million to address the staff vacancy crisis by increasing staff compensation, recruitment/retention incentives, staff overtime, and contracted personnel. The DOC FY24-25 budget request includes an additional \$136.2 million for these same expenditures, which, if approved, would bring the three-year total to over \$329 million. [8]

DOC should be commended for its efforts to retain and recruit new staff, but it has also instituted practices that should be very concerning to policymakers, including:

- Instituting voluntary and mandatory overtime that raises significant concerns about staff members' physical and mental health and safety. [9]
- Reassigning case management, educational, and other program staff to security duties, which is counterproductive to rehabilitation and preparation for release. [10]
- Lowering the minimum age of correctional officers from 21 to 18 years of age. Since August 2021, DOC has hired 197 people under the age of 21. [11]

[5] Joint Budget Committee, Staff Budget Briefing FY2024-25, Department of Corrections, (December 6, 2023) at A-60.

[6] Joint Budget Committee, Staff Budget Briefing FY2024-25, Department of Corrections, (December 6, 2023) at 10-11.

[7] Colorado Department of Corrections, FY24-25 DOC budget hearing, (December 14, 2023) at slide 4.

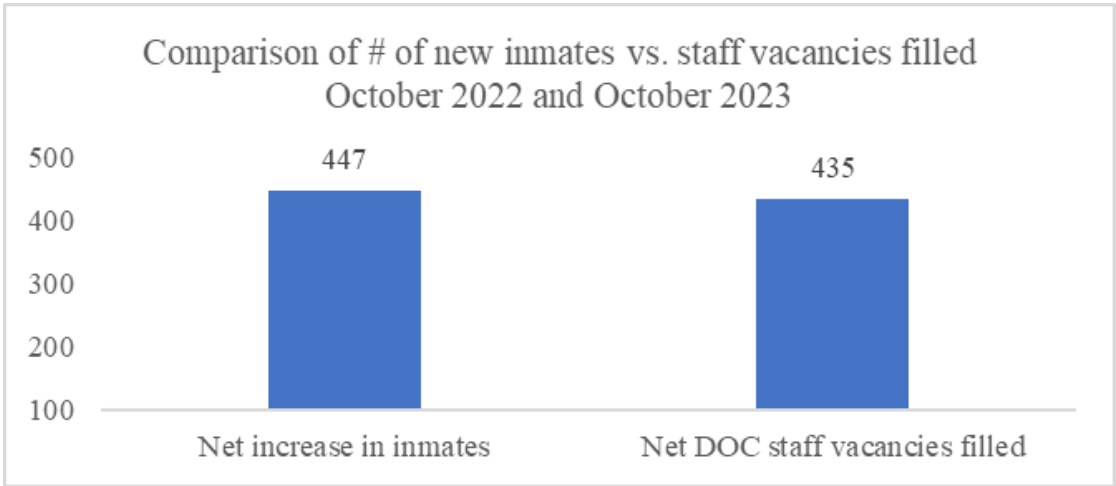
[8] Joint Budget Committee, Staff Budget Briefing FY2024-25, Department of Corrections, (December 6, 2023) at page 19.

[9] For this fiscal year, the DOC estimates overtime expenses of \$40,293,491, Incentive expenses of \$17,605,726, and expects no remaining vacancy savings. Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at 21

[10] Currently, most facilities use case managers on a volunteer or as-needed basis to cover security posts. Currently, 15 of 19 DOC facilities utilize education staff on a volunteer or as-needed basis for security posts. 4 of 19 facilities have mandatory daily security posts. Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, at page 11 and slide 13.

[11] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at 6.

Although DOC filled 435 staff vacancies between October 2022 and October 2023, [12] the prison population increased more. [13] So, despite spending \$192 million to improve the staff crisis, the staff-to-inmate ratio is unchanged, netting a zero return on investment. The DOC also reported that 1,214, or approximately 25% of the DOC's current staff level, is eligible for retirement in the next five years. [14]

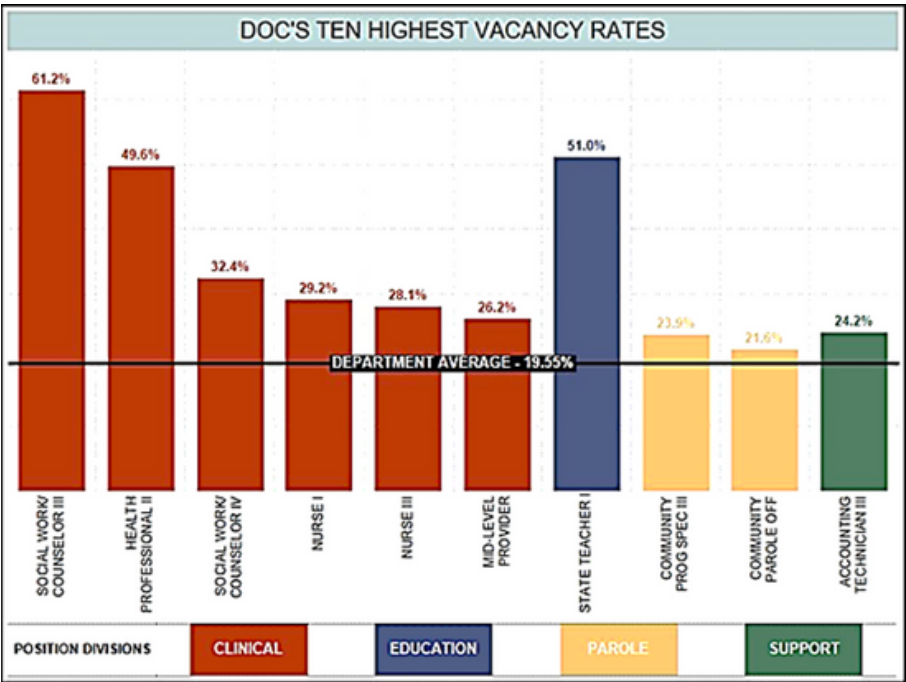


At its hearing before the Joint Budget Committee on December 14, 2023, the DOC shared that the state demographer said it was clear that the DOC workforce is not returning to its previous level. [15] Despite DOC hiring efforts and an enormous investment of public funds, the Joint Budget Committee staff analyst concluded that;

*“[v]acancy rates for correctional officers improved, though turnover remains high. Vacancy rates for health professionals and social workers showed little improvement. Vacancy rates across the entire Department remain above 20.0 percent.” [16]*

At its hearing, DOC also provided data on the positions with the highest vacancy rates [17] which include, teachers and health and behavioral health clinical staff.

These are staggering clinical staff vacancy rates. The survey results from incarcerated people indicate that, despite the DOC spending tens of millions on contract medical providers, the level of care is still woefully inadequate to ensure the health and wellbeing of incarcerated people. CCJRC is very concerned that for many people, the DOC is currently unable to provide the level of clinical care mandated by the 8th Amendment to the U.S. Constitution.



Even the DOC acknowledges that the severe vacancy rates for teachers, coupled with the practice of reassigning teachers to security posts, has negatively and directly impacted its ability to provide programming that is crucial to incarcerated people looking to reintegrate into society.[18]

For example, DOC is currently experiencing a loss of approximately 2,000 hours of programming opportunity every day and in facilities where teachers are reassigned to security posts, students may receive as little as 2-4 hours of instruction per week. [19]

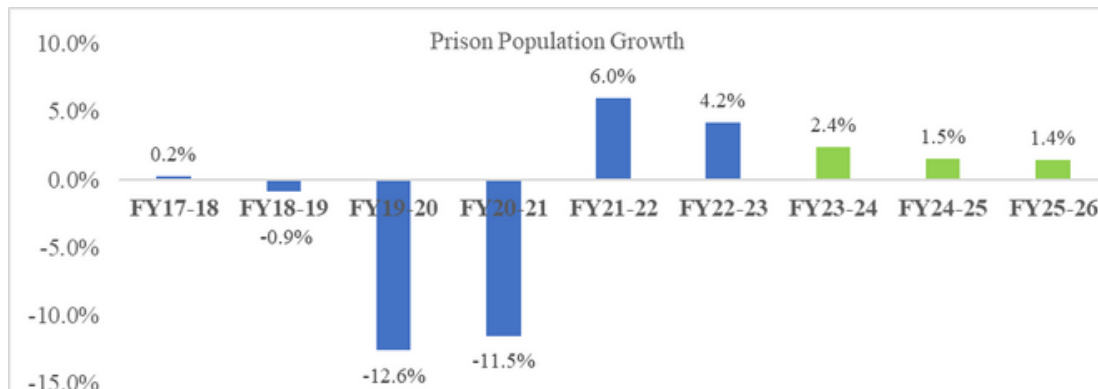
[12] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at slide 10.  
[13] DOC Monthly Population reports, Total Inmate Jurisdictional Population, (October 2022 and October 2023)  
[14] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at 10.  
[15] Ms. Ashley Clark, DOC budget director, in response to question from JBC member at the DOC budget hearing on December 14, 2023.  
[16] Joint Budget Committee, Staff Budget Briefing FY2024-25, Department of Corrections, (December 6, 2023) at 21.  
[17] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at slide 12.  
[18] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at 11.  
[19] Department of Corrections, Joint Budget Committee FY2024-2025 Budget Hearing, (December 14, 2023) at 11

# Prison Population Projections and the need to Manage the Prison Population

But there is a path forward. To effectively run a prison system, there must be alignment between the number of staff, prison beds, inmates, and services/programs. The General Assembly has focused on increasing the number of staff and beds but has neglected to be intentional at considering strategies that can safely reduce the prison population

Over the past fifteen years, the DOC population trend has been downward. [20] After substantial declines in the prison population during COVID, it was expected that the prison population would grow because of a return to normal court operations, aka “the COVID bump”.

But the recent adult prison population projections by Legislative Council indicate that the impact from COVID is largely over, and the growth in the adult prison population has slowed and is expected to continue to slow and stabilize over the next few years. [21]



That growth rate translates to a projected increase in the total inmate jurisdictional population of 403 (34 people a month) in FY23-24, and even further slowing of growth in the following years of 258 (22 people a month) and 239 (20 people a month) respectively. It's important to note that the total inmate jurisdiction, which is the figure that is included in the prison population projections, includes people that are in prison and also other settings, like community corrections. [22] So it should not be used to understand the number of prison beds potentially needed to accommodate growth.

There were many efficiencies that were utilized by DOC during COVID that no longer are operational. For example, expedited parole hearings for people admitted to prison that are already past their parole eligibility date. Reinstating this and other efficiencies can reduce the prison population. Another potential strategy is for DOC to make a referral to sober living in situations where people are terminated from community corrections, or violating parole conditions for drug use rather than returning them back to prison. These are just a couple of the modest ideas that could be instituted to have the cumulative effect of neutralizing growth in prison population.

## DOC Identified Impacts on Staff

The Colorado DOC identified numerous negative impacts on the current corrections work force because of the high staff vacancy levels including: [23]

### Increased Staff Stress and Burnout:

With fewer correctional officers available, those on duty must work longer hours and cover more shifts, leading to increased stress and burnout. This reduces staff morale and potentially compromises their ability to perform their duties effectively.

### Inmate and Staff Safety Concerns:

A shortage of correctional officers may lead to a less secure environment within correctional facilities. Lower staffing levels increase the risk of violence among inmates and against staff. Insufficient staffing makes maintaining order and promptly responding to emergencies more difficult.

[20] Legislative Council, Adult Prison Population and Parole Caseload Projections (December 2023) at 77.

[21] Legislative Council, Economic & Revenue Forecast, Adult Prison Population and Parole Caseload Projections (December 2023) at 81.

[22] On average, 92% of the male total inmate jurisdictional population is in a prison bed, and 84% of women. Colorado Department of Corrections, Department Priority: R-01 Prison Caseload (November 2023) at 9.

[23] Department of Corrections, [FY2024-2025 Joint Budget Committee Hearing](#), December 14, 2023 at page 4

**Impact on Rehabilitation/Education Programs:**

Staff shortages limit the availability of educational and rehabilitative programs for inmates. These programs are essential for reducing recidivism and helping inmates reintegrate into society upon release.

**Increased Overtime Costs:**

The Department relies on overtime for existing staff to compensate for the shortage, leading to increased labor costs.

**Recruitment and Retention Challenges:**

A persistent shortage of correctional officers makes it challenging to attract and retain qualified personnel, further exacerbating the problem.

**Decreased Accountability:**

Understaffing can make it difficult to conduct thorough inmate supervision, resulting in contraband entering facilities and acts of violence.

**Legal and Liability Concerns:**

Shortages may lead to legal and liability issues for the Department with an increase in the incidents of violence, a reduction in out-cell time, and required programming.

**Reduced Case Management services:**

Officer shortages have required the Department to post Case Management staff in security roles, which greatly impacts reentry planning, Colorado Transition Accountability Plan (CTAP), Assessment and Case Planning, Parole Board Planning, and inmate classifications.

The negative impacts staff shortages have for the existing corrections staff have been well documented. One Voice United, for instance, strives to bring the challenges experienced by corrections officers to the forefront of public awareness. They issued a report, ***I Am Not OK***, that draws on numerous academic studies to highlight the myriad of challenges faced by correctional officers, which are exacerbated when they are also facing understaffing issues.

*“There is no greater threat to the safety and security of a correctional institution or to the completion of the mission of corrections than the issue of staffing. Staffing impacts virtually every aspect of a correctional facility’s operations.” [24]*

*“Lack of staff is a major contributor to employee burnout and limits the capacity of officers and staff to contribute to a system where rehabilitation is an achievable goal. This shortage impacts everyone, from administrators to those in custody. Managers are under pressure to make decisions on the staffing numbers they can get by with. If someone gets injured or worse, they have to live with their decision. What programs can be cut or canceled? Is there a need to curtail visits and initiate other restrictions? These decisions impact the tension in the facility as well. Understaffing strains every aspect of a correctional system.” [25]*

[24] One Voice United, *I Am Not Ok*, (October 2021, at page 26) downloaded at <https://onevoiceunited.org/blog/i-am-not-okay-wellness-white-paper/>

[25] One Voice United, *I Am Not Ok*, (October 2021, at page 27) downloaded at <https://onevoiceunited.org/blog/i-am-not-okay-wellness-white-paper/>



# Conclusion, Recommendations and Methodology

## Conclusion

The data collected from more than 400 incarcerated people provides a clear, compelling, and worrying picture of what it's like for inmates in Colorado prisons. 93% of respondents say that their facility is understaffed. This lack of staff affects everything in their lives. There is more violence and more drug use, and it's harder to get quality medical, dental, and mental health help when they need it. The results clearly show that the DOC system is struggling to meet even the basic needs of the people in their care.

The mission of the DOC is to create “transformative opportunities for those under our supervision.” Sadly, this data reveals that because of a massive staffing shortage, Colorado inmates are not receiving the services necessary to meet their essential health and safety needs, let alone transformative opportunities to help them rehabilitate and reenter society. Addressing these challenges demands our urgent attention and a commitment to a meaningful exploration of innovative solutions.

Despite increasing the DOC budget by more than \$192 million in just the past two years to close the staff vacancy gap, the increase in the prison population is outpacing the increase in net new hires in DOC. Little tangible progress has been made. Efforts to reduce the prison population must also be part of the strategies utilized to bring the number of staff, prison beds, inmates, and services/programs into alignment.

## Recommendations

- The General Assembly should expand the current Prison Population Management Measures law to safely reduce the prison population. CCJRC is currently working with sponsors on a bill that will be introduced in January 2024.
- The General Assembly should create a DOC oversight commission to not only assist the DOC, but also to audit, report on, and address the unacceptable lack of access to medical and behavioral health care and rehabilitative opportunities for incarcerated people.
- DOC should expand the training opportunities for inmates so they can be utilized to increase the programmatic workforce as peer-to-peer recovery/mental health coaches, tutors, teachers, reentry planners, and vocational trainers. There is a lot of talent and experience among the incarcerated population that can and should be tapped to strengthen and improve access to rehabilitative, educational, and vocational programs.
- DOC should expand their partnerships with community nonprofit organizations to help them with the delivery of rehabilitative, behavioral health, and reentry programs inside prisons. CCJRC is aware of several Colorado-based nonprofit organizations that are very interested and available to be part of the solution.
- The General Assembly should request an economic study on the public sector workforce and the projected workforce size that is realistic for the DOC in the coming years, including the impending impact of approximately 25% of the current DOC staff level that is within five years of retirement eligibility.
- The General Assembly should request the DOC conduct and report on an internal staffing analysis, so policymakers have a better understanding of the staff that are needed and in what positions/roles.

## Methodology

In the fall of 2023, CCJRC mailed a paper survey to people incarcerated in Colorado to better understand how the DOC staffing shortage is affecting people in prison. CCJRC randomly selected 5% of the inmates incarcerated at each prison facility, ensuring there was racial/ethnic representation consistent with the general prison population. CCJRC also mailed a paper survey to people in prison that are on the CCJRC mailing list and any that wrote to us requesting that we mail them a survey. In total, 1,363 surveys were mailed and 403 were returned completed, for a 30% response rate. Responses from the paper survey were imported into SurveyMonkey for analysis. A copy of the survey instrument is available upon request.

---

Jason is the past President of the Colorado Public Health Association, a practitioner at the Public Health Institute at Denver Health, and an Adjunct Professor at the Graduate School of Social Work at the University of Denver. Formerly, Jason was a social worker and therapist who provided advocacy and clinical services to individuals from under resourced and over impacted communities.

**Jason Vitello**

MSW, CCJRC Manager of Equity  
and Community Development

[jason@ccjrc.org](mailto:jason@ccjrc.org)

---

Christie is the founder and current executive director of CCJRC and since the early 1990s has been working in criminal justice reform advocacy, community organizing, policy research, and lobbying. She is also a contributing author of CCJRC's publications, *Parenting from Prison: A Resource Guide for Incarcerated Parents in Colorado* and *Getting On After Getting Out: A Reentry Guide for Colorado*.

**Christie Donner**

CCJRC Executive Director

[christie@ccjrc.org](mailto:christie@ccjrc.org)

---

Andy Potter is the Founder of One Voice United and the Executive Director of the Michigan Corrections Organization (MCO). He is a nationally recognized leader in the labor and economic justice movements, with particular expertise in worker rights and leadership development. Andy began his career as a correctional officer for the Michigan Department of Corrections (MDOC) where he worked for nearly three decades.

**Andy Potter**


Founder One Voice United

[onevoiceunited.org](http://onevoiceunited.org)

---



 [www.ccjrc.org](http://www.ccjrc.org)

 303-825-0122

 821 22nd St, Denver CO 80205

  
THIRD STREET  
DESIGN

[thirdstreetdesignco@gmail.com](mailto:thirdstreetdesignco@gmail.com)