Fact Sheet:

Re-Imagining MCI-Framingham, the Nation's Oldest Operating Women's Prison

Introduction

The need to transform MCI-Framingham has been recognized across multiple Administrations. In response, the Executive Office of Public Safety and Security (EOPSS), the Department of Correction (DOC), and the Division of Capital Asset Management and Maintenance (DCAMM) have worked in close partnership to identify a solution that balances public safety, fiscal responsibility, and a commitment to reform

Under the leadership of the Healey-Driscoll Administration, the team has identified renovation of the existing MCI-Framingham facility as the path forward. This will not be a new structure. The plan envisions a recovery-focused environment that includes community-oriented housing units, a state-of-the-art medical and mental health treatment center, and expanded spaces for programming and support services.

This project is still in the planning stages. Over the next year, this vision will move through the formal study and design phases, and include robust community engagement, particularly with currently incarcerated women, DOC staff, local officials, members of the Legislature, and other key stakeholders.

Overarching Project Goal

The renovation of MCI-Framingham is part of a comprehensive strategy to transform the nation's oldest operating women's prison into a modern and sustainable facility that supports rehabilitation and promotes public safety.

The primary objective is to align the physical environment with Massachusetts' commitment to rehabilitation and public safety. By designing an environment that supports the well-being of incarcerated individuals and staff alike, the state aims to improve outcomes, reduce recidivism, and promote safer, more successful reentry into the community. Most of the incarcerated population is medium custody, and 42% are within five years of release—underscoring the urgent need for rehabilitative programming that prepares individuals for successful reentry.

Planned improvements will transform the 150-year-old site into a recovery-focused environment featuring community-oriented housing units, a modern medical and mental health treatment center, enhanced program and support spaces, and a fully electrified, energy-efficient infrastructure.

In addition, the phased redevelopment strategy will significantly downsize the facility's footprint from 260,000 to 200,000 square feet and permanently decrease bed capacity.

Why the Current Building is Inadequate

The current facility is severely outdated, with deteriorating housing units from the 1960s and a program building from 1877 that lacks elevators, making critical spaces inaccessible to individuals with mobility impairments. Inadequate infrastructure, poor climate control, and aging medical and mental health areas hinder rehabilitation efforts and make it difficult to deliver modern, effective care.

A 2022 independent study concluded that MCI-Framingham is "oversized, physically outdated for its rehabilitative mission, and requires significant capital investment."

The study further determined that the facility is currently unable to meet the needs of women due to the infrastructure's physical condition and a layout that is not conducive to a rehabilitative environment.

Evidence shows that rehabilitative-focused environments reduce recidivism. Renovating this facility will improve conditions for programming, mental health treatment, education, and workforce readiness, which are key factors in lowering reoffending rates and enhancing community safety.

What the Renovation Will Accomplish

The newly renovated space is intended to create a more healing environment designed to better promote individual well-being, recovery and self-sufficiency and support a pathway to successful reintegration into the community post-release.

The renovations will include:

- Building smaller, community-style housing units in a campus-like setting.
- Creating a modern medical and mental health center to provide trauma-informed care and support the complex needs of residents, with dedicated workspaces for health professionals.
- Offering full health services, private counseling rooms, and crisis support in a space that protects privacy and promotes dignity and healing.
- Improving areas for education, job training, recreation, religious services, and everyday needs like dining and laundry.
- Upgrading old systems with energy-efficient, all-electric technology to reduce the facility's carbon footprint.
- Installing air conditioning and climate-controlled systems, which help to mitigate heat-related health risks for incarcerated individuals, particularly those with chronic medical conditions, age-related vulnerabilities, or disabilities.

Area	**Renovation Goals**
Housing	• The three cottages slated for renovation will eventually provide additional flexibility within our classification system with options for both single and double cell occupancy. • One cottage will house the NEADS dog handler program with rooms that are better equipped for dog kennels and training space, inclusive of ease of access to exterior dog walking areas. • The new design is less institutional, inclusive of improved appearance, layout, furnishings and colors. New bathroom fixtures will afford a more traditional experience and enhance privacy. • Congregate spaces will offer a more college dormitory–like experience, fostering community and connection while also serving as venues for cottage-specific programming and events. • The renovated cottages can be specialized as Living Learning Communities, a model already successfully implemented at two men's facilities.

Area	Renovation Goals
Health Services Building	• A centralized Health Services Unit with modern, trauma-informed spaces designed to support individuals with significant medical, mental health, or substance use needs—promoting recovery, dignity, and confidentiality. • Enhanced facilities for healthcare professionals, including outpatient clinic space, an inpatient infirmary, an intensive mental health treatment unit, and a substance use detoxification and treatment unit. • Safe, suicide-resistant treatment rooms for individuals at imminent risk of self-harm or experiencing a mental health crisis. • Improved access to outdoor green spaces for fresh air and recreation, supporting individuals in both temporary and long-term Health Services Unit placements.

Area	Renovation Goals
New Programs Building	• Elevator access will ensure accessibility to all areas offering program services. A modern gymnasium to support daily exercise, and trauma-informed activities such as yoga, and facility-wide events like reentry fairs. • Updated classroom spaces for GED/HiSET prep, Adult Basic Education, and post-secondary programs, with dedicated areas for college partners offering certificates, associate, and bachelor's degrees. • State-of-the-art vocational training areas to support existing programs and expand opportunities in trades and skilled vocations for incarcerated women. • Expanded space for practical life skills development for the entire population, including the PEACE Unit for emerging adults.

Area	Renovation Goals
Staff Wellbeing	• Enhanced spaces for incarcerated individuals contribute to a healthier environment for staff.

	• Expanded office space for teachers, correctional staff, and vocational educators, equipped with modern technology. • Distributed correctional staff workstations throughout the Health Services Building to support a more functional and supportive work environment. • Upgraded staff restrooms in each new building, with potential for expanded wellness rooms offering computer and phone access for offsite connectivity.

Why Renovate as Opposed to Relocate

The renovation of this correctional facility represents a pragmatic approach that balances public safety, fiscal responsibility and reform-driven priorities. It reflects a commitment to improving conditions and functionality in the near term, while avoiding the higher costs and complexity of building a new facility or relocating to another building.

Where structural integrity allows, reusing existing infrastructure (foundations, walls, utilities, secure perimeters) will minimize taxpayer burden and lessen embodied carbon impacts. The oldest building will be completely taken out of service and separated from the complex.

Maintaining partial operations during a phased renovation can be more cost-effective and less disruptive than relocating the population and staff to temporary or distant sites. Building a new facility would be significantly more expensive than renovating the existing facility.

Project Investment

With an anticipated total project investment of $360 million, the phased redevelopment strategy will enhance the health and safety of all who live and work at the facility.

Under the guidance of DCAMM, the architectural firm HDR has been hired to develop the renovation plan. The initial phase of the work is supported by $20.5 million in FY26-27 in state capital funding. This initial phase begins with schematic design to verify program, scope, budget and schedule and will take a minimum of 12 months to complete. During the schematic design process, work will also begin to engage a construction manager for the project. The construction manager will focus on cost management, construction logistics and mitigating construction impacts to the women and staff on site.

As opposed to previous project estimates, the current $360 million estimate reflects planning, design and renovation for the entire project, which will transform the outdated structures with therapeutic and modernized facilities.

The current plan reflects a forward-looking investment to transform MCI-Framingham into a facility that meets today's standards for safety, rehabilitation, and dignity.

Impact on the Current Incarcerated Population

Despite the aging infrastructure at MCI-Framingham, the DOC continues to deliver an extraordinary array of rehabilitative programing that underscores its commitment to public safety and successful reentry. The continuum of services includes substance use recovery and trauma-informed care as well as academic and vocational education, reentry preparation, parenting support and innovative tablet-based learning.

To ensure safety and continuity of care, phased construction will minimize disruption to these services. Although temporary relocations may occur, every effort will be made to ensure access to essential services and family contact during the process.

Impact on the Facility Staff

The changes will create a safer and more secure facility with fewer staff vacancies. Staff will have a better working environment with more adequate office space, shared space, training space, storage space, breakrooms and improved facilities for staff, all of which lead to a healthier work environment and better morale.

Next Steps and Stakeholder Engagement Opportunities

At the direction of Governor Healey, EOPSS and DCAMM have been tasked with completing this project as expeditiously as possible. In alignment with the administration's directive, the agencies are working in close collaboration to ensure the renovation of MCI-Framingham is advanced efficiently and effectively.

In accordance with M.G.L. Chapter 7C, Section 59, HDR, the architectural firm contracted by DCAMM will commence a study to assess scope, site conditions and needs such as demolition; programming (operations); utilization (space use frequency and occupancy,); budget; and schedule. Grounded in the principles of transparency and inclusion, the DOC and DCAMM are committed to engaging those most impacted by the correctional environment, beginning with incarcerated individuals and staff. DOC and DCAMM will work together to thoughtfully engage and solicit feedback that will contribute to decision-making for this investment, ensuring the resulting renovations establish safe, rehabilitative spaces.

The administration is committed to collaborating with stakeholders, including currently incarcerated women, DOC staff, local officials, members of the legislature, and other key stakeholders.

In Conclusion

Renovating this facility is an investment in improving lives, public safety and better outcomes. This project promotes safer communities by supporting the rehabilitation and reintegration of those in the DOC's care. By creating accessible, trauma-informed spaces that prioritize health, education, and dignity, the project advances long-term goals to reduce recidivism and promote successful reentry into the community.

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