

RETURN TO	Bureau of Justice Statistics Corrections Statistics Program 810 Seventh Street, NW, Washington, DC 20531		FORM CJ-5B (09-16-04)		2004 ANNUAL SURVEY OF JAILS IN INDIAN COUNTRY		U.S. DEPARTMENT OF JUSTICE BUREAU OF JUSTICE STATISTICS	
DATA SUPPLIED BY								
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Due to continuing mail delivery problems since Sept. 11, 2001 –
PLEASE FAX YOUR FORM
Be sure to include all 6 pages.

GENERAL INFORMATION

- If you have any questions about completing this form, please call **Todd Minton** at **(202) 305-9630**.
- Please **FAX** your completed questionnaire to the Bureau of Justice Statistics at **(202) 514-1757** before **October 29, 2004**.
- Please retain a copy of the completed form for your records.

Who does this survey cover?

All confinement facilities, including detention centers, jails, and other correctional facilities operated by tribal authorities or the Bureau of Indian Affairs.

- INCLUDE special jail facilities (e.g., medical/treatment/release centers, halfway houses, and work farms).

All persons under your jail supervision.

- INCLUDE all confined adults and juveniles (i.e., persons under age 18).
- INCLUDE persons in special programs administered by your jail/correctional facility (e.g., electronic monitoring, house arrest, community service, day reporting, boot camps, work release, weekenders, and other alternatives to incarceration).
- INCLUDE persons on transfer to treatment facilities but who remain under your legal jurisdiction.
- INCLUDE persons held for other jurisdictions.

What data are to be excluded from this survey?

- EXCLUDE inmates on AWOL, escape, or long-term transfer to other jurisdictions.

Burden statement

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 1 1/4 hours per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531.

INSTRUCTIONS

- If the answer to a question is "not available" or "unknown," write "DK" in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "zero," write "0" in the space provided.
- When exact numeric answers are not available, provide estimates and mark (x) in the box beside each figure that is estimated. For example 1,234 (x)

SECTION I — INMATE COUNTS AND MOVEMENTS

1. On June 30, 2004, how many persons were —

a. CONFINED in this facility? _____ ☐

- INCLUDE persons on transfer to treatment facilities but who remain under your jurisdiction.
- INCLUDE persons held for other jurisdictions.
- EXCLUDE inmates on AWOL escape, or long-term transfer to other jurisdictions.

b. Under jail supervision but NOT CONFINED?

- INCLUDE all persons in community-based programs run by this facility (e.g., electronic monitoring, house arrest, community service, day reporting, work programs, boot camps, and other programs).
- EXCLUDE inmates on weekend programs. A weekend program allows offenders to serve their sentences of confinement on the weekend (e.g., Friday–Sunday).

_____ ☐c. Total (Sum of items 1a and 1b) _____ ☐

2. On the weekend prior to June 30, 2004, did this facility have a weekend program?

- A weekend program allows offenders to serve their sentences of confinement on the weekend (e.g., Friday–Sunday).

1 ☐ Yes — How many inmates participated? _____ ☐2 ☐ No

3. On June 30, 2004, how many persons CONFINED in this facility were —

a. Males age 18 or older ☐b. Females age 18 or older ☐c. Males under age 18 ☐d. Females under age 18 ☐e. TOTAL (Sum of items 3a to 3d should equal item 1a) ☐

4. Of all male and female juveniles CONFINED in this facility on June 30, 2004, how many were tried or awaiting trial in ADULT court?

Number of juveniles (under age 18) held as adults _____ ☐

5. Of all persons CONFINED in this facility on June 30, 2004, how many were —

- For persons with more than one status, report the status with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.

a. Convicted ☐b. Unconvicted ☐c. TOTAL (Sum of items 5a and 5b should equal item 1a) ☐

6. On June 30, 2004, how many persons CONFINED in this facility, regardless of conviction status, had an offense type of —

- For persons with more than one offense, report the most serious type of offense.

a. Felony ☐b. Misdemeanor ☐c. Other — Specify ☐d. TOTAL (Sum of items 6a to 6c should equal item 1a) ☐

7. On June 30, 2004, how many persons CONFINED in this facility, regardless of conviction status, had as their most serious offense —

a. Domestic violence offense ☐

- INCLUDE assault, abuse, cruelty, or threat to a spouse, intimate, or a dependent child.

b. Assault ☐

- INCLUDE aggravated and simple assault.
- EXCLUDE domestic violence offenses and rape/sexual assault.

c. Rape/sexual assault ☐

- EXCLUDE domestic violence offenses and assaults reported in item 7b.

d. Other violent offenses ☐

- EXCLUDE domestic violence offenses, assaults, and rape/sexual assault.

e. A drug law violation ☐

- INCLUDE offenses relating to the unlawful possession, distribution, sale, use, growing, or manufacturing of narcotic drugs.

f. Driving while intoxicated or driving under the influence of alcohol or drugs ☐

g. Other offenses ☐

h. TOTAL (*Sum of items 7a to 7g should equal item 1a*) ☐

8. During the 30 day period from June 1, 2004, to June 30, 2004, how many persons were new admissions to this jail facility?

- INCLUDE persons officially booked into and housed in your facility by formal legal document or by the authority of the courts or some other official agency.
- EXCLUDE returns from escape, work release, medical appointments/treatment facilities, bail and court appearances.

New admissions ☐

9. During the 30 day period from June 1, 2004, to June 30, 2004 —

a. What was the average daily population of your facility?

- To calculate the average daily population, add the number of persons confined in your facility for each day during the period June 1-30, 2004, and divide the results by 30.

Average daily population ☐

b. On what day did this facility hold the greatest number of persons?

June ____, 2004

c. How many persons were CONFINED on that day?

Number that day ☐

10. Between July 2003 and May 2004, how many persons were confined on the last weekday of each month —

Number of inmates

July 31, 2003 ☐

August 29 ☐

September 30 ☐

October 31 ☐

November 28 ☐

December 31 ☐

January 30, 2004 ☐

February 27 ☐

March 31 ☐

April 30 ☐

May 31 ☐

11. Between July 1, 2003, and June 30, 2004 —

a. How many persons died while CONFINED in this facility?

- Enter 0 if no deaths.

Number of deaths ☐

b. Of those who died, how many committed suicide?

Number of completed suicides ☐

c. How many persons ATTEMPTED suicide while CONFINED in this facility?

Number of attempted suicides ☐

SECTION II — POPULATION SUPERVISED IN THE COMMUNITY

COMPLETE ITEMS 12 and 13 IF THIS FACILITY SUPERVISES PERSONS IN THE COMMUNITY, OTHERWISE GO TO ITEM 14

12. On June 30, 2004, how many persons under your jail supervision who were NOT CONFINED were —

- EXCLUDE inmates on weekend programs.

a. Convicted ☐

b. Unconvicted ☐

c. TOTAL (Sum of items 12a and 12b should equal item 1b) ☐

13. On June 30, 2004, how many persons under your supervision who were NOT CONFINED participated in —

- EXCLUDE inmates on weekend programs.

a. Electronic monitoring ☐

b. Home detention without electronic monitoring ☐

c. Community service ☐

d. Day reporting ☐

e. Other pretrial supervision ☐

f. Other alternatives to incarceration ☐

g. TOTAL (Sum of items 13a to 13f should equal item 1b) ☐

SECTION III — FACILITY OPERATIONS

14. On June 30, 2004, what was the total rated capacity of this facility?

- EXCLUDE temporary spaces such as tents, trailers, and other temporary space.
- Rated capacity is the maximum number of beds or inmates assigned by a rating official to this facility.
- If rated capacity is not available, estimate by using the design capacity and mark the box.

Rated capacity ☐

15. On June 30, 2004, how many inmates were held in —

a. Single occupied cells or rooms ☐ Inmates

b. Multiple occupied units originally designed for single occupancy ☐ Inmates

c. Multiple occupied units designed for multiple occupancy ☐ Inmates

d. Areas not originally designed for confinement

- INCLUDE hallways, recreation areas, storage rooms, and other common spaces ☐ Inmates

e. Separate holding areas or other temporary detention units ☐ Inmates

f. Other temporary space

- INCLUDE tents, trailers, and other temporary space ☐ Inmates

g. Other — Specify ☐ Inmates

h. Total (Sum of items 15a to 15g should equal item 1a) ☐ Inmates

16a. Are there any DEFINITE plans to add on to this facility, build a new facility, close this facility, or renovate the existing facility between July 1, 2004, and June 30, 2007?

- Report all plans that have received final approval.

Mark (x) all that apply.

1 ☐ Add on to existing facility

2 ☐ Build a new facility

3 ☐ Close this facility

4 ☐ Renovate existing space

5 ☐ No change planned — **Go to item 18**

b. What is the source(s) of funding for your plans?

Mark (x) all that apply.

1 ☐ Tribal

2 ☐ Federal Government

3 ☐ Other — Specify

4 ☐ Funding not yet approved

17. What will be the NET EFFECT of these changes?Mark (x) *ONLY* one box.

- 1 ☐ No change in bed capacity ☐
- 2 ☐ An increase in capacity of _____ beds ☐
- 3 ☐ A decrease in capacity of _____ beds ☐

18. On June 30, 2004, was this facility under a Tribal, State, or Federal COURT ORDER or CONSENT DECREE —**a. To limit the number of persons it can house?**

- 1 ☐ Yes — What is the maximum number of persons this facility is allowed to house? _____ ☐
- 2 ☐ No

b. For conditions of confinement?

- 1 ☐ Yes — *Specify* _____
- 2 ☐ No

SECTION IV — FACILITY STAFF**19. On June 30, 2004, how many male and female CORRECTIONAL STAFF employed by this facility were —**

- INCLUDE full-time and part-time staff.
- EXCLUDE community volunteers and unpaid interns.

Male Female

a. Payroll staff

- INCLUDE tribal and BIA direct funded staff (e.g., 638 contract and self-governance) . . . ☐ ☐

b. Nonpayroll staff employed by other tribal/governmental agencies

- INCLUDE staff provided by IHS, education, or other human service departments or courts . . . ☐ ☐

c. Contract nonpayroll staff

- INCLUDE staff paid through private service contracts (e.g., food service, health care, maintenance, transportation) . . . ☐ ☐

d. Total staff (Sum of items 19a to 19c) . . . ☐ ☐**20. Of the total number of CORRECTIONAL employees on June 30, 2004, how many were in —**

- Count each employee only once.

a. Administration

- INCLUDE the jail administrators, or sheriff, assistants, and other personnel who work in an administrative capacity more than 50% of the time. _____ ☐

b. Jail operations

- INCLUDE correctional officers, guards, and other staff who spend more than 50% of their time supervising inmates _____ ☐

c. Educational staff

- INCLUDE academic and vocational staff. _____ ☐

d. Technical/professional staff

- INCLUDE counselors, psychiatrists, psychologists, social workers, dentists, medical staff, and other professional staff. _____ ☐
- INCLUDE dispatchers with no inmate supervision duties. _____ ☐

e. Clerical, maintenance, and food service**f. Other — *Specify* _____****g. TOTAL (Sum of items 20a to 20f should equal item 19d) . . . ☐****21. Of the total number of JAIL OPERATION employees reported in item 20b, how many had received the basic detention officer certification?**Number _____ ☐**22. Of the total number of JAIL OPERATION employees reported in item 20b, how many had received 40 hours of in-service training?**Number _____ ☐

23. Between July 1, 2003, and June 30, 2004 —

- INCLUDE full-time and part-time payroll staff.
- EXCLUDE nonpayroll staff.

a. How many CORRECTIONAL STAFF did you HIRE for employment in this facility?

- INCLUDE new, rehired, or recalled from layoff; permanent, short-term, or seasonal.

Number of hires _____ ☐**b. How many CORRECTIONAL STAFF were separated from employment in this facility?**

- INCLUDE quits, layoffs, discharges, retirements, deaths, transfers, and other separations.

Number of separations _____ ☐**24. On June 30, 2004, how many specific CORRECTIONAL STAFF positions were vacant in this facility?**Number of vacancies _____ ☐**NOTES**