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## Graying of SC prisons will cost state's taxpayers

In the past decade, the number of S.C. inmates age 55 and older has more than doubled

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Photo Tracy Glantz/The State

By Cassie Cope  
The State

COLOMBIA, S.C. — An inmate at Camille Griffin Graham Correctional Institution for women keeps a wheelchair tucked away in the corner of her small, cinder-block cell.

She has a walker, too.

The wheelchair and walker are just two of the signs of the exploding population of aging inmates in South Carolina's prisons.

Another sign? The dollar sign, as in the increasing cost that S.C. taxpayers will have to pay to care for those aging inmates.

In the past decade, the number of S.C. inmates age 55 and older has more than doubled, according to the S.C. Corrections Department. At the end of June, one in every 11 inmates was 55 or older.

The graying of the state's prison system will continue, experts warn. Barring changes in the state's parole system, they add that the aging prison population stands to become even more expensive for taxpayers to support.

"We've passed policies and laws that have dictated we want our prisons to become nursing homes," said Jon Ozmint, the Columbia lawyer who was head of the state's prison system under former Gov. Mark Sanford.

Those policies and laws come with a cost to taxpayers.

It costs about twice as much nationally to house a prisoner over 50 as it does the average prisoner, according to a 2012 study by the American Civil Liberties Union.

"Do we really want to keep them (inmates) in prison until they die?" Ozmint asked rhetorically. "It feels good. It makes a certain segment of society feel good.

"But it's a costly proposition."

S.C. prisons officials say they do not break out costs according to a prisoner's age. But there are indications that some of the higher costs of a graying prison system already are falling to the bottom line.

In 2003, the state of South Carolina's prison system spent an average of \$12,353 to incarcerate an inmate for a year.

By 2013, that cost had increased about 34 percent to \$16,542. When federal and other dollars are included, the cost per inmate was \$18,299 a year.

'Legislatures need to pay much more attention'

The aging of S.C. prisoners mirrors the graying of the state's population.

In 2000, there were 485,333 S.C. residents age 65 and older, according to the U.S. Census. By 2010, that number had increased about 30 percent.

Today, the oldest inmate at Camille Graham Correctional Institution is 70 years old.

A few of the women at the prison, located off Broad River Road, have been locked up for more than 25 years. One inmate has been incarcerated for almost 37 years.

But, in one key way, Graham Correctional is not representative of the state's prison population: Its inmates are women. And as the state's prison system grays, its senior-citizen inmates overwhelmingly stand to be men.

In 2013, 10 percent of the state's prisoners – or 2,263 inmates – were serving sentences that called on them to live out their lives in prison or be executed. Almost all of those 2,263 inmates were men. Less than 90 were women.

Still, Marilyn Griffin, an associate warden at Graham Correctional who began working in corrections in the late '80s, says she has seen the impact of aging inmates on the state's prison system. Inmates who once were rowdy, for example, now are annoyed by noise, she said.

Taxpayers are seeing the impact of aging prisoners as well – through higher costs, says a University of South Carolina professor.

Those costs largely are due to the health issues faced by elderly prisoners, said University of South Carolina professor John Burrow, adding those issues can be more pronounced among prisoners, who age prematurely because they live in a high-stress environment.

Those health issues can include arthritis, blindness, ability issues, cancer and other illnesses that prisons are not equipped to deal with, Burrow said.

"(Aging prisoners) is an issue that many prisons and legislatures need to pay much more attention to," said Burrow, who has a law degree and doctorate degree in criminal justice. "We really do need to think about why is it that we are keeping people who are in their 50s and 60s – nonviolent offenders – locked up for such long periods of time."

The aging prison population has been driven by the war on drugs and tough-on-crime sentences, said Ozmint, who led S.C. prisons for eight years.

"Feel-good legislation" – including truth-in-sentencing – essentially did away with parole, keeping inmates in prison until they are old, he said. As a result, many elderly and infirm inmates are not eligible for parole.

Medical parole is an option for elderly prisoners who were convicted of a parole-eligible offense, said Pete O'Boyle, spokesman for the state Department of Probation, Parole and Pardon Services.

Since 2010, however, no requests for medical parole have been granted in South Carolina.

Of 13 requests, 10 were deemed eligible for a hearing, O'Boyle said. Of those 10, seven inmates were turned down by the parole board. Three inmates were granted conditional parole, but two completed their sentences before they were paroled. The third was sent back to prison for another offense.

Historically, winning parole has been difficult in South Carolina in any event, says Ozmint.

That is because the state's parole board has given great weight to the understandable anger of crime victims in deciding whether to grant parole, the former prisons chief says. However, the current parole board has come a long way toward making less emotional decisions, based on objective risk factors and public safety, he added.

Long term, the solution to costly aging prisoners will have to come from the Legislature and include expanding parole opportunities, Ozmint said.

State Sen. Mike Fair, R-Greenville, who chairs the Senate's Corrections and Penology Committee, said he would consider drafting legislation to allow the parole board to release elderly prisoners. "You are dealing with human beings who mess up and, maybe, have paid their debt."

While lawmakers cannot dictate the parole board's actions, they could provide inmates with the opportunity to be released, Fair added.

But state Sen. Gerald Malloy, the Darlington Democrat who has been active in proposing prison reforms, sees no appetite in South Carolina to pass retroactive legislation to undo no-parole laws.

"I don't think you can legislate getting seniors out of the prison population when that crime was committed a long time ago," said Malloy.

'Balancing absorbing the cost versus public safety'

Ozmint expects the prison system's elderly population will continue to grow, creating the need for more geriatric facilities, which are more expensive to operate than regular prisons.

Those rising health-care costs directly will impact taxpayers, he adds.

A solution could be found in turning to the private sector to handle elderly prisoners, Ozmint said.

But that assumes for-profit prisons can operate more cheaply the state's notoriously skinflint prisons.

Corrections Department director Bryan Stirling, who took the post heading S.C. prisons in October, says telemedicine is a more cost-effective option to provide medical services.

Now, inmates sometimes are taken off-site for doctor's visits or other health-care needs. Multiple correctional officers must travel with them, which is expensive, Stirling said.

If telemedicine is used, an off-site doctor could care for an inmate via a video conference. But, problematically, that would require transferring inmates' medical records electronically, Stirling said.

Another alternative would be having more doctors on call to visit prisons, Stirling said. But, he added that would carry an upfront cost.

For the moment, at least, a drop in the number of state prisoners has freed up resources that could be used to offset to increased health-care costs.

The number of inmates in S.C. prisons has been decreasing steadily since sentencing reform, led by Malloy, was passed in 2010. As of June 30, the state had 21,904 prisoners, down from 24,883 five years earlier, according to the Corrections Department.

That reform increased sentences for violent criminals but allowed some nonviolent offenders to avoid prison.

"Any time someone is not incarcerated, it's a savings for the state," Stirling said. "It's a tremendous savings for the state."

Corrections also is trying to save money by training inmates to assist with the hospice care of the elderly inmates. Corrections trains 20 to 25 inmates a year to care for the elderly, said agency spokesperson Stephanie Givens.

Terminally ill inmates also can be granted medical furloughs at the discretion of the Corrections Department director.

Strict criteria must be met, including having two doctors determine an inmate only has a limited amount of time left to live. Also, the inmate cannot pose a public-safety threat. Also, if release is granted, the inmate is confined to a specific location. The institution the inmate was released from is responsible for checking on the inmate. In addition, the Corrections Department notifies local and state law enforcement officials.

In 2010, seven medical furloughs were approved, according to the Corrections Department. Thus far this year, one has been approved.

Public safety is the most important consideration before releasing an inmate, Stirling said.

"Balancing absorbing the cost versus public safety is most important, and public safety is going to win out every time."

**Correctional Healthcare**

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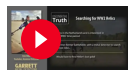
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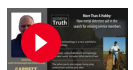
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### The basics: Medications for opioid use disorder (MOUD) programs in jails

How can jails effectively address opioid use disorder (OUD), while maintaining the safety of the facility and ensuring protection of inmates' constitutional rights?

**Contraband: Drugs**

### 'They're inept': Sheriff calls for overhaul of Calif. jail's healthcare system

6 people, employed by the Sacramento County Jail's healthcare contractor, have been arrested for smuggling drugs into the jail

**Drug Issues**

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