Diagnostics

OVERVIEW
- Identifies all pertinent needs of an inmate entering the prison system to hopefully meet those needs to prevent the inmate from returning to prison
- Conducted at Georgia Diagnostic and Classification Prison (male)

HISTORY
- GDCP opened in 1969 to complete the diagnostic process on adult male offenders
- Process was revised in 2009 to take approximately 15 work days
- Project is underway to further revise and shorten the diagnostic process to approximately 3-5 working days in order to more rapidly process male offenders and reduce the jail backlog

POPULATION
- Diagnostic inmates arrive from the county jails Monday through Thursday (approximately 100 to 125 per day with available bed space)
- All diagnostic inmates are considered to be close security until they complete the diagnostic process, at which time they will be classified minimum, medium or close security
- Diagnostic inmates transfer to other facilities on Tuesday and Thursday (approximately 150 to 250 per day with available bed space)
- Diagnostic inmates receive one 2-hour non-contact visitation period per week, Monday through Thursday (immediate family only) once they have been at the facility for 60 days
- Diagnostic visitation is conducted from 9-11 am and 2-4 pm
- Diagnostic inmates usually transfer prior to being eligible for visitation if bed space is available
- Upon transfer to their new facilities, Diagnostic inmates become permanent inmates, remaining at the new facility until they are released or administratively transferred due to medical issues, behavioral issues or program needs

PROCESS
- Inmates without disciplinary, medical or mental health issues usually complete the process in approximately 7-10 working days
- Staffing for the process includes Correctional Officers, Unit Managers, Doctors, Nurses, Counselors, Mental Health Counselors, Teachers, Psychologists, Psychiatrists and Clerical Support Staff
  - Inmates are screened for:
    - Security threat potential (based on crime, sentence, security threat group affiliation, escapes during all incarcerations and disciplinary histories for all incarcerations)
    - Medical condition
    - Mental health status
    - Educational level
    - Treatment programs needed or ordered by the court for the inmate to complete (i.e. Alcoholics Anonymous, Narcotics Anonymous, sexual offender counseling, substance abuse counseling)

Day 1
- Inmate received
  - Delouse
  - Shower
  - Shave (male inmates)
  - Haircut
  - Issue clothing and ID card
  - Inventory property and medication
- Medical screen
  - Vital signs
  - TB test and blood work
  - Medical review
- Mental health screen
- New arrival orientation
  - Inmate forms completion
  - PREA assessment
  - Housing/bed assignment

Day 2
- Medical
  - Fasting lab blood work
- Diagnostic testing and orientation
  - Initial interviews - inmate self-report and reading test
  - Culture Fair IQ Test
  - WRAT4 testing - spelling and math
  - Orientation videos - Right to Know and Prison Rape Elimination Act (PREA)

Days 3-4
- Medical - awaiting lab results
- Further mental health evaluations, if necessary

Day 5
- Medical
  - Physical examinations
  - Chest x-rays for positive TB results
• DNA/dental examinations
• Handwritten medical profile taken to medical records at end of day to be entered later

Day 6
• Medical
  • Profile entered

Day 7
• Parole
  • Interview: self-report
  • Personal History Statement may be entered this date or as late as one week later
• Diagnostic processing
  • Final interview
  • Security reviewed
  • Case plan completed
• Reentry completed by Diagnostic Counselor
• Diagnostic director review
  • Review and release inmate package (File sent to completed diagnostic queue for Central Office review. Inmate ready for transfer)

Day 8
• Pending review for transfer assignment by Central Office

Day 9
• Inmate transfers to permanent facility

Security Levels

OVERVIEW
• Offenders are assigned to a security level by the Next Generation Assessment (NGA) utilizing factors that include the offender’s sentence, nature of the crime, criminal history, history of violence, medical and treatment risks and needs.
• The classification levels are: close, medium and minimum.

CLOSE SECURITY
• Have staffing and physical security measures which are designed for the offenders listed below
• Offenders:
  • Are escape risks
  • Have assault histories
  • Are considered dangerous and may have detainers for other serious crimes on file. (A detainer is a request by another law enforcement agency to hold an offender pending other charges or actions.)
  • May never leave the prison
• Require supervision at all times by a Correctional Officer

MEDIUM SECURITY
• Have staffing and physical security measures which are designed for the offenders listed below
• Offenders:
  • Have no major adjustment problems
  • Many may work outside the prison fence, but must remain under constant supervision
  • Largest category of offenders

MINIMUM SECURITY
• Have staffing and physical security measures which are designed for the offenders listed below
• Offenders:
  • Tend to abide by prison regulations
  • Present a minimal risk of escape
  • Have been judged to be a minimal threat to the community
  • May work outside the fence under minimal supervision
  • Assigned to this level often have proven to be trustworthy, cooperative and have no alcohol/drug problems
  • Eligible for transitional centers

SPECIAL MANAGEMENT UNIT
• Established to protect staff, offenders and the public from offenders who commit or lead others to commit violent, disruptive, predatory or riotous actions or who otherwise pose a serious threat to the security of the institution
• Establishes an incentive program based on an increased level of privileges for demonstrated appropriate offender behavior and program compliance
• Consists of four separate phases
  • Phase 4 (Orientation)
  • Phase 3 (SMU Housing)
  • Phase 2 (SMU Step Down)
  • Phase 1 (General Population Step Down)
• Offender assigned to the SMU is given the opportunity to progress through the program’s phases based upon their behavior and ability to adjust under reduced levels of supervision.
• The goal is for an offender to make the appropriate adjustments so that they may be returned to a general population housing assignment.