

D R A F T D O C U M E N T



Policy Statements &
Recommendations

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D R A F T D O C U M E N T

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The Oklahoma Prisoner Reentry Initiative Model

The **VISION** of the Oklahoma Prisoner Reentry Initiative is that every offender released from prison will have the tools needed to succeed in the community.

The **MISSION** of the Oklahoma Prisoner Reentry Initiative is to reduce crime by implementing a seamless plan of services and supervision developed with each offender—delivered through state and local collaboration—from the time of their entry to prison through their transition, reintegration, and aftercare in the community.

The **GOALS** of the Oklahoma Prisoner Reentry Initiative are to:

- **Promote public safety** by reducing the threat of harm to persons and their property by released offenders in the communities to which those offenders return.
- **Increase success rates of offenders** who transition from prison by fostering effective risk management and treatment programming, offender accountability, and community and victim participation.

Building Safer Neighborhoods & Better Citizens: A Comprehensive Approach

Oklahoma is committed to the development and full implementation of a comprehensive model of offender reentry planning. The OPRI Model:

- Begins with the three-phase re-entry approach of the Department of Justice's Serious and Violent Offender Reentry Initiative (SVORI).
- Further delineates the transition process by adding the seven decision points of the National Institute of Corrections' Transition from Prison to Community Initiative (TPCI) model.
- Incorporated into its approach the policy statements and recommendations from the Report of the Reentry Policy Council that is coordinated by the Council of State Governments.

In this way, the OPRI represents a synergistic model for prisoner re-entry that is deeply influenced by criminal justice research documenting how to improve the success of offenders who are released from the ODOC.

Oklahoma is poised for success combining a strong commitment from the ODOC, collateral stakeholders, and a powerful policy framework. The challenge faced is the statewide implementation on a scale of 8,000 offenders per year who are transitioning from prison.

The Three-Phase, Seven-Decision-Point OPRI Model

The OPRI Model involves improved decision making at seven critical decision points in the three phases of the custody, release, and community supervision/discharge process.

PHASE ONE—GETTING READY

The **institutional phase** describes the details of events and responsibilities which occur during the offender's imprisonment from admission until the point of the parole or discharge and involves the first two major decision points:

1. **Assessment and classification:** Measuring the offender's risks, needs, and strengths.
2. **Inmate programming:** Assignments to reduce risk, address need, and build on strengths.

PHASE TWO—GOING HOME

The **transition to the community or re-entry phase** begins approximately six months before the offender's targeted release date. In this phase, highly specific re-entry plans are organized that address housing, employment, and services to address addiction and mental illness. Phase Two involves the next two major decision points:

3. **Inmate release preparation:** Developing a strong, public-safety-conscious reentry plan.
4. **Release decision making:** Improving parole release guidelines and transition of other discharging offenders.

PHASE THREE—STAYING HOME

The **community and discharge phase** begins when the offender is released from prison and continues until discharge from community supervision. In this phase, it is the responsibility of the former inmate, human services providers, and the offender's network of community supports and mentors to assure continued success. Phase Three involves the final three major decision points of the transition process:

5. **Supervision and services:** Providing flexible and firm supervision and services.
6. **Revocation decision making:** Using graduated sanctions to respond to behavior.
7. **Discharge and aftercare:** Determining community responsibility to "take over" the case.

Case Management and Reentry Accountability Plans

The foundation of the OPRI Model is the development and use of the Reentry Plan (RP) at four critical points in the offender transition process that succinctly describe for the offender, the staff, and the community exactly what is expected for offender success. The RP, which consist of summaries of the offender's case plan at critical junctures in the transition process, are prepared with each inmate at prison intake, at the point of the release consideration, when the offender returns to the community, and when the offender is to be discharged from community supervision. RPs are concise guides for the offenders and staff:

- **RP1:** The expectations for the prison term that will help inmates prepare for release.
- **RP2:** The terms and conditions of offender release to communities.
- **RP3:** The supervision and services offenders will experience in the community.
- **RP4:** The elements of the Case Management Plan for eventual discharge from supervision.

The Reentry Plan

The Reentry Plan (RP) integrates offenders' transition from prisons to communities by spanning phases in the transition process and agency boundaries. RP is a collaborative product involving facility staff, the offender, the releasing authority, community supervision officers, human services providers (public and/or private), victims, and neighborhood and community organizations. RP describes actions that must occur to prepare individual offenders for release from prison, defines terms and conditions of their release to communities, specifies the supervision and services they will experience in the community, and describes their eventual discharge to aftercare upon successful completion of supervision. The objective of the RP is to increase both overall community protection by lowering risk to persons and property and by increasing individual offender's prospects for successful return to and self-sufficiency in the community.

The RP process begins soon after offenders enter prison and continues during their terms of confinement, through their release from prison, and continues after their discharge from supervision as an evolving framework for aftercare provided by human service agencies or other means of self-help and support. **At each step along this continuum RP is administered by a Transition Team, whose members include prison staff, supervision staff, and community agencies and service providers.** The membership of the Transition Management Team and their respective roles and responsibilities will change over time. During the institutional phase prison staff may lead the team. During the reentry and community supervision phase probation and parole officers may lead the team. During the reintegration phase human services agencies or community services providers may lead the team. After offenders have successfully completed community supervision, their RP may continue and be managed by staff of human services agencies, if the former offender chooses to continue to seek and receive services or

support. At each stage in the process Team members will use a case management model to monitor progress in implementing the plan.

RP reduces uncertainty in terms of release dates and actions (and timing of actions) that need to be taken by inmates, prison staff, the releasing authority, community supervision staff, and partnering agencies. Increased certainty will motivate inmates to participate in the process and to become engaged in fulfilling their responsibilities and will ensure that all parties are held accountable for timely performance of their respective responsibilities.

RP Process Principles

The RP process is built on the following principles:

1. The RP process starts during an offender's classification soon after their admission to prison and continues through their ultimate discharge from community supervision.
2. RPs define programs or interventions to modify individual offender's dynamic risk factors that were identified in a systematic assessment process (LSI-R).
3. RPs are sensitive to the requirements of public safety, and to the rational timing and availability of services. In an ideal system, every inmate would have access to programs and services to modify dynamic risk factors. In a system constrained by finite resources, officials need to rationally allocate access to services and resources, using risk management strategies as the basis for that allocation.
4. Appropriate partners should participate in the planning and implementation of individual offender's RPs. These include the offender, prison staff, releasing authorities, supervision authorities, victims, offenders' families and significant others, human service agencies, and volunteer and faith-based organizations.
5. Individual RPs delineate the responsibilities of offenders, correctional agencies and system partners in the creation, modification, and effective application of the plans, and holds them accountable for performance of those responsibilities.
6. RPs provide a long-term road map to achieve continuity in the delivery of treatments and services, and in the sharing of requisite information, both over time and across and between agencies.
7. A case management process is used to arrange, advocate, coordinate, and monitor the delivery of a package of services needed to meet the specific offender's needs. During the prison portion of RP, prison staff functions as case managers. As offenders prepare for release and adjust to community supervision, their probation and parole officer will become the case manager. When they are successfully discharged from supervision, a staff member from a human service agency (or other community partner) may assume case management responsibilities for former offenders who choose to seek services or support.

Reentry Plan

OPRI Process Flowchart

Phase 1: *Getting Ready*— Institutional Phase

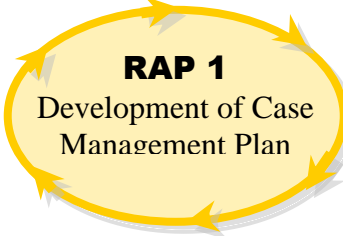
Offender enters
ODOC under
sentence



Institutional Assessment &
Classification



*RP 1: Dynamic and changing to facilitate
transitional planning*

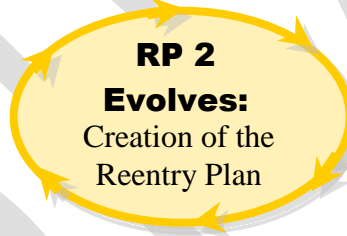


**Institutional
Programming**

**9 Months–1 Year
Prerelease**

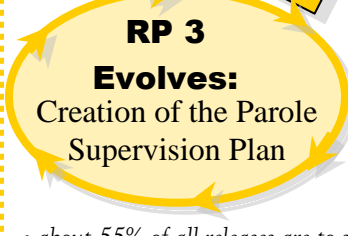
Phase 2: *Going Home*— Transition to Community Reentry Phase

*RAP 2: Changes as details of parole plan are
verified. Dynamic to ensure communication
necessary for transition.*

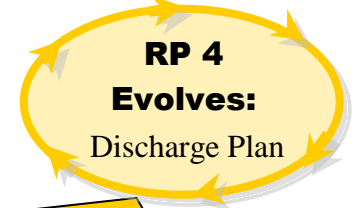


**Release from
Prison**

Phase 3: *Staying Home*— Community & Discharge Phase



• about 55% of all releases are to supervision



Transitional Planners
Work with offenders while they are incarcerated preparing them for release and continue to work as partners with probation & parole for as long as one year after release.

Monthly Transition Team Meetings

Include transitional planners, probation/parole reps,
service providers, offender, and his/her family

THE OPRI MODEL

POLICY STATEMENTS AND RECOMMENDATIONS

The National Reentry Policy Council (www.reentrypolicy.org) developed a guide for states and other jurisdictions interested in pursuing improvements for prisoner re-entry. The 2003 Reentry Policy Council Report includes a series of policy statements and recommendations to guide the re-entry planning and development process and to improve prisoner re-entry services. The Report has been used extensively in Oklahoma, alongside the Transition from Prison to Community Initiative (TPCI) Model to develop this reentry approach. Specifically, the Reentry Policy Council Report was adapted to create two types of documents to assist Oklahoma's efforts in designing and implementing the Oklahoma Prisoner Reentry Initiative (OPRI) Model: First, a set of guidelines on design and implementation issues and, secondly, a set of workbooks - one for each of the three OPRI Model phases (Getting Ready, Going Home, Staying Home) - that have been used to determine the policy statements, recommendations and implementation strategies for the OPRI Model.

This document provides a summary of the OPRI Model, a series of policy statements and recommendations for implementation. The policy statements are categorized by the Three OPRI Phases and delineated by the 7 primary decision points that comprise the Model.

- **Getting Ready:** The Institutional Phase
- **Going Home:** The Transition to the Community – Reentry Phase
- **Staying Home:** The Community and Parole Discharge Phase

Phase I: Getting Ready - The Institutional Phase

DECISION POINT #1: ASSESSMENT AND CLASSIFICATION

Policy Statement: Development of Intake Procedure

Establish a comprehensive, standardized, objective, and validated intake procedure that, upon the admission of the inmate to the corrections facility, can be used to assess the individual's strengths, risks, and needs.

(Reference: Report of the Reentry Policy Council, Pgs. 110-140)

Recommendations:

- 1) Review intake procedures to determine the range and validity of screening and assessment practices.

Assets

- The agency currently has a process of using validated instruments (custody, LSI-R, etc) to develop a case plan.
- Intake procedures result in screening and assessment of each offender's custody level, physical and mental health needs, and programmatic needs.

Barriers

- LSI-R and custody assessment need to be re-validated on our population and possibly developed into a combination of the two.
- Certain areas of need identified by assessment instruments (family marital relationships, leisure time, etc.) are not areas the agency has been able to develop programming to address.
- We are bed driven instead of assessment driven leading to too many overrides of recommended security placement.

Gaps

- Funding to re-validate (or create) the risk /custody assessment.

Who does what when:

- Evaluation & Analysis Unit can help to determine what, if any, correlation exists between our custody assessment and the LSI-R during FY 13.
- Grants Administration Team will look for funding opportunities to provide for an outside evaluation and validation of our assessment instruments during FY12 and on.

- 2) **Ensure that the screening and assessment process is appropriately prioritized, and that the overall intake procedure is streamlined and efficient.**

Assets

- The current process is defined in agency policy and procedure.
- All receptions go through assessment process and information is entered into OMS/EZ Assess.

Barriers

- Due to the overwhelming number of offenders entering into the system, the intake period is not long enough to do the most thorough of evaluations.

Gaps

- Funding to better process the number of offenders received into the system.

Who does what, when;

- Look at creating a “fast track” for offenders with short term sentences, especially when House Bill 2131 goes into effect in November of 2011.

- 3) **Employ a risk-assessment instrument for classification and integrate other available public safety information.**

Assets

- The agency currently utilizes a validated classification instrument to determine custody.
- Official versions of current and past criminal history are utilized to determine the appropriate custody level.

Barriers

- The current classification instrument has not been re-validated in the last 8-10 years.

Gaps

- Funding for the re-validation study

Who does what, when;

- Patty Davis has requested that the process for a revalidation study be initiated; this is ongoing

- 4) **Screen all offenders for psychological and mental health issues, physical health problems, or substance abuse and dependency, in order to identify inmates who require further assessment.**

Assets

- We currently utilize a dynamic mental health classification system to identify mental treatment needs.
- We currently utilize a validated instrument to determine criminogenic risk of substance abuse and severity of use.
- We have a good system in place for identifying medical needs.

Barriers

- Mental health and medical needs are continually reassessed, but substance abuse needs remains during incarceration.

Gaps

- Lack funding to provide robust mental health treatment services across system.
- Had to reduce the number of substance programs due to budget cuts.
- Medical treatment costs are a significant burden on the treatment budget.

Who does what, when;

- Better coordination with DMHSAS in accessing community based services; ongoing
- Evaluate hiring treatment staff rather than contracting in order to reduce costs during FY12-13

- 5) Ensure that the unattended dependents, if any, of each individual admitted to the facility are placed with a caretaker.

Assets

- Discussions have been held with various advocacy groups and the DHS concerning the children of incarcerates, communication does occur.

Barriers

- DOC does not collect specific data on unattended dependents
- DHS is the agency responsible for dependent issues and there has not been a consistent working relationship between agencies

Gaps

-

Who does what, when;

- Continue to build partnership with DHS for benefit of dependents; ultimately, the DOC views this as the responsibility of DHS and the courts. In future review and refinement of this document, this item may not be included.

- 6) Assess long-term and dynamic risks associated with each individual admitted to prison.

Assets

- DOC asses for dynamic risks at admission using the Level of Service Inventory-Revised (LSI-R).

Barriers

- Current policy does not require that risk assessments be update during the incarceration period.
- Our risk assessment is better suited for offenders in the community than those incarcerated.

Gaps

- We lack staff trained to update risk assessment during incarceration.

-

Who does what, when;

- Programs, Community Sentencing and Population will work to develop a risk/assessment review board and develop an agency policy that requires the review of current and potential risk/assessment processes during FY 13.

7) **Conduct comprehensive assessments for each individual whose screening identifies psychological and mental health issues, physical health problems, and substance abuse and dependency.**

Assets

- Have an “inpatient’ and step down mental health treatment unit at one facility that provides in depth mental health and medication evaluations.
- Contracted substance abuse providers complete a comprehensive assessment for participants.
- Medical conducts a thorough evaluation of physical health at reception

Barriers

- The assessment and reception process operates in a compressed timeframe. Due to the short amount of time offenders spend in A&R, certain needs do not become overtly apparent until placement at a receiving facility.

Gaps

- Lack of time and staff required to complete compressive assessments prior to placement at a receiving facility.

Who does what, when;

- Continue to review assessment processes in A&R
- T&RS will coordinate with Division of Institutions to consider placing assessors in OK county and Tulsa county jails to perform risk assessment and mental health evaluations before reception during FY 13 and 14.

8) **Assess interpersonal skills and basic literacy.**

Assets

- We currently administer the TABE assessment at intake to assess each offenders reading and math abilities.
- Life skills courses are offered that provide some training on interpersonal skills.
- Thinking for a Change curriculum includes interpersonal skills training.

Barriers

- TABE scores must be entered into our data system manually.
- No formal assessments utilized to assess receptions level of interpersonal skills.

Gaps

- The number of teachers employed was cut in half due to budget cuts over the past two years.

Who does what, when;

- T&R unit will investigate what interpersonal skills assessments exist and the feasibility of utilizing such an assessment during FY 13.

9) Determine the vocational aptitudes, education levels, and employment histories of all sentenced individuals.

Assets

- All offenders are screened for education level at reception.
- A strong partnership exists between DOC and Career Tech who provides vocational training
- Currently developing partnership with OESC for employment assistance and data

Barriers

- Current employment history collected is self-reported and not verified.
- No standardized assessment tools broadly used by DOC to screen vocational aptitudes or employment histories.

Gaps

- Lack staff required to administer vocational assessment to all receptions.
- Lack of enough vocational programs to meet the needs of discharging offenders.

Who does what, when;

- Ongoing; T&RS will continue to coordinate with Career Tech regarding the development of skill center programs and availability of vocational programming in the community for offenders.

10) Review the individual's current benefits and entitlements and determine what steps will be needed to transition the individual back to those programs upon release.

Assets

- VA has staff dedicated to working with offender population.
- Some mental health staff has been through SOAR training in order to help releasing offenders with serious mental illness reinstate their Social Security and Medicaid benefits.

Barriers

- Completing pre-release Social Security applications is time consuming and requires a thorough functional assessment by a psychologist or medical doctor.
- Difficult to verify all offenders past benefits while incarcerated.

Gaps

- Most medical units are unable to complete a functional assessment report to give to Disability Determination because of a lack of time and staffing issues.

Who does what, when;

- T&RS staff will convene internal meetings to determine to what degree it will be possible to invest in staffing to establish this process during FY 12.

11) Assess all assets and debts and work with inmates to prevent the build-up of child support arrears upon their admission to a correctional facility.

Assets

- DOC is developing a more collaborative relationship with OKDHS.
- OKDHS has employment programs for parents who owe child support.

Barriers

- OKDHS has historically wanted to cross reference all DOC receptions with their list those who owe child support and then require those who owe to pay out of their “gang pay”. This would lead to many of them falling into indigent status requiring DOC to pay for their basic supplies.

Gaps

- Most offenders do make some money at facility jobs to contribute toward their child support arrears.

Who does what, when:

- DOC Programs and DOC legal will meet with OKDHS leadership to discuss legal issues involved with a data sharing agreement; FY 12 and ongoing.

12) Chart the inmate’s family life, including such factors as domestic violence, the impact of incarceration on relationships, and the involvement of children.

Assets

- Some domestic violence and relationship skills training are provided to the offender's through mental health, religious services, volunteers or partner agencies (YWCA).
- Transition Coordinators do chart family involvement, but it is done on a limited basis and on the back end of the incarceration.

Barriers

- No consistent systemic approach in place to collect this information.
- Some offenders are reluctant to discuss family issues with DOC staff.
- No specific, systematic assessment used for domestic abuse or relationship issues.

Gaps

- Staff and funding necessary to provide domestic violence treatment and prevention was well as marriage and parenting classes on a statewide level.
- Most services offered are geared toward the victim of domestic violence and not toward the perpetrator, such as a batterers intervention
- Funding and staffing prohibit growth of these programs.

Who does what, when:

- Programs will review the possibility of instituting domestic violence and relationship classes based on need of the offender population and available resources during FY 12.

13) Encourage the use of only validated screening and assessment instruments in the intake procedure.

Assets

- DOC currently uses the LSI-R and other normed and validated instruments to assess offender risk and need.

Barriers

- Newer risk/need assessments exist and may be more appropriate for population.
- LSI-R results are not factored in security decisions

Gaps

- If new risk/needs assessments are incorporated into the intake process, training of staff will be necessary, as well as discussion on how the new assessment data will mesh with the existing data sets.

Who does what, when;

- Programs and Classification and Population should determine the benefit of continued use of the LSI for the prison population. A group will be convened to discuss the risk need assessment process in FY 13.

14) Encourage the use of instruments that can be modified for use beyond the initial assessment.

Assets

- LSI is used for assessment and treatment planning in community supervision

Barriers

- Staff are not consistently trained in use or interpretation of the LSI results outside the reception centers

Gaps

- Need for better training of facility staff on interpretation of risk/need instruments. This may require more training staff.

Who does what, when;

- T&RS will meet with Training to determine the likelihood of incorporating risk/need training into the annual training offerings during FY 13.

15) Ensure that intake staff is properly trained to administer screening and assessment instruments.

Assets

- Have staff dedicated to assessing offenders received.
- Have two LSI-R master trainers on staff.

Barriers

- There is not one single unit who has oversight for assessment process making quality assurance an issue.

Gaps

- Lack staffing to properly assess the large numbers of receptions.

Who does what, when;

- Facilities and probation districts will identify key people who need to be trained.
- Staff currently able to train trainers will set up training by the end of CY2011.

16) Engage community-based service providers to perform assessments and to administer screening and assessment instruments.

Assets

Barriers

-

Gaps

-

Who does what, when;

- Discussion will be held within DOC executive staff to determine if this component is an appropriate fit for the OPRI model.

17) Address issues of cultural competency through staff training and the engagement of community-based providers.

Assets

- We have developed strong relationships with other state agencies and many local community providers.
- Committed to diversity within agency staff.

Barriers

- Due to a lack of staff and time, the ability to conduct assessments in a flexible manner is limited.
- Staff lack training on how to conduct assessments to people from various culture perspectives.

Gaps

- We only have two staff members who can train others on the LSI-R.

Who does what, when;

- T&RS will meet with Training during FY 12 to discuss the possibility of including cultural competency training in annual training regimens.

18) Assess the special needs of female offenders.

Assets

- We have a Female Offender Operations unit that focuses on unique needs of female incarcerates.
- We have different custody assessments for females.
- Treatment at female facilities utilizes gender specific curriculum.

Barriers

- Our risk assessment instrument has not been validated on our female population.
- We do not currently utilize any need assessments that are female specific.

Gaps

- We lack the funding to validate our current instrument.

- Lack the staffing capacity to identify and implement an additional needs assessment.

Who does what, when;

- The Female Offender Operations unit will identify female specific assessment instruments that DOC can potentially utilize and recommend their implementation beginning in FY 13.

19) Develop protocols to ensure the accuracy and availability of information while adhering to laws and regulations that govern the confidentiality of this data.

Assets

- We currently have offender information available on our agency website.
- Staff has access to information through OMS and other datasets available through the internet.
- Most offenders are willing to sign a release of information form if they feel it will benefit them.

Barriers

- Our information is currently output into formats that cater to the needs of DOC employees and not offenders or the public, making it difficult for outside interests to understand.

Gaps

- Staffing capacity to respond to the information needs and requests of the community partners and public.

Who does what, when;

- IT and Evaluation and Analysis units will meet with representatives from Programs, Executive Communications to determine ways to synthesize offender information into concise documents/formats that meet the expressed needs of outside constituents.

20) Explain to prisoners the purpose and function of the screening and assessment process and the extent to which the information will be shared.

Assets

- Assessment information is entered into a data system that is accessible through the internet.

Barriers

- Facility case management staff is not trained on the LSI-R.
- Time allotted for reception is not always conducive to an overview and general understanding of the reception process.

Gaps

- The lack of staffing to train all current and future case managers on LSI-R and to do quality control of the feedback given to offenders concerning their risk assessment.

Who does what, when;

- Training unit can look at current case manager pre-service training and determine where LSI-R training could fit into the current curriculum and what additional staff time would be required to deliver material.
- Determine logistically how to training current staff on assessment instruments.

- Discuss with Brian Bell and case manager coordinators what the process for quality assurance could look like.

DECISION POINT #2: INMATE BEHAVIOR AND PROGRAMMING

Policy Statement: Development of Programming Plan

Develop, for each person incarcerated, an individualized plan that, based upon information obtained from assessments, explains what programming should be provided during the period of incarceration to ensure that his or her return to the community is safe and successful.

(Reference: Report of the Reentry Policy Council, Pgs. 141-153)

Recommendations:

- 1) Charge new or existing positions with the responsibility of reviewing information obtained through assessments and of developing a plan that provides for the coordinated delivery of targeted services for each person admitted.

Assets

- Case Plans are currently developed using the LSI-R, TABE, and offense information.

Barriers

- It is difficult to move offenders in system solely based on programmatic needs. More often offenders are moved for security needs or based on bed availability.
- The high number of receptions makes detailed assessment and planning difficult.

Gaps

- A lack of staff needed to synthesize the information collected during the assessment process and produce a detailed plan.

Who does what, when;

- Part of this process cannot be streamlined as DOC has limited control over receptions. However, Classification and Population are in ongoing discussions to begin a review of the current classification assessment. A review of risk/need assessments and the incorporation of the two could be discussed as part of the re-validation study.

- 2) Consider the primary needs, strengths and background of the individual in developing the programming plan.

Assets

- Risk and needs instruments used identify criminogenic needs.
- We attempt to prioritize needs of offenders.

Barriers

- Most of our assessments are focused on the offender's deficits.
- Need for standardization and consistency makes the inclusion of nuanced planning difficult.

Gaps

- Lack of resources (space, staffing, materials) to develop enough programming to meet all the needs of the offender population while incarcerated.

Who does what, when;

- Programs will continue to develop better relationships with partner agencies and entities in the community to better inform them of the needs of the returning citizens.

3) Ensure that all program planning incorporates the principles of cultural and gender competency.

Assets

- Many female programs have adopted gender-specific curricula and assessments to better meet the need of the female population
- Few programs are designed within DOC to meet criminogenic needs from a cultural perspective.

Barriers

- Lack of culture-specific programming.
- DOC has not historically included the offender's strengths into the case plan or pre-release plan

Gaps

- Lack of training on cultural competencies with regard to the offender population.

Who does what, when;

-

4) Provide opportunities for crime victims, victim advocates, family members, and community members to inform the inmate's programming plan.

Assets

- DOC has formal processes that provide victims, victim advocates, and community members an opportunity to make broad suggestions, but there is not a formalized process that allows them input into the development of the case plan.
- Employ a victim liaison who works with family members, victims and the AG's office.
- DOC has begun to incorporate a victim impact course at facilities

Barriers

- DOC is limited on the variety and number of programs that can be provided, which limits our ability to place offenders in programs who do not have a risk determined need.

Gaps

- Lack of staffing levels and processes necessary to coordinate the identification and communication with victims, family and community members on an individualized basis.

Who does what, when;

- Initial assessment staff and case management staff can look at ways to systematically identify and then contact the various vested parties to gain their input into offenders' case plan.
- Coordinate more Victim Impact programming at facilities by training additional staff and volunteers during FY 12.

5) Engage community-based providers in the development of a programming plan.

Assets

- DOC has existing relationships with a variety of community based service providers and their parent state agencies.

Barriers

- Due to the rapid rate of receptions, A&R may not be the most conducive environment for extensive case planning.
- Unsure how engaging community providers at reception would impact overall programming while incarcerated.

Gaps

- Cost of contracting with community providers to provide services.

Who does what, when;

- Discussion will be held within DOC executive staff to determine if this component is an appropriate fit for the OPRI model.

6) Include in the programming plan provisions for periodic reassessments to be conducted during the inmate's incarceration and for changes to be made in the plan accordingly.

Assets

- Case managers have the capacity to add programmatic needs and make others as completed through the offender's incarceration.

Barriers

- We do not currently reassess offender using the LSI-R during their incarceration.

Gaps

- We lack the staffing capacity and training to regularly reassess all of offenders during their incarceration.

Who does what, when;

- Look at creating a questionnaire that case managers can complete annually on offenders to update their LSI-R.

- 7) Establish and maintain a centralized record-keeping system as well as a system for regular communication among program planners and other prison-based staff and service providers.

Assets

- We currently have both an internet accessible Offender Management System and Program Participation database.
- Information regarding an offender's attendance and progress in a program is usually communicated to case managers.

Barriers

- While records are kept and are accessible, they are in more than one system with some duplication of information. This information is not always readily available to all staff or service providers and is not accessible to providers in the community.

Gaps

- Funding necessary to update and integrate the electronic DOC data system.

Who does what, when:

- Through the ongoing process of developing community based reentry partnerships and engagement, DOC Executive Reentry Committee representatives will discuss the need and possible development of an electronic data interface to share relevant info.

- 8) Creatively adapt the program planning model for shorter-term stays.

Assets

- Many existing SAT programs are designed to last no longer than four months.

Barriers

- Educational programs are more difficult to adapt due to limited staffing and the length of time it may take someone to reach their maximum educational attainment level.
- Some programming may not meet best-practice standards if they are abbreviated
- Volunteers are willing to assist but many times are interested in providing a specific service of their choosing and not something that will meet the offender's assessed needs.

Gaps

- Reduction in funds and staff related to programming make it difficult to serve a significant number of offenders with various programmatic needs.

Who does what, when:

- Programs Unit will review the current available programs to determine if it will be possible to divert a percentage of existing resources to more short-term programs.

Policy Statement: Physical Health Care

Facilitate health care access to promote delivery of services consistent with community standards and the need to maintain public health.

(Reference: Report of the Reentry Policy Council, Pgs. 156-166)

Recommendations:

- 1) Engage community-based organizations to provide health care services for inmate populations prior to discharge.

Assets

- DOC medical is working to develop a pilot project with Federally Qualified health clinics.
- DOC medical does provide some community resource information to offenders prior to their release.
- Attempts are made by nursing staff to find out the location the offender will be releasing to and what resources are available in that area.

Barriers

- A lack of formal relationships with community organizations
- DOC medical staff lacks the time to engage community organizations.

Gaps

- We lack the staff necessary to develop the relationships necessary to engage community providers.
- There is a lack of free health care services available in the community and those that exist are overwhelmed.

Who does what, when:

- Medical will explore how to link medical information in the discharge summary on EHR.
- Communicate with FQNC that we can share information on offenders.

- 2) Use telemedicine to deliver effective and cost-efficient health services.

Assets

- We currently use telemedicine for mental health clients
- Will use for new TB process
- Currently use it for the “store and forward” process of sharing information with consultants.

Barriers

- The space necessary to set up telemedicine equipment at all facilities

Gaps

- Our contract provider has not provided much assistance in getting telemedicine more widely used.
- The costs of setting up telemedicine equipment at all facilities

Who does what, when:

- Medical Services will review the cost associated with a wider use of telemedicine for DOC and providers as contract negotiations occur for FY 13.

- 3) Integrate prevention, education, and good health promotion into correctional health care services and partner with community-based organizations to supplement this information.

Assets

- Currently provide Living Longer, Living Stronger curriculum for those with chronic illness.
- Provide HIV and STD prevention education.
- Use chronic clinic forms to educate offenders on their health conditions.

Barriers

- Lack the staff and fund necessary to provide comprehensive and system wide preventative health care and education classes.

Gaps

- A lack of community partners willing or able to provide preventative services pre-release.

Who does what, when:

- T&RS will communicate the need through the Executive Reentry Committee regarding the need for a better system of health education and wellness to determining what resources may be available and untapped within the community and across the state.

- 4) Maintain medical records so that they provide up-to-date information regarding a prisoner's condition and treatment, and ensure that a summary of the records follows the person as he or she transfers between providers.

Assets

- Currently have an electronic medical records system in place, which provides immediate access to the offender's current medical condition.

Barriers

- Some of the medical information on discharged offenders is still in paper files, making access more difficult.
- HIPPA guidelines govern what info can and can't be released and to whom.

Gaps

- Disconnect between when the offender discharges and forwarding of medical information to a community provider.

Who does what, when:

- Medical will explore if it is possible to standardize set of basic medical information upon release, with a signed offender consent form. Programs could add this process to the Pre-Release policy during the FY 13 annual review.

- 5) Promote comprehensive, integrated medical, mental health and substance abuse treatment services, both within correctional facilities and as a central component of corrections-community linkages.

Assets

- We provide mental health services at every level of security
- We have residential substance abuse treatment programs available.
- We have co-occurring treatment provided at medium, minimum, and community level security.
- Have collaborated with ODMHSAS to do discharge planning and provide treatment funds for offenders on supervision.
- Have discharge planning for those with serious mental illness or HIV.

Barriers

- Almost half of our offenders discharge without supervision and we have little control over their level of treatment involvement post release.

Gaps

- There is a lack of resources in rural areas.

Who does what, when;

- DOC will continue to communicate with new and existing community partners and state agencies concerning the continuing treatment needs and service gaps across the state. As funding is available, new partnerships will be formed to provide these services.

6) **Ensure that even short-term inmates receive basic medical care and transition planning services.**

Assets

- DOC medical makes no distinction between short or long term offenders as it relates to their medical needs.

Barriers

- None

Gaps

- Additional educational, wellness and medical pre-release services could be provided with additional staffing.

Who does what, when;

- DOC medical with continue to explore the best methods to ensure that offender health care needs are met.

Policy Statement: Mental Health Care

Facilitate mental health care access to promote delivery of services consistent with community standards and the need to maintain public mental health.

(Reference: Report of the Reentry Policy Council, Pgs. 167-178)

Recommendations:

1) Engage the community-based mental health care system in providing pre- and post-release services to inmates with mental health needs.

Assets

- Have a good relationship with ODMHSAS, who provide mental health discharge planners who work in three different facilities.
- Three different community based providers coordinate with facility mental health and offenders (RICCT) prerelease
- Attempts are made to identify and contact local providers prerelease to set post release services

Barriers

- Many community providers will not set up appointments prerelease because of the level of “no shows”.
- Reentry planning for mentally ill offenders is not standardized, due to the variance of need and lack of resource in many areas of the state.

Gaps

- RICCTs teams are only in Oklahoma City and Tulsa.

Who does what, when;

- DOC mental health will continue to coordinate with DMHSAS

2) Ensure that prison formularies provide access to the most appropriate medications.

Assets

- Current formulary provides medications in all the major drug classes and allows us to treat and address mental health issues appropriately. Each diagnostic category is covered.

Barriers

- We cannot provide the most current medication due to cost restrictions.

Gaps

- Due to cost, we cannot provide the most current medications, but are still able to meet the treatment needs of the population.

Who does what, when;

- Medical services will continue to work with the pharmacy vendor to ensure that newer drugs are added to the formulary as costs allow.

3) Provide appropriate psychosocial supports and services.

Assets

- Currently utilize peer recovery support specialists who have been trained by NAMI.
- Mental Health staff does provide support services in the form of anger management groups, medication management groups.

Barriers

- Support services are most frequently done in group, not individually due to staffing issues.

Gaps

- Lack of staffing to increase the number of support services offered

Who does what, when;

- DOC mental health will continue to partner with ODMHSAS and related service providers and community supports in an effort to increase the amount of psychological support and services offered to offenders. This is an ongoing process.

4) Employ telecommunications technology to deliver effective and cost-effective services.

Assets

- DOC currently utilizes telemedicine for psychiatric services.

Barriers

- The equipment utilized ranges from web cameras to polycom devices; a consistent technological approach has not been utilized.

Gaps

- Funding for implementation of consistent technology for telepsych.

Who does what, when;

- DOC mental health is already working with I.T. to develop a business proposal for staging in consistent technology for telepsych.

5) Establish protocols to address co-occurring substance abuse and mental health disorders.

Assets

- ODMHSAS provides three co-occurring treatment specialists who provide treatment in facilities.
- Substance abuse programs contract with approved ODMHSAS co-occurring competent treatment providers

Barriers

- Services are only provided at a limited number of facilities.
- Some contract providers do not feel equipped to deal with the co-occurring needs of the prison population.

Gaps

- Lack of staffing to ensure that an ODMHSAS co-occurring treatment specialist is in each facility.
- Lack of community resources to meet the co-occurring needs of the offender population.

Who does what, when;

- DOC mental health and Programs staff are in ongoing communication with ODMHSAS regarding the co-occurring needs of the offender population both pre and post-release.

Policy Statement: Substance Abuse Treatment

Provide effective substance abuse treatment to any offender in prison who is chemically dependent.

(Reference: Report of the Reentry Policy Council, Pgs. 178-179)

Recommendations:

- 1) Determine the extent to which existing services are effective and sufficient to meet the demand for substance abuse treatment.

Assets

- Evaluation and analysis unit routinely evaluate the effectiveness of substance abuse programs in reducing recidivism.
- DOC has established policies supporting the use of evidence-based substance abuse services with an offender population.
- Quality assurance measures are in place to evaluate program's adherence to the evidence based model of service.

Barriers

- The number of offenders with an evaluated need for treatment overwhelms the amount of resources available.
- Short sentence length coupled with the turnover of program cycles result in short term offenders

Gaps

- Lack of staffing, funding and in some instances space to meet the diverse programmatic needs of the offender population.

Who does what, when;

- Programs Unit will continue to work with partner entities and agencies to institute evidence-based programming that meets the needs of the diverse offender population.

- 2) Assess candidates for program participation carefully, and prioritize treatment for drug-dependent prisoners and those approaching release.

Assets

- DOC has validated assessments in place to determine the severity of need for offender programming.
- Policy in place to assist in prioritizing the placement of offenders into programs

Barriers

- Need far outweighs treatment availability
- Court orders and parole stipulations can sometimes override assessment criteria.

Gaps

- Funding to develop more programming to meet the treatment needs of incarcerated in individuals

Who does what, when:

- Programs Unit will continue to work with partner entities and agencies to institute evidence-based programming that meets the needs of the diverse offender population

3) Implement evidence-based treatment services that make the best use of available resources.

Assets

- DOC currently requires providers to utilize evidence based treatment modalities and curriculum approved by DOC in conjunction with ODMHSAS.
- Substance abuse programs each have an assigned or dedicated director who works to ensure that evidence-based residential treatment standards are being followed.

Barriers

- In many instances the DOC program director has additional job duties, such as unit manager or case manager coordinator that require them to split their focus.
- Due to staff and contractor turn over, it is difficult at time to maintain consistency in service delivery

Gaps

- Funding is required to purchase evidence-based curricula and materials on a continual basis.

Who does what, when:

- Programs Unit will continue to work with partner entities and agencies to institute evidence-based programming that meets the needs of the diverse offender population

4) Engage the community-based substance abuse system to provide effective, culturally competent services to people in correctional facilities who are in need of treatment.

Assets

- Through an inter-local agreement with ODMHSAS, DOC works with numerous providers in the community to deliver substance abuse treatment in facilities.
- ODOC has a history of receiving competitive grant awards to provide programmatic services through contracts with community based providers.

Barriers

- There is limited programmatic space in facilities.

Gaps

- Limited funding exists to pay for services through community based providers.

Who does what, when:

- Programs Unit will continue to work with partner entities and agencies to institute evidence-based programming and seek out funding sources that meets the needs of the diverse offender population

Policy Statement: Children and Families

Make available services and supports for family members and children of prisoners, and, when appropriate, help to establish, re-establish, expand, and strengthen relationships between prisoners and their families.

(Reference: Report of the Reentry Policy Council, Pgs. 190-200)

Recommendations:

- 1) Provide parenting and other programs to address a range of family needs and responsibilities of people in prison.

Assets

- ODOC has engaged OKDHS in discussions regarding what curricula are acceptable to meet the parenting needs of the offender population.
- Various volunteer groups provide parenting classes and groups
- ODOC in conjunction with OKDHS has applied for a fatherhood grant

Barriers

- The various parenting classes and groups offered are not standardized.
- Through talks with various OKDHS representatives, it does not appear that they approve a specific set of curricula for parenting and that the merits of someone completing a parenting course are dictated person by person, based on which court they are working with and who the treatment provider is.

Gaps

- Funding to purchase a set of parenting curricula and coordinate training of staff or volunteers to deliver it in a consistent manner.

Who does what, when:

- DOC Programs unit will continue to engage in talks with OKDHS and volunteer groups regarding the implementation of a parenting curriculum. If DOC receives a fatherhood grant, this will present a funded opportunity in FY 12 to pilot parenting interventions.

- 2) Facilitate contact between inmates and their children and other family members during the period of incarceration, when appropriate.

Assets

- Volunteer groups working with children provide transportation to play days at one female institution
- Services exist in which an offender can record themselves reading a book to their child and send the recording in the mail to their family.
- Many programs address the need for establishing a pro-social support system, including family and children.

Barriers

- In some instances, the offender is not legally allowed contact with the child.
- Some offender families do not wish to have any contact with the offender.

Gaps

- Lack of staffing to provide instruction to offenders on how to better socially interact with family members and children, and possibly turn visitation into an instructional interaction.

Who does what, when:

- DOC Programs unit will continue to communicate with volunteer groups regarding services and curricula that can be offered to address appropriate family interaction. If DOC receives a fatherhood grant, this will present an opportunity in FY 12 to systemically address family interpersonal relationships.

- 3) Increase collaboration between departments of corrections and child-support agencies to promote information about and access to the child-support process by incarcerated parents and their families.

Assets

- DOC has ongoing communication with OKDHS
- DOC field staff report developing relationships with OKDHS court liaisons have positively impacted the reintegration of offenders by aiding them in requesting adjustments to the payments owed.

Barriers

- DOC and OKDHS have not come to terms concerning a data sharing agreement as it relates to incarcerated parents, specifically fathers who owe child support.

Gaps

- Lack of staff and resources within DOC and OKDHS to dedicate staff or training to inform and assist offenders on the child support process while incarcerated.

Who does what, when:

- Programs unit will coordinate a meeting with OKDHS regarding a data sharing agreement during FY12. If DOC receives a fatherhood grant, this will require a formal agreement between DOC and OKDHS to share data to work toward the successful reintegration of offenders.

Policy Statement: Behaviors and Attitudes

Provide cognitive behavioral therapy, peer support, mentoring, and basic living skills programs that improve offenders' behaviors, attitudes, motivation, and ability to live independently, succeed in the community, and maintain a crime-free life.

(Reference: Report of the Reentry Policy Council, pgs. 201-210)

Recommendations:

- 1) Provide inmates with programs that include evidence-based cognitive-behavioral treatments.

Assets

- Have trained staff and volunteers that deliver cognitive restructuring programs such as Thinking for a Change and MRT.

Barriers

- Case Managers rarely have time to instruct a course
- Both case managers and volunteers occasionally deviate from the prescribed curricula by adding elements or compressing the format.
- Limited quality assurance practices

Gaps

- Lack of staff time to consistently provide services.

Who does what, when:

- Programs will work to develop a better model of QA for cognitive restructuring programs and explore other options with the Division of Institutions during FY 12.

- 2) Facilitate efforts of community and faith-based institutions, peer support groups, and other service providers to engage and mentor prisoners, and to foster relationships that improve trust and confidence in treatment and services.

Assets

- DOC has numerous faith and community based volunteers that provide services within the prisons
- Peer support HIV, Health education and mental health management services are provided in several settings.

Barriers

- Some volunteer groups are only interested in working with specific types of offenders regardless of the need.
- Difficult to know what services are available through community and faith-based organizations from location to location across the state.

Gaps

- Funding doesn't exist to compensate community and faith-based organization for the services they provide.

Who does what, when:

- DOC religious and volunteer services in conjunction with the inter-faith council will work to develop a consistent data base of all approved volunteers, their group affiliation and the services they provide

- 3) Provide inmates with services that address their need for basic life skills, including relationship skills.

Assets

- DOC provides life skill training through education staff and volunteers.
- A curriculum as developed through a partnership with Career Tech

Barriers

- The curriculum has become dated and needs to be updated
- The curriculum doesn't address with relationship deficits.

Gaps

- Lack of funding to pursue the curriculum update.

Who does what, when;

- As funding becomes available, Programs Unit will determine if a new curriculum or set of curricula can be purchased or developed to meet the need for Life Skills. This process will not be started until FY 13 at the earliest.

- 4) **Compel unwilling and high-risk inmates to participate in behavioral and other related treatment services, and ensure that services for those who appear unresponsive to programs continue when those individuals return to the community.**

Assets

- Program referral is based on assessed need not willingness or motivation to participate.
- Offenders unwilling to participate in recommended programs lose levels
- Programs are designed to serve higher risk offenders.

Barriers

- Limited programmatic space ensures that not all moderate and high risk offenders receive services prior to release.
- Difficult to arrange services for offenders in the community, especially if the offender is unsupervised post-release.

Gaps

- Lack of funding for programs to address all the needs of the offender population

Who does what, when;

- Programs unit will continue to seek out funding opportunities to increase the amount of services offered.

- 5) **Provide (and encourage inmates to attend) victim impact panels, impact of crime classes, and other educational programs involving victims and/or victim advocates designed to convey the harm resulting from crime.**

Assets

- DOC adopted the Victim Impact: Listen and Learn course during 2010 and have trained staff and volunteers to deliver the curriculum to offenders
- Have working relationship with victim advocates as part of the sex offender containment teams

Barriers

- Lack of resources has limited the number of Victim Impact trainings.
- Victim advocates do not have a clearly defined role within the containment teams.

Gaps

- Lack of funding to further develop the victim impact course.

Who does what, when:

- DOC's victim advocate will continue to work the Programs Unit to train more staff and volunteers with the Victim Impact curriculum on an annual basis.

Policy Statement: Education and Vocational Training

Teach inmates functional, educational, and vocational competencies based on employment market demand and public safety requirements.

(Reference: Report of the Reentry Policy Council, pgs. 211-220)

Recommendations:

- 1) Develop programs that will enable inmates to be functionally literate and capable of receiving high school or postsecondary credentials.

Assets

- DOC has a fully accredited school within the prison system

Barriers

- Limited staffing due to budget cuts

Gaps

- Education isn't a priority move across security levels.

Who does what, when:

- Programs unit will work to refill vacant teaching positions as funding becomes available.

- 2) Analyze the job market in the area to which people in prison will be returning.

Assets

- DOC has existing relationships with Career Tech and the Oklahoma Employment Securities Commission.
- Career Tech adjusts training programs to service job fields across the state.

Barriers

- Job market changes over time
- Due to felony convictions, offenders cannot work in some fields

Gaps

- Lack of dedicated staff to monitor the changing job market

Who does what, when:

- DOC will continue to work with Career Tech and OESC to develop training opportunities that will lead to successful placement of offenders into sustainable jobs.

3) Ensure that vocational and education classes target the needs of the job market.

Assets

- Education classes focus on attainment of highest level of academic achievement.
- Career Tech adjusts training programs to service job fields across the state.
- Career Tech rates its level of success based on placement of program graduates into jobs.

Barriers

- Due to felony convictions, offenders cannot work in some fields

Gaps

- Lack of funding has decreased the number of vocational training slots.

Who does what, when:

- Programs Unit will continue to work with Career Tech to assess the current job trends in the state.

4) Encourage inmates to participate in educational and job training programs.

Assets

- Achievement credits are offered to offenders who complete education and vocational programs
- Education and Vocational programs maintain waiting lists of offenders who want to participate.

Barriers

- Lack of resources to serve all that are interested or who are in need is a space issue at facilities.

Gaps

- Lack of funding for educational and vocational expansion
- Cuts in funding for adult life-long learning centers will result in fewer offenders being able to further their education when they return to the community.

Who does what, when:

- Programs Unit will continue to work closely with the State Department of Education and Career Tech to address the needs of the offender population.

5) Engage community-based agencies, such as volunteer and faith-based organizations, to provide institutional job-skills programs.

Assets

- Large volunteer base
- Existing relationship with some community/faith-based organizations(TEEM)

Barriers

- Most services are provided at the community corrections level and in the community.
- Many community and volunteer organizations lack the ability to provide a skill program on a state-wide basis.

Gaps

- Lack of funding to compensate for services.
- Lack of knowledge on DOC's part as to what reputable organizations can provide institutional-based services

Who does what, when;

- Programs unit will continue to network through existing contacts and the Executive Reentry Committee to explore the extent to which volunteer and religious organizations can provide job-skill programs.

6) **When appropriate, provide prisoners with opportunities to gain occupational competence through postsecondary education.**

Assets

- DOC does allow offender to pursue college degrees

Barriers

- Federal funding that aided offenders with college has been eliminated for FY 12

Gaps

- Lack of funding

Who does what, when;

- DOC education will continue to monitor the funding situation, and will work with area colleges and philanthropic organizations regarding the possibility of assisting with funding for college.

7) **Prioritize the allocation of education and training resources when resources are limited.**

Assets

- Limited resources are managed based on those with the most need and their time left to serve.

Barriers

- Need far outweighs the amount of available resources

Gaps

- Lack of funding to hire additional staff

Who does what, when;

- DOC education will continue to monitor and prioritize offenders into programming at the most optimal period during incarceration to maximize limited resources.

Phase Two: Going Home – The Reentry Planning Phase

DECISION POINT #3: INMATE RELEASE PREPARATION

Policy Statement: Work Experience

Provide inmates with opportunities to participate in work assignments and skill-building programs that build toward successful careers in the community. (Reference: Report of the Reentry Policy Council, pgs. 221-226)

Recommendations:

- 1) Provide work assignments in prison that correspond to the needs of the employment market.

Assets

- DOC is committed to offenders working while they are incarcerated.
- Oklahoma Correctional Industries and P.I.E. programs offer offenders marketable job skills and pay.

Barriers

- Lack of institutional jobs for all of the offenders.
- Lack of enough institutional jobs that are related to the employment market at each facility and security level.

Gaps

- Security concerns and physical plant limitations

Who does what, when:

- DOC will continue to monitor the possibility of developing additional industry operations.

- 2) Develop pre-apprenticeship work assignments that provide a clear path into community-based apprenticeship programs in high demand occupations.

Assets

- Industry and Career Tech programs that already exist could do this.

Barriers

- No formal relationship exists with entities in the community that could continue apprenticeship-type programs.

Gaps

- Lack of resources for DOC to research and develop formal relationships with multiple apprenticeship-type programs.

Who does what, when:

-

- 3) Establish work programs that involve nonprofit, volunteer, and community service organizations so that participants can gain work experience without competing with other potential employees in the community.

Assets

- DOC operates PPWP crews through community corrections at various locations across the state.

Barriers

- Very few, if any, formal relationships currently exist with non-profit, volunteer organizations.
- PPWP crews do provide offenders with work experience, but usually not in job related fields that the offender is interested in or that would result in a sustainable income.

Gaps

- Lack of relationships with these types of organizations for the purpose of providing work experience to discharging offenders.
- A significant number of these organizations would have to exist to meet the need of the number of offenders discharging.

Who does what, when:

- DOC will begin to discuss the possibility of community service-type projects with non-profit and volunteer groups. This will be an ongoing process.

Policy Statement: Housing

Facilitate each offender's access to appropriate and sustainable housing upon his or her re-entry into the community.

(Reference: Report of the Reentry Policy Council, Pgs. 256-281)

Recommendations:

- 1) Ensure that transition planners, working with community-based organizations, are familiar with the full range of housing options available in each community and maintain lists or inventories of available housing.

Assets

- DOC does employ a small number of transition planners.
- Facilities have made efforts to develop lists of potential housing in their areas and across the state.

- DOC has developed a web-based reentry resource manual that lists limited housing information.

Barriers

- DOC case managers and transition coordinators do not have access or knowledge of all the housing options from across the state in each community that offenders return to.

Gaps

- Housing options are ever-changing and it is difficult for case management staff to remain aware of all the potential housing across the state.

Who does what, when;

- DOC will continue to develop lists of housing options for offenders.

2) Determine on an individualized basis the particular housing needs for each person released from prison or jail.

Assets

- Housing arrangements are part of the pre-release plan
- Mental health staff work with DMHSAS discharge managers and community based partners to obtain housing for the mentally ill
- Through the second chance grant, transitional housing can be provided.

Barriers

- Difficult to know the housing options across the state
- Offenders discharge with limited resources
- Public housing authority restrictions on offenders

Gaps

- Funding and knowledge base concerning housing options across the state.

Who does what, when;

- During FY 13, DOC will attempt to develop a relationship with state and local housing authorities in an effort to address the local restrictions placed on offenders.

3) Evaluate the feasibility, safety, and appropriateness of an individual living with family members after his or her release from prison.

Assets

- DOC mental health staff do this, but in an informal manner
- Case Managers should check with the family member the offender is stating he or she will be residing with to ensure the family is aware of the offender's intentions.

Barriers

- Limited Case Management staff and growing caseloads make it difficult for case managers to put the amount of focus necessary on this area.
- It's not always possible to know if the offender would or would not be better off returning to their family.

Gaps

- Additional case managers and smaller caseloads would allow for better pre-release planning

Who does what, when;

- DOC will review this recommendation with the Executive Reentry Committee and local community contacts to explore ideas that other agencies and entities may have.

- 4) Ensure that family violence risks are recognized and addressed in the housing plan of any person whose return to the community may pose a risk to the individual or to his or her family or partner.

Assets

- DOC mental health staff do this, but in an informal manner
- Case Managers key into overt “red flag” situations, such as the type of crime the offender was convicted of (domestic violence), or if the offender has a victim alert in the OMS system
- Utilize VINE

Barriers

- Limited Case Management staff and growing caseloads make it difficult for case managers to put the amount of focus necessary on this area.
- It’s not always possible to know if the offender would or would not be better off returning to their family and what potential risks the family may pose to the offender.

Gaps

- Additional case managers and smaller caseloads would allow for better pre-release planning
- Need for a standardized, validated assessment tool or process to evaluate this type of risk

Who does what, when;

- DOC will review this recommendation with the Executive Reentry Committee and local community contacts to explore ideas that other agencies and entities may have.

- 5) Identify the appropriate housing option for each incarcerated individual well in advance of release.

Assets

- DOC mental health staff do this, but in an informal manner
- Housing is part of the pre-release checklist
- Housing assistance is available for second chance program participants

Barriers

- Difficult to know the housing options across the state
- Offenders discharge with limited resources
- Public housing authority restrictions on offenders
- Difficult to pinpoint exact residence for offenders who discharge without supervision.

Gaps

- Difficult for limited case management staff with limited time and resources to know all of the options

- Local public housing authorities have rules prohibiting the housing of offenders.

Who does what, when;

- During FY 13, DOC will attempt to develop a relationship with state and local housing authorities in an effort to address the local restrictions placed on offenders.

- 6) Educate offenders about strategies for finding and maintaining housing in the community, and teach them about their legal rights as tenants in the private rental market.

Assets

- A vehicle to provide this information exists. It could be incorporated into a Life Skills curriculum
- We have touched on some of these rights in the Reentry Resource manual that is available on the DOC website.

Barriers

- Local housing authorities have different rules.

Gaps

- Lack of staff time to provide this information.

Who does what, when;

- DOC will review this recommendation with the Executive Reentry Committee and local community contacts to explore ideas that other agencies and entities may have.

- 7) Provide individuals who are entering the private rental market—and who demonstrate that they are without adequate resources to pay rent—with small stipends and/or housing assistance for the period immediately after release.

Assets

- This process is already in place for offenders participating the second chance grant project

Barriers

- Participation is limited and does not meet the overwhelming need for this type of service

Gaps

- Funding source and an entity to coordinate it

Who does what, when;

- DOC recognizes the importance of ensuring stable housing, but this recommendation is not one that can be readily or easily addressed at this point.

- 8) Develop “re-entry housing,” to meet the specific and unique needs of people released from prison.

Assets

- Currently have contracts with numerous halfway house vendors
- Currently have faith partners who provide housing assistance

Barriers

- Although there are some resources, accessing them is problematic for facility case managers due to caseload size and other work duties

Gaps

- Some resources are available but need to provide structure for facility staff to access the resources

Who does what, when;

- TRS and Community Corrections will work with community partners to develop better information relating to housing access

9) **Encourage private sector or nonprofit housing developers or community-based organizations to develop housing accessible to people leaving prison.**

Assets

- Some non-profit treatment providers have transitional housing and are willing to work with DOC to place specific offenders (mental health offenders, second chance participants)

Barriers

- DOC currently has no formal relationship with private sector housing.

Gaps

- A funding source is necessary

Who does what, when;

- DOC recognizes the importance of ensuring stable housing, but this recommendation is not one that can be readily or easily addressed at this point.

10) **Consider individuals leaving prison who have histories of homelessness as part of the homeless priority population, to facilitate their access to supportive housing made available under the McKinney-Vento Act.**

Assets

- Excellent working relationships with many agencies who provide housing

Barriers

- Ability to facility staff to coordinate housing assistance

Gaps

- Some housing is available but staff at facilities do not routinely have time for assisting offenders in developing housing resources

Who does what, when;

- TRS will work with community partners to facilitate access of facility staff to community partners who provide housing assistance.

Policy Statement: Planning Continuity of Care

Provide each offender with access to community-based health care and treatment providers, prior to the release of an individual, help to ensure that he or she receives uninterrupted services and supports upon his or her return to the community.

(Reference: Report of the Reentry Policy Council, pgs. 282-292)

Recommendations:

- 1) Prepare a summary health record containing information about important medical problems, prior diagnostic studies, allergies, and medications for each person released from prison prior to his or her release.

Assets

- The electronic health record is capable of preparing a discharge summary.
- Currently a discharge summary is provided that outlines offender medical and mental health problems.

Barriers

- Offenders would need to sign a release in order to generate the information and distribute it to a specific community provider.

Gaps

- A summary health record is currently provided

Who does what, when:

-

- 2) Connect prisoners to treatment and health care providers in the community prior to their release to prevent gaps in treatment and services.

Assets

- Medical staff does make referral arrangements for those offenders discharging with sever medical needs.

Barriers

- Medical staff usually makes referral suggestions to offenders as to where they should go or report to after release for continuing care.

Gaps

- Offenders have few resources and usually no health insurance in rural parts of the state to access medical care

Who does what, when:

- TRS will continue to develop referral information for low cost medical care facilities

- 3) Provide prisoners receiving medications with a sufficient interim supply of essential medications upon their discharge into the community.

Assets

- DOC medical already does this.

Barriers

- Cost prohibits providing more than 30 day supply

Gaps

- DOC does not provide a written prescription for discharging offenders who are on medications

Who does what, when;

- DOC medical will continue to do this.
- DOC medical will examine the use of discharge prescriptions for offenders

- 4) Educate people in prison about continuity of care and provide them with the summary health record and other important medical records prior to discharge.

Assets

- Currently have chronic disease self-management (CDSM) programs
- Medical staff provide health care education to offenders with chronic medical conditions

Barriers

- CDSM programs are not available at all facilities

Gaps

- CDSM programs are not available at all facilities

Who does what, when;

- TRS will continue to work in developing CDSM programs system wide

Policy Statement: Creation of Employment Opportunities

Promote, where appropriate, the employment of people released from prison and facilitate the creation of job opportunities for this population that will benefit communities.

(Reference: Report of the Reentry Policy Council, pgs. 293-305)

Recommendations:

- 1) Educate employers about financial incentives, such as the Federal Bonding Program, Work Opportunity Tax Credit, Welfare-to-Work programs, and first-source agreements, which make a person who was released from prison a more appealing prospective employee.

Assets

- Much of this information is already listed in the DOC reentry resource manual.
- Many of the frequent partners that hire ex-offenders are already aware of these options.
- Developing partnerships with OESC and COWIB may help disseminate information to potential employers.

Barriers

- Unsure as to how to advertise these benefits to potential employers.

Gaps

- Staff availability to seek out potential employers.

Who does what, when;

- DOC's executive communication officer will work with OESC and COWIB during FY 12 to develop an informational presentation on the benefits of hiring offenders.

- 2) Determine which industries and employers are willing to hire people with criminal records and encourage job development and placement in those sectors.

Assets

- Developing partnerships with OESC and COWIB may help disseminate information to potential employers.

Barriers

- Many employers are unwilling to go on record that they will hire offenders.

Gaps

- Unsure which staff will coordinate this effort, however, the community corrections division has the most interface with employers.

Who does what, when;

- DOC's executive communication officer will work with OESC and COWIB during FY 12 to develop an informational presentation on the benefits of hiring offenders.

- 3) Review employment laws that affect the employment of people based on criminal history, and eliminate those provisions that are not directly linked to improving public safety.

Assets

- Headway has been made in this area, laws have been passed mandating that certain professions must have a review process in place before revoking someone's professional licensure or certification.

Barriers

- This requires coordination with lawmakers and governing boards and bodies over multiple professions.

Gaps

- Time and dedicated staff to research all the laws and policies that restrict offender employment

Who does what, when;

- T&RS staff will continue to coordinate with the DOC legislative liaison and other state agencies to address employment issues as they relate to laws.

- 4) Promote individualized decisions about hiring instead of blanket bans and provide documented means for people with convictions to demonstrate rehabilitation.

Assets

- Excellent work release programs are provided by Community Corrections
- Developing better working relations with Oklahoma Employment Security Commission
- Community partners who specialize in employing convicted felons

Barriers

- Current job market is extremely tight with offenders competing with the public for employment

Gaps

- DOC does not have any employment development specialists
- DOC does not currently have funding for contracting for employment development

Who does what, when:

- TRS will continue to expand cooperative relationships with OESC
-

- 5) Use community corrections officers and third-party intermediaries to assist employers with the supervision and management of people released from prison.

Assets

- This is done to some degree through PPWP crews and volunteer organizations who do supervise offenders in the community.

Barriers

- Limited correctional officer staffing

Gaps

- DOC has no jurisdiction over those offenders that discharge from prison with no supervision.

Who does what, when:

- DOC will continue to promote volunteer involvement with offenders as they reenter the community.

- 6) Identify community service opportunities and internships for people released from prison who cannot find work so that they can acquire real work experience and on-the-job training.

Assets

- Prior to release, offenders have the opportunity for work

Barriers

- Lack of resources to develop community service opportunities and internships
- Offender need to obtain paid employment to meet obligations

Gaps

- Ability for offender to enter into work environment in a non-paid status

Who does what, when:

- TRS and Community Corrections will work to determine if these opportunities would be beneficial

Policy Statement: Workforce development and the transition plan

Connect offenders to employment, including supportive employment and employment services, before their release the community. (Reference: Report of the Reentry Policy Council, pgs. 306-316)

Recommendations:

- 1) Initiate job searches before offenders are released using community-based workforce development resources.

Assets

- DOC already allows offenders to exit community correction facilities on work release status.

Barriers

- Not everyone discharges from community security and has the opportunity to find a work releases job.
- Those that find jobs may not intend on staying on the job after release, because they have a home or ties to another part of the state.

Gaps

- Not enough community corrections beds

Who does what, when:

- Division of Community Corrections will continue to explore possible avenues of increasing work release bed as appropriate.

- 2) Encourage employers to visit the correctional facility to meet with prospective employees before release.

Assets

- Some employers are willing to assist with transporting offenders to and from work and therefore are familiar with the facility.
- Leadership Academy designed to target citizens, business leaders and employers about what DOC does and what it is designed to do.

Barriers

- Many employers do not want to go on record as hiring offenders, and do not want to be bombarded with potential applicants by visiting a facility

Gaps

- Lack of employers willing to visit the facility.

Who does what, when:

- DOC will continue to explore any and all possible avenues to encourage employer involvement with the offender population prior to discharge.

3) Engage community members and community-based services to act as intermediaries between employers and job-seeking individuals.

Assets

- Relationships exist with many faith-based organizations and job development organizations (TEEM) who assist in finding offender's jobs.

Barriers

- These organizations and entities have scarce resources too

Gaps

- Limited staffing, especially at community security levels, makes it very difficult for DOC staff to coordinate contact with community members and community based service providers

Who does what, when:

- TRS and Community Corrections will continue to work with community based partners in developing employment opportunities

4) Promote use of work-release programs as a transition between work inside a correctional facility and work after release into the community.

Assets

- DOC utilizes work release at community work centers, community correction centers and halfway houses

Barriers

- Some offenders find it difficult to find jobs when they reach work release status

Gaps

- All offenders do not receive the chance to transition to work release or a community facility.
- Limited number of work release slots/beds.

Who does what, when:

- DOC will continue to utilize work release status as a transitional tool from incarceration to the community and will explore the options to expand work release, if possible.

5) Encourage community networks to support offenders who participate in work release programs.

Assets

- DOC utilizes work release at community work centers, community correction centers and halfway houses
- DOC has community partners who specialize in employment assistance for offenders

Barriers

- Community network organizations and entities have scarce resources too

Gaps

- State-wide identification of community partners and employers who will provide work opportunity for offenders

Who does what, when:

- Community Corrections will continue to work with community partners and employers to expand opportunities for employment

- 6) Provide individuals, upon their release from prison, with written information about their prospective employers or community employment service providers and official documentation of their skills and experience, including widely accepted credentials and/or letters of recommendation.

Assets

- Workforce Investment Boards may be able to provide prospective employment information to discharging offenders

Barriers

- Offenders need access to computers and the internet in order to apply for jobs
- Offenders need basic computer training

Gaps

- Need computer equipment with limited internet access for offenders nearing discharge to begin job search

Who does what, when:

- Examine the current policy restricting internet access for offenders

Policy Statement: Victims, Families, and Communities

Prepare family members, victims, and relevant community members for the released individual's return to the community, and provide them with protection, counseling, services and support, as needed and appropriate. (Reference: Report of the Reentry Policy Council, pgs. 317-330)

Recommendations:

- 1) Provide notification and appropriate information to victims concerning the offender's release and re-entry process.

Assets

- VINE system

Barriers

- VINE does not work if victims do not register or do not know to register
- Some aspects of VINE are not victim-friendly

Gaps

- Not all victims register with this system

Who does what, when;

- TRS will continue to work to provide community information related to the VINE system

- 2) Offer counseling and support to crime victims preparing for the return of an individual to the community.

Assets

- Healing Communities project to work with community organizations in support of victims of crime
- Impact of Crime programs have been implemented at designated locations

Barriers

- DOC does not have resources for direct services to victims and would not be the appropriate agency to coordinate those services

Gaps

-

Who does what, when;

- Better coordination with victim support agencies when identified offenders are preparing for release

- 3) Ensure that family members receive adequate notification and information regarding the offender's impending release.

Assets

- VINE

Barriers

- Not all victims register with this system

Gaps

- Not all victims register with this system

Who does what, when;

- Need to have resources to better educate the public about VINE

- 4) Consider the needs and strengths of the individual's family and then build community networks to provide counseling, safety planning, and other services to help the family cope with the emotional, financial, and interpersonal issues surrounding the individual's return.

Assets

- Use of strength-based case planning for certain offenders
- Development of community partners for post-release services

Barriers

- Not enough staff trained in strength-based processes
- Offenders are not located in home communities prior to discharge

Gaps

-

Who does what, when:

- Additional training in strength-based case planning
- Better use of geographic location and assignment prior to discharge

- 5) Create policies for child-support debt management and collection that encourage payment and family stability, and engage family members in creating a viable support strategy.

Assets

- Forging new relationships with DHS Child Support

Barriers

- Offender's perception that it is not in their best interest to disclose information about their children

Gaps

- Data sharing agreement with DHS

Who does what, when:

- Continue to work towards developing data sharing systems

- 6) Ensure timely and appropriate notification of key representatives of the community.

Assets

- DOC has IT capability to provide release projections and notifications to community partners

Barriers

- Not sure who to notify in the community
- Offender information can change as to discharge plans

Gaps

-

Who does what, when:

- Continue to work with E&A to develop discharge reports, both aggregate and individual

Policy Statement: Identification and Benefits

Ensure that individuals exit prison with appropriate forms of identification and that those eligible for public benefits receive those benefits immediately upon their release from prison.

(Reference: Report of the Reentry Policy Council, Pgs. 331-342)

Recommendations:

- 1) Ensure interagency collaboration to effectively screen offenders for eligibility for TANF, Medicaid, supplemental security income, food stamps, and other benefits, and to facilitate successful pre-release application for these benefits.

Assets

- Currently work on accessing entitlement programs for SMI offenders

Barriers

- Lack of knowledge and dedicated staff to provide these services

Gaps

- DOC staff does not have eligibility criteria for entitlement programs
- Due to staffing and work load, staff does not have sufficient time to coordinate this process

Who does what, when:

- DOC supports this idea, but feels these are the responsibility of partner agencies and entities.

- 2) Assess individuals in prison for eligibility for veterans' benefits and services, and ensure access to those benefits for eligible individuals.

Assets

- Local VA has supplied a position that travels to each facility and works with the offender population prior to discharge in an effort to reestablish available benefits

Barriers

- Only one position
- DOC information on offenders who have military service is self-reported information.

Gaps

- Lack of dedicated staff, and lack of data sharing agreement with VA to determine the how many incarcerates may have served in a branch of the military.

Who does what, when:

- Programs and mental health will discuss with the VA rep the possibility of obtaining better data.

- 3) Help offenders identify and apply for appropriate benefits and identification as part of their transition plan.

Assets

- Identification is part of DOC pre-release planning.

Barriers

- Offenders discharge without appropriate identification and also transfer to community without required identification
- Offenders may not have the funds for obtaining identification

Gaps

- Limited staffing makes it difficult to focus and follow-up on offenders to ensure they have gotten their birth certificate

Who does what, when:

- DOC Programs and Legal have contacted DPS regarding the possibility of DOC producing state ID cards for offenders, or if the offender ID can be used as a form of photo ID post discharge.

- 4) Ensure that documents issued by departments of corrections are accepted as valid identification by other agencies.

Assets

- CRC is accepted a one form of secondary ID for obtaining state-issued ID

Barriers

- Obtaining social security card

Gaps

- Offender ID is not an acceptable form of photo ID in the state

Who does what, when:

- Hold staff accountable for ensuring offenders obtain required ID

- 5) Improve collaboration among agencies serving individuals reentering the community.

Assets

- DOC has good working relationships with treatment and services providers.

Barriers

- It is sometimes difficult to meet the requests of service providers which can strain relationships.

Gaps

- Lack of a standard package of information concerning the offender that can be released to community partners

Who does what, when:

- T&RS staff is working internally to develop a better pre-release process that will produce a set package of offender information.

- 6) Ensure timely access to Medicaid after release for eligible individuals by suspending, instead of terminating, Medicaid benefits during incarceration.

Assets

- Have very limited staff with expertise in these areas
- Have excellent working relationship with OHCA

Barriers

- Lack of knowledge of Medicaid guidelines

Gaps

- Lack of staff time to focus on entitlement programs

- Lack of information relating to eligibility criteria and benefit payment

Who does what, when;

- TRS staff will continue to work with the OHCA to explore suspension of Medicaid benefits upon reception

7) Facilitate access to “nonrecurring” TANF benefits by individuals with criminal records who are re-entering the community.

Assets

- Currently work on accessing entitlement programs for SMI offenders

Barriers

- Lack of knowledge and dedicated staff to provide these services

Gaps

- DOC staff does not have eligibility criteria for entitlement programs
- Due to staffing and work load, staff does not have sufficient time to coordinate this process

Who does what, when;

- DOC supports this idea, but feels these are the responsibility of partner agencies and entities.

8) Adopt a narrow definition of “in violation of a condition of parole/probation” for the purposes of TANF, food stamps, SSI & public housing.

Assets

- Community Corrections has current information relating to offender violations

Barriers

- No coordinated process for interfacing with agencies who oversee these programs

Gaps

- Coordinated information sharing is non-existent

Who does what, when;

- TRS will continue to work with entitlement agencies to clarify this area

9) Adopt balanced admission and eviction policies for public housing that consider individual circumstances.

Assets

- HUD has issued a position paper encouraging local housing authorities to be more lenient when considering housing for offenders

Barriers

- Local housing authorities can make their housing rules more stringent than the federal ones.
- Most information historically supplied to DOC is that offenders are not able to access public housing as a housing option.

Gaps

- DOC has no control over this.

Who does what, when;

- DOC T&RS will engage in dialogue with the state level housing authority to better understand the availability of public housing for the offender population

10) Ensure continued Medicaid coverage for TANF families with parents who are released from prison.

Assets

- Working relationship with OHCA

Barriers

- Lack of experience with entitlement programs
- Lack of documented information on offender families at time of reception

Gaps

- Lack of staff expertise and time to devote to this area

Who does what, when;

- Open discussions with entitlement agencies on this topic

DECISION POINT #4: PAROLE RELEASE DECISION MAKING

Policy Statement: Advising the Releasing Authority

Inform the releasing authority (where appropriate) about the extent to which the offender is prepared to return to the community (and the community is prepared to receive the individual).

(Reference: Report of the Reentry Policy Council, pgs. 230-242)

Recommendations:

- 1) Convene a transition planning team to review the offender’s progress in the implementation of the transition plan and collect other information to advise the releasing authority and initiate the transition planning process.

Assets

- Have ability to collect and report information on risk and need levels from LSI-R as well as programmatic participation and misconduct history.
- We develop case plans based on criminogenic needs.

Barriers

- We currently do not utilize a team process to view offender progress, unless they are in specialty programs.

Gaps

- The Pardon & Parole board makes recommendations to the Governor, and we have little control over what information they pass on.

Who does what, when;

- The DOC Parole Processing unit will talk with the Pardon and Parole Board to work on what information would be most helpful to them when making parole recommendations.

- 2) Use a validated risk-assessment instrument and a comprehensive analysis of a person's criminal history and behavior in the institution to predict the risk he or she would present to the community if and when released.

Assets

- We currently utilize a validated risk assessment at reception.
- Offender violations and programmatic completions are reported in OMS or the Program Participation database.

Barriers

- The risk assessment is not updated after reception.
- Case managers and Parole Investigators are not trained on the LSI-R.

Gaps

- We do not have the staff necessary to train all case managers on how to complete a LSI-R.
- Parole Investigators are not DOC employees.

Who does what, when;

- DOC Evaluation and Analysis unit will work toward a revalidation of the LSI-R . T&RS will discuss with the Training unit the need to train staff on the LSI-R.

- 3) Consider information related to the individual's strengths and service needs insofar as these issues affect public safety and/ or the establishment of terms and conditions of release.

Assets

- We capture offender treatment needs in our data systems.

Barriers

- We do not have a standardized strengths assessment process or fields in our data systems that record this information.

Gaps

- DOC has no control over what special conditions are placed on a parolee.

Who does what, when;

- Program unit will investigate what standardized strength assessments exist and what the feasibility is of implementing a process to collect this information.

- 4) Notify victims when the releasing authority is considering release of an offender and invite victims to provide input into the release decision and the terms and conditions of release.

Assets

- We have a victim services unit and a victim notification system.

- Pardon and Parole Board seek input from victims

Barriers

- Victim Services is not currently notified when an offender comes up for parole consideration.

Gaps

- Victim Services lacks the staffing capacity to speak with the victims of each offender who is considered for release on parole.

Who does what, when;

- Continue to work with the Pardon and Parole Board to support this process

- 5) Gauge the willingness and capacity of family members to receive the person upon his or her release and ensure that they receive an opportunity to provide input into the terms of release.

Assets

- We have transition coordinators trained in the Wraparound model that includes family supports.
- Probation and parole staff must identify a “capable guardian.”

Barriers

- Some offenders do not want their family members contacted or involved and do not provide accurate contact information.

Gaps

- Governor and Pardon and Parole Board control what the terms of release are.

Who does what, when;

- The Parole Processing Unit will discuss with the Pardon and Parole Board and the Governor’s office the possibility of including family members in the parole process and explain the potential benefits of doing so.

- 6) Capitalize on the familiarity of local leaders, including law enforcement, with the needs of their community to develop conditions of release that will enable the releases to make meaningful contributions to the community.

Assets

- Current development with community partners for release planning
- Good working relationships with the Pardon and Parole Board

Barriers

- Offender release from facilities to locations all across the state and are usually not housed in facilities near the community to which they will release.

Gaps

- Pardon and Parole Board determines release conditions

Who does what, when;

- DOC will continue to coordinate information sharing with the Pardon and Parole Board

- 7) Gauge willingness and capacity of community-based service providers to receive the person upon his or her release from prison.

Assets

- We have good working relationships with various service providers across the state

Barriers

- Offender release from facilities to locations all across the state and are usually not housed in facilities near the community to which they will release.
- Many service providers are amenable to providing services to offenders, but are not willing set up pre-release appointments because of the number of no-shows.

Gaps

- Many rural communities lack needed services.

Who does what, when;

- DOC will continue to network and engage local community entities and agencies.

- 8) Present to the releasing authority a clear and concise analysis of all information deemed important to determining whether the offender presents a risk to community safety.

Assets

- We utilize a validated risk instrument and collect other data related to offender behavior while incarcerated.

Barriers

- DOC plays a passive role in the parole process because the investigation/recommending authority and releasing authority are outside our agency.

Gaps

- The Pardon & Parole board makes recommendations to the Governor, and we have little control over what information they pass on.

Who does what, when;

- The DOC Parole Processing unit will talk with the Pardon and Parole Board to work on what information would be most helpful to them when making parole recommendations and a usable format in which we can pass on this information.

Policy Statement: Release Decision

Ensure that offenders exiting prison that it is determined pose a threat to public safety are released to some form of community supervision where possible; use the results generated by a validated risk-assessment instrument, in addition to other information, to inform the level and duration of supervision.

(Reference: Report of the Reentry Policy Council, pgs. 243-253)

Recommendations:

- 1) Train releasing authorities to use and analyze the information provided to them objectively and effectively.

Assets

- The Parole board has a validated risk assessment tool.

Barriers

- It is unclear how much the parole board's assessment tool factors into release decision making.
- Very few offenders' parole, and half of the discharge in a year's time discharge with no supervision.

Gaps

- DOC no longer prepares parole reports for input into parole decisions

Who does what, when;

- Continue to work with the Pardon and Parole Board

- 2) Ensure that, where risk assessment, criminal history information, and other factors reflect a likelihood of the person re-offending, the person is assigned to a period of community supervision after his or her release from prison.

Assets

- This process is controlled by the Courts and by the Pardon and Parole Board

Barriers

- Risk assessment tools are not consistently utilized by the Courts
- Many offenders waive parole consideration

Gaps

- This process is controlled by the Courts and by the Pardon and Parole Board

Who does what, when;

- This would require modification to not only agency policy and procedure, but some state statute as well. This may not be an area that DOC can accommodate as part of the final strategic plan.

- 3) Ensure that proposed conditions of release are supported by research, recognize the particular strengths and needs of each individual and the resources of the community, and are consistent with the rules that the releasing authority is prepared to enforce.

Assets

- Offenders ordered to a period of community supervision have conditions ordered by the appropriate authority

Barriers

- Conditions are not consistently based on research and are not generally strength based
- Resources in the community do not consistently match the needs of the offender population

Gaps

- Conditions are not consistently research or needs based

Who does what, when;

- DOC will continue to work with the Courts and the Pardon and Parole Board to assist in developing conditions that are research and need based

- 4) Determine how various payments (*e.g.*, restitution, child support, fines) expected from the offender upon his or her release will be incorporated into the conditions of release.

Assets

- Court-ordered payments are incorporated into supervision plans

Barriers

- Probation and Parole cannot enforce financial fines other than court costs and restitution in accordance with ACA guidelines

Gaps

- There is a disconnect between agencies whose obligation is to collect assessed payments and the DOC

Who does what, when;

- Supervision officers will continue to encourage offenders to address all financial obligations and will include them in supervision plans

- 5) Articulate in writing the reasons for the decision by the releasing authority whenever such decision is discretionary.

Assets

- This is a function of the Pardon and Parole Board

Barriers

- Possible lack of documentation for discretionary decisions

Gaps

- This is a function of the Pardon and Parole Board

Who does what, when;

- This is a function of the Pardon and Parole Board

- 6) Ensure that a procedure exists to modify and revise, as appropriate, the conditions of release, including the possibility for early discharge from the authority of the court or supervising administrative agency.

Assets

- Probation and parole officers can submit a special report to the Pardon and Parole Board recommending modification of conditions
- Statute requires parole supervision for no longer than three years, unless risk dictates otherwise

Barriers

- Special reports are time consuming for officers and the approval process can take long periods of time

Gaps

- Some conditions ordered are not based on risk or need

Who does what, when:

- DOC staff will continue to work with the Pardon and Parole Board to move toward risk/need based conditions

DRAFT

Phase Three: Staying Home; The Community & Discharge Phase

DECISION POINT #5: SUPERVISION & SERVICES

Policy Statement: Design of Supervision Strategy

Review and prioritize what the releasing/sentencing authority has established as terms and conditions of release/supervision and develop a strategy that corresponds to the resources available to the supervising agency, reflects the likelihood of recidivism, and employs incentives to encourage compliance with the conditions of release. (Reference: Report of the Reentry Policy Council, pgs. 343-355)

Recommendations:

- 1) Engage community members, including representatives from community corrections, law enforcement, and community-based organizations, to serve on a transition team with corrections staff, and charge the team with the development of a comprehensive supervision strategy.

Assets

- A version of this exists already with sex offenders, using the containment team approach.

Barriers

- Resources for development of transition teams for all discharging offenders
- Involvement of community based representatives will be difficult to arrange due to geographic location of discharging offender populations

Gaps

- Lack of staff to develop teams.

Who does what, when:

- DOC will work with community partners to ensure supervision strategies are developed for high risk offenders as close to the point of discharge as possible

- 2) Apply the information from risk- and needs-assessment instruments administered prior to the release decision, and re-assess offenders if necessary to determine appropriate supervision strategies.

Assets

- For offenders releasing to supervision, the supervising officer performs a new risk assessment in the community.
- Institutional information is available to officers via the OMS

- Reentry plans are developed for all offenders and are provided to community supervision staff at the time an offender discharges

Barriers

- Can take months for the facility information to finally arrive at the local district office, meaning the supervising officer must start from scratch in many cases.
- Some officers find limited value in the facility information and do not utilize it when planning an offender's supervision plan
- Offender progress information in OMS is limited in relation to intuitional performance

Gaps

- Time that it takes to get information from the facility to the supervising officer.

Who does what, when;

- Training division will ensure training of new community officers includes how to access institutional information relating to offenders

- 3) Assign a supervision officer to each individual well before the date of his or her release and engage the officer on the transition planning team.

Assets

- This process is being piloted with the second chance program participants

Barriers

- Where an offender is going to be supervised may be across the state from the facility that he or she will discharge from.

Gaps

- Lack of facilities to relocate offenders back to the geographic area that they will be returning to.

Who does what, when;

- This recommendation may be outside of the scope of what DOC can currently accomplish.

- 4) Seek information from, and promote cooperation with, law enforcement in the jurisdiction to which an individual will return before his or her release.

Assets

- DOC attempts to maintain good working relationships with local law enforcement.
- Rural probation and parole operations have excellent relationships with local law enforcement
- Discharge rosters are provided to local law enforcement
- Placement information is provided to local law enforcement prior to GPS program placement

Barriers

- Metro areas have the largest concentration of offenders but due to the nature of metro law enforcement, most staff relationships are individual officers reaching out to law enforcement officers based on common events/issues
- Discharge rosters do not have detailed information on each discharging offender

Gaps

- Need to develop information sharing agreements with local law enforcement to better facilitate exchange of information on releasing offenders

Who does what, when:

- IT will develop discharge roster that is county-specific and that can be distributed electronically.

- 5) Transfer state prison inmates as the release date approaches (and as appropriate and feasible) to correctional facilities nearest to the community to which the individual will return.

Assets

- DOC has the technology to coordinate this placement

Barriers

- Due to location of facilities and the number of offenders releasing, this is not feasible.

Gaps

- Over 50% of offenders discharge from minimum and higher security with the result of restricting availability of community transition services

Who does what, when:

- DOC will examine reentry discharge options in an attempt to develop alternatives for offenders discharging from minimum security and higher

- 6) Provide each individual before release with a written copy of his or her terms and conditions of release and transition plan and explain them clearly, ensuring that he or she understands them.

Assets

- Offenders receive a copy of their transition plan but do not consistently receive a copy of rules and conditions of supervision, to include parole conditions.

Barriers

- For offenders with a suspended sentence after a term of incarceration, the rules and conditions of supervision are not always included in the sentencing documents

Gaps

- Facility records officers may not always recognize the requirement of supervision upon release

Who does what, when:

- Facility records officers can ensure rules and conditions are provided for offenders who have a portion of their sentence suspended
- Ensure parole conditions are provided to the offender upon parole release

Policy Statement: Implementation of Supervision Strategy

Concentrate community supervision resources on the period immediately following the person's release from prison, and adjust supervision strategies as the needs of the offender released, the victim, the community, and the family change. (Reference: Report of the Reentry Policy Council, pgs. 358-369)

Recommendations:**1) Focus supervision resources on the period directly following release.****Assets**

- DOC has implemented evidence based supervision practices to ensure that those most at risk of reoffending receive the most supervision and services.

Barriers

- Offenders discharging to a suspended sentence are not supervised in any different manner than a suspended sentence received directly from the Court

Gaps

- No consideration is given to unique risk and needs of offenders who have completed a period of incarceration immediately prior to reception to supervision

Who does what, when;

- Recommended supervision guidelines have been developed for offenders who are discharging from prison directly to probation supervision

2) Ensure contact between the supervision officer and probationer/parolee corresponds to level of risk presented.**Assets**

- DOC has implemented evidence based supervision practices to ensure that those most at risk of reoffending receive the most supervision and services

Barriers

- Risk is not assessed by probation and parole staff until the offender has been under supervision for 60 days

Gaps

- There is no policy directive for supervision guidelines for offenders discharging from custody to community supervision

Who does what, when;

- Review post discharge release supervision guidelines for implementation with designated populations

3) Supervise probationers or parolees in the community where they live.**Assets**

- Probation and parole officers have the latitude to conduct field work as necessary

Barriers

- Due to caseloads, many offender contacts are still scheduled office visits

Gaps

- Need to move toward community based supervision

Who does what, when:

- Community Corrections will continue to stress the importance of offender contacts with the opportunity to include family members and significant associates

4) Coordinate the activities of local law enforcement and probation and parole agencies.

Assets

- Rural probation and parole operations have excellent relationships with local law enforcement

Barriers

- Metro areas have the largest concentration of offenders but due to the nature of metro law enforcement, most staff relationships are individual officers reaching out to law enforcement officers based on common events/issues

Gaps

- Mixed messages to officers regarding development of resources to assist in supervision, more specifically officers are encouraged to develop treatment and services resources, but not necessarily law enforcement resources

Who does what, when:

- Community Corrections staff will continue to encourage development of all community resources to support staff and offenders

5) Leverage community-based networks to assist with the implementation of the supervision strategy, and consult family and community members regularly to determine their assessment of the person's adjustment to the home and/or neighborhood.

Assets

- Probation and Parole officers are trained to identify and include capable guardians in an offender's supervision plan
- Probation and Parole officers have developed excellent relationships with community treatment providers and incorporate them into supervision decisions when appropriate

Barriers

- Time necessary for officers to develop relationships with individuals supportive of the offender and their progress

Gaps

- Staffing contributes to workload issues that serve to impede this process

Who does what, when;

- Probation and Parole staff will continue to foster relationships supportive of successful supervision outcomes

- 6) Assess periodically the extent to which the individual's transition into the community is proceeding successfully and modify the supervision plan accordingly.

Assets

- Officers are well trained in risk assessment
- Officers use an automated transition plan that is easily revised
- Supervision guidelines require assessment on the fly with corresponding modification of the transition plan when indicated
- Officers generally have good working relationships with treatment providers

Barriers

- Caseload size and officer staffing can impact the timeliness of plan modifications

Gaps

- Resources are dedicated to offenders who are somewhat in crisis situations and offenders who are not in crisis, but a just barely getting by, are sometimes not allocated sufficient resources – either officer time or treatment resources

Who does what, when;

- Ensure supervision resources are expended on moderate and high risk offenders

- 7) Facilitate compliance by recognizing that people under supervision will require an adjustment period, and address the issues that this period poses.

Assets

- Officers are well trained in change management
- Officers are trained in motivational interviewing
- Officers are trained in cognitive interventions
- Officers have access to well developed sanction and incentive policies and practices

Barriers

- Caseload size and staffing provide challenges

Gaps

- Need to develop more meaningful incentives for officers to provide to offenders

Who does what, when;

- Community Corrections will continue to develop meaningful incentives for recognizing offender performance

Policy Statement: Maintaining Continuity of Care

Facilitate releases' sustained engagement in treatment, mental health and supportive health services, and stable housing.

(Reference: Report of the Reentry Policy Council, pgs. 370-382)

Recommendations:

- 1) Train community supervision officers to understand—and respond effectively to—the special needs of individuals with mental illness on probation or parole.

Assets

- Probation and parole officers are required to complete mental health training to maintain CLEET certification.
- DOC, in conjunction with ODMHSAS, has developed a Community Crisis Response Team training designed to equip officers with the knowledge and skills necessary to identify the signs of mental illness and take appropriate actions to deescalate any mental health crises.
- Received Mental Health and Justice Collaboration grant used to cross train PPO and mental health providers.
- ODMHSAS funds a significant amount mental health treatment for low income/uninsured clients.
- ODMHSAS has Reentry Intensive Care Coordination Teams (RICCT) that starts working with offenders who have severe mental illness prior to release and help them reintegrate.

Barriers

- Not all PPOs have been training in CCRT material.
- Not all PPOs were able to take part in the training.
- Communication between mental health providers and PPO is inconsistent and often non-existent.
- No policy in place to standardized mental health treatment referrals in a way that would help PPO and providers avoid difficulties in communication due to HIPPA restrictions.

Gaps

- Mental Health service coverage in the rural areas is diffuse and often requires significant travel.
- RICCT only covers to major metropolitan areas.

Who does what, when;

- DOC trainer Brian Bell will hold annual cross training in conjunction with ODMHSAS that includes both mental health providers and PPO.
- CCRT trainer Jay Hodges will facilitate two crisis intervention trainings annually for PPOs and create online training material.
- P&P Districts/offices will hold quarterly treatment team meetings with representatives from local mental health providers to address both macro and micro treatment issues in their area.
- Have DOC mental health staff create online training for officers on recognizing the symptoms of serious mental illness (SMI), specifically what to look for when a person stops taking their mental health medication.

- 2) Ensure that all community supervision officers know how to monitor people with substance abuse issues and how to engage probationers and parolees in treatment, where appropriate.

Assets

- ODMHSAS provides funding (SPTU) for indigent people on supervision to access substance abuse treatment.
- PPOs trained in Motivational Interviewing in order to enhance the clients' motivation to engage in treatment and maintain recovery.
- PPOs per policy must identify a "capable guardian" who is intended to assist the offender in maintain pro-social behavior.

Barriers

- DOC has difficulty monitoring utilization of SPTU funds because we can only monitor whom we refer, but not the cost of treatment.
- Officers mainly rely on self-report and urinalysis to detect drug use.
- Capable guardians are not being fully utilized or included in to supervision planning and treatment.

Gaps

- Only portions of the state are covered under SPTU funding.
- Funding for inpatient substance abuse treatment.

Who does what, when;

- Clinical Services Coordinator will develop training for PPOs on how to identify substance abuse treatment needs and how to best collaborate with providers.
- P&P districts/office will set up quarterly treatment team meetings with local substance abuse providers to discuss macro and micro treatment issues.
- DOC's ODMHSAS field representative will provide DOC with a quarterly utilization report for SPTU funds that the Clinical Services Coordinator will distribute to the P&P districts.

- 3) Coordinate physical health services for individuals with special health needs.

Assets

- Offenders who have been incarcerated have a very detailed health care record

Barriers

- Access to health care information is confusing to staff
- Offenders who are probationary offenders may not have any health information captured by the DOC

Gaps

- Probation and Parole Officer's lack of information about an offender's physical health

Who does what, when;

- Training unit will ensure accessing health information is discussed in officer training
- Discharge health summaries will be incorporated into discharge planning

4) Implement policies and programs that prevent people leaving prison from entering emergency shelters or otherwise becoming homeless.

Assets

- DOC facility case managers are required to obtain a proposed residence for all offenders releasing and document the address in the OMS.
- Proposed residences are verified prerelease for parolees and those on GPS supervision.

Barriers

- Offenders release from facilities to locations all across the state and in large numbers making verification of proposed residences difficult.
- Sex offenders are often released without their residence being verified as being in a “green zone” prior to their discharge leading to some offenders having to find alternative housing immediately upon release.
- Exclusionary criteria vary at each subsidized housing location.

Gaps

- There is an extensive waiting list for public housing.

Who does what, when;

-

5) Foster stability in housing for individuals released to the community.

Assets

- DOC has community partners who assist with housing needs of offenders
- Many offenders return to families who can provide appropriate housing

Barriers

- Sex offenders have very few resources for housing
- DOC has not been able to assist consistently with housing for special populations
- Many medical paroles are rejected due to no housing/medical care options

Gaps

- Funding for housing assistance for discharging offenders

Who does what, when;

- DOC will continue to work with community partners to identify sustainable housing for discharging offenders

Policy Statement: Job Development and Supportive Employment

Recognize and address the obstacles that make it difficult for an ex-offender to obtain and retain viable employment while under community supervision and during reentry.

(Reference: Report of the Reentry Policy Council, pgs. 383-389)

Recommendations:

- 1) Update community corrections policy so that it encourages, rather than discourages, employing people on probation or parole.

Assets

- Current supervision policy has rewards/sanctions model built in.
- COMIT has an employment module for developing a transition plan for employment.

Barriers

- Ability of officer to monitor offenders' participation at employment and education programs is difficult without formal agreements with various service providers.
- Restrictions placed on offenders in general and, to a great degree, sex offenders impede employability.

Gaps

- A lack of funding for vocational training in community for offenders.
- Due to a lack of staff and funding, many offenders do not address educational, substance abuse treatment and vocational needs during incarceration.

Who does what, when;

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- 2) Assist, to the extent appropriate, people with criminal records seeking to surmount legal and logistical obstacles to employment.

Assets

- Current policy requires that facility case managers ensure offenders have two valid forms of identification.

Barriers

- Some offenders are discharging from minimum and medium security without appropriate identification.
- Communication between PPO and local Workforce offices is minimal.

Gaps

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Who does what, when;

- Work with the Association of Reentry Professionals in their attempts to education employers on the benefits of hiring ex-felons (bonding, tax credits).
- DOC T&R Unit will develop strategic relationship with OESC to assist in job placement services for offenders.
- Districts/local offices will reach out to local Workforce offices to develop ways to collaborate and build in accountability mechanisms.

- 3) Promote supportive transitional employment programs through community corrections.

Assets

- Community Corrections has excellent work release programs for eligible offenders assigned to community corrections facilities

- Excellent community partners whose focus is offender employability

Barriers

- Some classes of offenders are not eligible to transfer to facilities where these programs are offered

Gaps

- Employment options for convicted felons is somewhat limited

Who does what, when:

- TRS and Division of Community Corrections will continue to work with community partners to ensure employment opportunities are developed

DECISION POINT #6: REVOCATION DECISION MAKING

Policy Statement: Graduated Responses

Ensure that community corrections officers have a range of options available to them to reinforce positive behavior and to address, swiftly and certainly, failures to comply with conditions of release.

(Reference: Report of the Reentry Policy Council, Pgs. 390-405)

Recommendations:

- 1) Establish an organized structure to guide the imposition of sanctions.

Assets

- Graduated responses to violations are in policy and are utilized efficiently.
- P&P has a decision matrix that is effective, understood, and well used by officers.

Barriers

- There are some judges who have not bought in graduated sanctions model and want to know about all violations.
- There are still many inconsistencies across the state in the use of incentives and sanctions.

Gaps

- Caseload size has a direct impact on an officer's ability to use incentives and sanctions.

Who does what, when:

- Develop ongoing training on the use of sanctions and how to determine which actions merit which sanctions, as well as how the LSI-R is utilized in this process.
- Look at feasibility of having all officers enter rewards and sanctions used into COMIT "Incentives" screen in order to better track and analyze their use.

- 2) Consider revocation and re-incarceration as the most serious of many different options available for addressing violations.

Assets

- Excellent operations procedure for sanctions and incentives
- Officers have been trained in the use of sanctions in response to technical violations

Barriers

- Officers may be reluctant to use more serious sanctions due to involvement of the Court

Gaps

- Funding to pay for jail sanctions

Who does what, when;

- Division of Community Corrections will continue to reinforce the use of sanctions and incentives in lieu of revocation

- 3) Assess individuals who violate conditions of release to gauge the level of response needed.

Assets

- Officers have flexibility in the use of sanctions.

Barriers

- Officers may be reluctant to use more serious sanctions due to involvement of the Court

Gaps

- Funding to pay for jail sanctions

Who does what, when;

- Division of Community Corrections will continue to reinforce the use of sanctions and incentives in lieu of revocation

- 4) Respond to technical violations of conditions of release by restructuring the conditions and expectations in a manner most likely to correct behavior and by imposing community-based responses.

Assets

- Parole Board inquires about the sanctions imposed prior to taking action on revocations.
- In some areas, the DA or Judge will also inquire about attempts to correct behavior when considering what corrective actions to take.

Barriers

- PPOs can make recommendations for modification of conditions but have no authority to actually modify them.

Gaps

- Timely remedy to request for condition modification

Who does what, when:

- Division of Community Corrections will continue to work with the Pardon and Parole Board staff with modification requests
- Local Probation and Parole staff will continue to work with local jurisdictions for modification of conditions when indicated

5) **Ensure meaningful positive reinforcements exist to encourage compliance with the terms and conditions of release.**

Assets

- PPOs have ability to give incentives for positive behavior including the reduction of supervision requirements or supervision discharge date.

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Barriers

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Gaps

- Lack the funding and capacity to provide positive ratio of rewards to sanctions.
- There is still pushback from Judges relating to advance termination.

Who does what, when:

- Judges need other Judges to educate them about low risk offenders and the reduced need for intervention activities.

6) **Consider privacy and confidentiality issues when sharing information.**

Assets

- DOC has a considerable amount of information in OMS, COMIT, and EZ Assess that can help in determining the best possible way to correct behavior.

Barriers

- There is uncertainty as how much and what types of information DOC can share with community partners concerning individual offenders without violating their confidentiality.

Gaps

- Lack of a consistent process for sharing critical information with community partners
- Need to identify what information can be shared with community partners and in what format

Who does what, when:

- TRS will coordinate with the General Counsel's office to better define what information can be shared and under what conditions

7) Engage the community in the process of responding to parole and probation violations.

Assets

- Community treatment providers assist in responding to violations
- Family members can and do provide assistance in responding to violations

Barriers

- Some of the information requires training and contextualization that most of the DOC partners do not have in order to be understood and properly utilized.

Gaps

- Information is not consistently shared with community partners
- Community partners are not clearly defined

Who does what, when;

- TRS will continue to work to develop processes to share information with community based partners

8) Provide the victim with an opportunity to inform the imposition of graduated responses.

Assets

- DOC has a Victim Services Unit that has begun involving faith-based partners in the “Healing Communities” model that encourages the community to engage in victim and offender reconciliation.
- Have a victim notification system in place to alert victims when offenders are released.

Barriers

- We do not have much engagement from victims unless owed restitution.

Gaps

- Lack of engagement of victims in community supervision unless there are complaints from the victim

Who does what, when;

- Victim Service, Legal, and Executive Communications unit will discuss the possibility of utilizing social media such as Facebook to help the public and victims provide information about offenders to DOC.

9) Provide judges who play a role in the supervision process with adequate information and training on how to tailor sanctions to the individual and the violation.

Assets

- Utilizing county jails as a sanction is fairly successful in rural areas.
- Administrative Office of the Courts has engaged in evidence based sentencing practices and has a staff person who provides the training to judges

Barriers

- Utilizing county jails as a sanction is difficult in urban areas
- Not all judges trust criminal justice research

Gaps

- Judges do not always give credence to recommendations made by probation and parole officers

Who does what, when:

- Districts/local offices will make attempts to meet with Judges to build relationships and educate them about P&P practices and policy and how they aim at enhancing public safety in a cost effective manner.

DECISION POINT #7: DISCHARGE AND AFTERCARE**Policy Statement: Planning Continuity of Care**

Ensure the transition process provides continued access to resources and services to produce offenders who are law-abiding citizens with strengths and skills necessary to manage the daily challenges they will face.

(Reference: Report of the Reentry Policy Council, Pgs. 358-369)

Recommendations:

- 1) Develop policies to guide supervision discharge practices.

Assets

- Current operational procedures guide discharge practices
- State statute outlines discharge requirements and supervision term lengths

Barriers

- Some probation and parole officers will not utilize supervision termination guidelines
- Some Courts refuse to allow DOC to terminate supervision in accordance with statute

Gaps

- Some offenders are remain under active supervision even though they are eligible for termination

Who does what, when:

- Division of Community Corrections will continue to monitor supervision discharge practices

- 2) Discharge should be a reward for offenders who have (a) completed a substantial period of community supervision without serious violations, and (b) successfully reduced their dynamic risk factors during their sentences.

Assets

- Officers use supervision termination guidelines very well and in accordance with statute and procedures
- Officers notify offenders of the opportunity for completing supervision early if they meet supervision goals
- Offenders are anxious to complete supervision goals if it results in termination of supervision

Barriers

- Not all offenders are motivated to do well
- Need more consistent notification to offenders of supervision termination options

Gaps

- No formal process for acknowledging completion of supervision requirements

Who does what, when:

- Division of Community Corrections will continue to develop and monitor termination guidelines
- Division of Community Corrections will develop formal process for acknowledging offender's completion of supervision requirements which will result in the offender receiving a certificate of completion

3) Lowest risk offenders might be discharged after relatively brief periods of successful community supervision.

Assets

- Low risk offenders are not required to remain under supervision by DOC procedures
- Risk and need assessments are completed early on in supervision and are the driving force for supervision activities
- Current move from the Courts to provide training to judges in evidence based sentencing

Barriers

- Some Courts refuse to allow DOC to terminate supervision on low risk offenders

Gaps

- Some Courts do not trust risk/need assessment
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Who does what, when:

- Division of Community Corrections will continue to work with the Courts in support of risk/need driven supervision

4) Identify ways to make discharge from supervision a formal recognition of the offender's success in serving with the requirements of the sentence and a public and visible acknowledgment of his or her re-integration into the community

Assets

- DOC has clear guidelines for completion of supervision requirements

Barriers

- Some Courts will not allow DOC to terminate supervision without authorization by the Court

Gaps

- Some Courts do not trust risk/need assessments
- DOC does not use a formal, positive notification to offenders who complete term of supervision

Who does what, when;

- Division of Community Corrections will develop official supervision completion document for issuing to offender upon successful completion of supervision

5) Take affirmative steps to restore civil and political rights for discharged offenders

Assets

- Collateral sanctions have been identified

Barriers

- There are numerous licensing restrictions – liquor license, cosmetology, etc.

Gaps

- There has not been a great deal of support for changes in many of these collateral sanctions

Who does what, when;

- Work with advocacy groups and agencies and that oversee licensure process to build traction for legislative changes that would allow offenders who have demonstrated pro-social behavior and have a conviction unrelated to the area of licensure.

6) Develop partnerships with community based organizations who share a commitment to offender success

Assets

- DOC has excellent community partners across the state who work with offenders prior to release as well as upon discharge

Barriers

- Over 50% of discharging offenders have no supervision requirements
- Offenders who discharge are not likely to seek help from DOC after release

Gaps

- Funding to support community based case management services for discharged offenders
- Identification of community partners in geographic areas who can provide support and assistance to discharged offenders

Who does what, when;

- TRS will continue to develop a one point referral resource for institutional discharges

7) **Develop a framework to ensure discharged offenders have access to community services necessary to support their continued transition into the community**

Assets

- DOC has excellent community partners across the state who work with offenders prior to release as well as upon discharge

Barriers

- Over 50% of discharging offenders have no supervision requirements
- Offenders who discharge are not likely to seek help from DOC after release

Gaps

- Funding to support community based case management services for discharged offenders
- Identification of community partners in geographic areas who can provide support and assistance to discharged offenders

Who does what, when;

- TRS will continue to develop a one point referral resource for institutional discharges

8) **Develop community partnerships to ensure appropriate service providers are in place to assume case management assistance to discharged offenders**

Assets

- DOC has excellent community partners across the state who work with offenders prior to release as well as upon discharge

Barriers

- Over 50% of discharging offenders have no supervision requirements
- Offenders who discharge are not likely to seek help from DOC after release

Gaps

- Funding to support community based case management services for discharged offenders
- Identification of community partners in geographic areas who can provide support and assistance to discharged offenders

Who does what, when;

- TRS will continue to develop a one point referral resource for institutional discharges

9) **Ensure the reentry plan is available to community partners who may respond to requests from the offender**

Assets

- DOC has a computer based, assessment driven transition plan.

Barriers

- Lack of clear instructions for field staff as to what information can be released to community partners
- Offenders must provide written release of information for certain types of privileged information

Gaps

- Lack of clear identification of community partners who can receive information relating to an offender
- Lack of well defined process to provide the requested information

Who does what, when;

- TRS will continue to work with the General Counsel’s office in determining best processes to release appropriate information
- TRS will facilitate the development of a document containing information necessary for community partners assisting offenders upon reentry
- TRS will facilitate the development of an electronic document with offender discharge information for specific geographic locations

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| <ul style="list-style-type: none">• Review existing laws that limit ex-offenders’ right to vote or hold office; identify circumstances for which a record of prior felony conviction is not a reasonable grounds for such exclusions, and build support for an initiative to revise those laws.• Review the processes by which discharged offenders may restore their civil and political rights, and, if deemed necessary, identify ways to simplify the procedures.• Review laws and procedures effecting released offenders’ access to housing, healthcare, food stamps, welfare benefits, and educational benefits Laws restricting employment for persons convicted of felonies, and remove restrictions when the nature of the prior conviction is unrelated to a legitimate public purpose.• Existing procedures governing granting clemency and pardon, and expunging criminal records also could be reviewed, and changes proposed, if needed, to make these options more readily available to ex-offenders |
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