

TECHNICAL ASSISTANCE REPORT

NIC TA No. 06-C-2046

EBP Action Planning

Session held August 8-10, 2006

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Disclaimer

This technical assistance activity was funded by the Prisons Division of the National Institute of Corrections. The Institute is a Federal agency established to provide assistance to strengthen state and local correctional agencies by creating more effective, humane, safe, and just correctional services.

The resource person completing this technical assistance did so through a cooperative agreement, at the request of the Iowa Department of Corrections, and through the coordination of the National Institute of Corrections. This direct on-site assistance and this subsequent report are intended to assist the agency in addressing issues outlined in the original request and in efforts to enhance the effectiveness of the agency.

The contents of this document reflect the views of Mark Carey. The contents do not necessarily reflect the official views or policies of the National Institute of Corrections.

Request for technical assistance

The request for assistance was initiated by the Director of Iowa Department of Corrections. In 2004, Iowa Field Service Districts underwent an NIC sponsored evidence based practices planning session. Each District left the session with an action plan to advance the principles and practices that lead to reduced recidivism. The Director of Iowa DOC indicated an interest to replicate such a process with the institutions under the authority of DOC. Since that time, a number of statewide initiatives have been transforming the manner in which government (and the Iowa DOC in particular) is doing business. This larger context has provided good timing for the current action planning request made of NIC for Iowa state correctional institutions.

The statewide initiatives include (see Appendix G for a description of each):

- Governor's Leadership Agenda
- Safe Communities Enterprise Management Team
- Charter Agency
- Accountable Government Act (AGA)
- Iowa Excellence Initiative (IEI)

The State of Iowa has selected the Public Strategies Group to provide consultation services in the refinement of its mission/vision (BHAG's: Big, Hairy Audacious Goals), key outcome measures, procedures, processes, training, and techniques to carry out the goals in Excellence in Government. For example, PSG has provided expertise and assistance to the Iowa DOC in the development of leadership development and has identified the following tasks:

- **Leadership training.**
 - All frontline supervisors will participate in Leadership 101 prior to fiscal year 2008
 - Leadership 202, geared towards mid-level managers, will be developed, using Leadership 101 as a base, and all mid-level managers that have not participated in any leadership development sessions to date will participate in Leadership 202 by end of calendar year 2006
 - Leadership 303 will be geared towards executive level managers, and is envisioned as a three-week course spread over 12 months.
 - Team Leadership Development will continue, with a goal of having all the institutions and districts participate over the next two years.
- **Course Catalog Aligned with Core Competencies** - A catalog of training that aligns with identified core competencies for each level of the organization, which will simplify a manager's ability to access necessary training.
- **Action Learning Circles** – Organizing facilitated discussions around specific issues, the Circles enable managers to share their perspectives and insights regarding on-going issues and fostering the sharing of best practices. The Circles

bring individuals from different institutions and roles in the system together to discuss common issues.

- **Practice Fields** – Similar to Action Learning Circles, however, Practice Fields are designed to foster the interaction and development among individuals in similar positions across the correction's system.
- **Management Meetings** – Utilizing existing management meetings, staff will focus a portion of the meetings on applying leadership concepts to current challenges and issues.
- **Online Leadership Toolkit** – To provide constructive guidance to the Action Learning Circles, Practice Fields, and leadership dialogues in management meetings, a toolkit will provide topic discussions, including summaries of key points and discussion questions.
- **Coaching** – A cadre of staff members from across the institution will be trained in coaching, and will be assigned managers to coach, serving as a resource for their development. The coaches will also serve to facilitate the discussions for the Action Learning Circles and the Practice Fields.
- **Learning Centers** – Initially an online presence will be established that includes the course catalog, toolkit, online courses, and access to other online resources that the staff can use as a resource to further their development. Facilities will explore establishing physical Learning Centers as appropriate to create areas to foster development.

PSG contacted this consultant prior to the request to NIC for action planning to assist with the planning and training in evidence based practices (ebp). EBP provided a foundation from which leadership, benchmarking, and training services would follow. The NIC documentation around ebp also provided a structure in which to think about an agency's needs toward improved outcomes such as risk reduction research principles, organizational development, and collaboration. It was therefore deemed to be a good integration of work already being conducted and that proposed (ebp training, focus on organizational development and collaboration, leadership training, cultural assessment and development, outcome measures/scorecards, and mission/vision). This consultant is now under a short term subcontract with PSG to provide training and technical assistance for the DOC in the area of evidence based practices. Appendix H shows the duties to be performed by this consultant before the end of November, 2006.

Technical Assistance Role: The August 8-10 session was straightforward: assist the three demo sites and seven other sites (six institutions and central office) in the development of an evidence based practices action plan(s). Given the amount of time and resources available, it was determined that three institutional sites would be chosen as demo sites, based on interest, nature of the institution, and timing (with leadership, other projects, etc.). Being selected as a demo site meant that they would receive additional technical assistance through the PSG contract and other assistance priority (such as training, etc) from central office. The other non-demo sites, however, were also to do what they could in moving their institutions closer to a full ebp site. As a result, each institution (and central office) was to complete an ebp action plan. The sites are as follows:

Demo Site	Non-demo Sites
Iowa Medical and Classification Center	Anamosa State
Fort Dodge Correctional Facility	Mt. Pleasant Correctional Facility
Iowa Correctional Institution for Women	Iowa State Penitentiary
	Newton Correctional Facility
	North Central Correctional Facility
	Clarinda Correctional Facility
	Central Office

Technical assistance activities

Preparation- The preparation included two conference calls, the development of an agenda, and the modification of an existing action planning form.

Prior to the action planning session, this consultant’s agency (The Carey Group) provided each demo site a four hour introductory training on evidence based practices. Each employee was to attend one of these sessions or the make-up session.

In addition, all of the members who attended the action planning session (called Core Teams) were given an eight hour course on evidence based practices. The purpose of this training was to “ground” the core members in the concepts so they can assist the other staff in their agencies in understanding the ebp principles, answer questions, and solicit staff ideas to prepare for the action planning session and to implement upon return.

On site activities

The evidence based practices action plan was divided into six goals, with all eight ebp principles nested within the six goals. The participants (approximately 120 in number) were seated by site (ten facilities and one table for central office). Each team was to develop their primary objectives under each goal and then strategize on what action steps would result in accomplishing the goal. The activities consisted primarily of the following process (see agenda for detail), which was repeated for each goal:

- a short introduction to the goal
- team discussion around objectives and activities
- large group processing around similarities and differences
- question/answer

Each team was asked to designate a member to meet with this consultant to review the action steps for clarification purposes.

III. Follow up submission of requested articles, tools, and answers to questions.

A number of documents were requested. The following has been or is in the process of being sent to Iowa DOC by this consultant:

1. Two staff attitude surveys
2. The article entitled “Doing Evidence-based Policy and Practices Ain’t for Sissies” by Frank Domurad
3. Dr. Don Evans research paper that describes the kind of staff attitudes and skills required under evidence based practices
4. Job descriptions for ebp in prison
5. The Family Justice Institute website
6. Contact information on the ASSISST curriculum
7. The Likert assessment
8. A list of potential offender rewards (such as those generated by Adams County)

As noted above, as part of the PSG subcontract, each demo site will get approximately six days of technical assistance from August 10 to the end of November. In addition, the field districts (CBC’s) will receive a total of six days. In an effort to coordinate the needs, and maximize the limited resources a conference call is being sponsored by Iowa DOC. Participating on this call will be the Field Districts and a representative from each of the institutional demo sites.

Observations and Recommendations

Most of the recommendations are embedded in the specific action steps listed in the ten plans included within this report. These plans represent the hard work done by the Core Teams and, if implemented with vigor, will help the agency move closer to the bottom line objectives around risk reduction as illustrated in the Scorecard.

1. The Director of Iowa DOC and its accompanying leadership is embarking on an outcome based reform that is grounded in the best known leadership and strategic practices (see the numerous leadership initiatives noted earlier). This reform has already moved Iowa toward impressive practices and has laid the groundwork for first class services and accountability. It should be a model for other states to follow. This commitment toward reform was further demonstrated by the announcement at the action planning session that a high level administrative position will be temporarily assigned the role of EBP Project Leader.
2. The quality of the discussion among the Core Teams at the action planning session was impressive. The participants were energetic and clear about what they were in the business to do: drive recidivism down. The action plans reflected this commitment. Since the action planning session was completed, this consultant was informed that Iowa DOC is finalizing a budget offer that would

transform Ft. Dodge & ICIW into total therapeutic community environments with treatment, vocational & reentry services coupled with funding supports in the community.

3. Each Core Team should complete the action plans by reviewing what was decided, adding lead persons and target dates, and identifying outcomes by which the goals and objectives will be measured against.
4. Each Institution and its Core Team is strongly encouraged to develop a plan to engage line staff participation in risk reduction efforts. While the action plans are a good start, direct service staff will be in the best position to identify the barriers, challenges, and opportunities for successful implementation. The vast majority of the staff were not present at the action planning session, may not even know what the session's purpose was, and whether they have any influence in the future plans. Each institution should develop a participation plan and a communication plan to ensure that all staff is involved in the development of specific strategies and activities around risk reduction.
5. As discussed at the action planning session, an Information Sharing Summit should be held for the purpose of exchanging information between the CBC's and DOC institutions. The Field Districts have been implementing evidence based practices for a number of years and could provide valuable information around do's, don'ts, lessons learned, successes, etc. The institutions have been applying ebp to its daily work without calling it evidence based, and could share their own successes with the CBC's. Furthermore, as the institutions plan for training and other activities, there is an opportunity to coordinate and share resources.
6. The DOC should examine closely what ebp institutional practice changes have occurred in other states (especially Oregon and Idaho). While it is not recommended that these practices be copied as cultures and circumstances differ, learning for both parties can be accelerated by sharing procedures and trainings that have been effective.

Signed,

Mark Carey

Appendices

Appendix A

Action Planning Agenda Evidence Based Practices and Risk Reduction Iowa Department of Corrections August 8-10, 2006

Tuesday, August 8

- 9:30 Welcome and overview of expectations** Deputy Director
Dan Craig
- 9:40 Opening comments Director Gary Maynard
- 9:50 Overview of two and half days Mark Carey
- Agenda
 - Process and roles
 - Use of ebp checklist
 - Logistics
- 10:00 **Goal One: Actuarial and dynamic risk/need tools** Core teams
- 10:45 Break
- 11:00 Continuation
- 12:00 Lunch (own your own)
- 1:00 Similarities, differences among plans (group discussion) All
- 1:30 **Goal Two: Engagement and motivation through strengths** Core teams
- 2:30 Break
- 2:45 Similarities, differences among plans (group discussion) All
- 3:00 **Goal Three: Targeting and applying the most effective intervention** Core teams
- 4:15 Similarities, differences among plans (group discussion) All
- 4:30 Adjourn

Wednesday, August 9

- 8:00 Review of day one
- 8:30 **Goal Four: Supervision Strategies** Core teams
- 10:00 Break
- 11:00 Similarities, differences among plans (group discussion) All
- 11:30 Lunch (own your own)
- 12:30 **Goal Five: Community and family involvement/informal social control**
Core teams
- 2:00 Break
- 2:15 Similarities, differences among plans (group discussion) All
- 2:45 **Goal Six: Information System, Fidelity, QA, Feedback and Evaluation** Core teams
- 4:00 Similarities, differences among plans (group discussion) All
- 4:30 Adjourn

Thursday, August 10

- 8:00 Review of previous day
- 8:15 Brainstorming around organizational development and collaboration Core
teams
and/or completion of missing action plan items
- 10:00 Break
- 10:15 Next Steps and use of TA days All
- 12:00 Adjourn

Appendix B

Immediate Next Steps Iowa EBP Project

1. Action plans for all ten sites will be electronically distributed to all sites. Each site to complete plans with lead person, dates, and outcomes
2. A one time meeting (phone or in-person) of a representative from each Field District and Institutional Demo Site will occur to determine technical assistance needs. This assistance needs to be delivered by the end of November to keep in within the PSG contract.
3. A day long Information Sharing Summit is being planned by the DOC for the purpose of exchanging information between the CBC's and DOC institutions. The Field Districts have been implementing evidence based practices for a number of years and could provide valuable information around do's, don'ts, lessons learned, successes, etc. The institutions have been applying ebp to its daily work without calling it evidence based, and could share their own successes with the CBC's. Furthermore, as the institutions plan for training and other activities, there is an opportunity to coordinate and share resources.
4. The DOC Central Office has committed to the temporary assignment of a high level administrative position to that of an EBP Project Leader. That individual would be responsible for a number of functions such as (illustrative only):
 - a. Coordinating the numerous ebp plans and activities
 - b. Leadership and coaching
 - c. Troubleshooting and problem solving
 - d. Advocating for the needs of the ebp sites
 - e. Keeping the momentum moving forward

Appendix C

Technical Needs

DEMO-Technical Needs

MI Training
Assist Cur.
Ways to move staff visual.
Testimony from other States
 Barriers
 Transitions
Implementation ideas on how to go forward with all staff.
How to change culture.
Data collection-what to track?
CPAI
MO Follow up on plans.
Quality Assurance

Non-DEMO

Coaching
Training on thinking reports.
 (Altern. Discipline measures)
LSI review/re-training with institutions application.

Fr. Dodge Correctional Facility-Technical Needs

Monthly follow up to have reviewed where we are at in the process.

September 2006/October 2006/November 2006/December 2006

Quality Assurance Review of Treatment Program effectiveness and recommendation.

Assistance with global implementation of EBP, through out institutional operations.

Provide research tools and implementation ideas for the operation and ideal for community collaboration

Data Collection specifically for FDCF's operation; (Central office).

Oregon DOC – copies of video or tools to get things done.

How do we measure outcome and some samples of data being collected by operations.

ISP-Technical Needs

IQ Testing
Jessness Testing
EBP Services available (cognitive and behavioral programs)
Inmate work opportunities
Motivational Interviewing training
CAAI Training
ICON training
LSI-R Training 1 QA - Quality Assurance

ASP-Technical Needs

Develop knowledge and expertise in core teams and other key players, EBP why and How?
CPAI training, MI, Assistance, Institutional Climate assessment, Outcomes measures, Alternative Disciplinary Measures.

Newton-Technical Needs

Person to train our institution trainer.
CPAI who are the team members and when can we have an audit done.
Assist Program
Likert Tool
Assistance in identifying and developing Fidelity of program.

Clarinda Correctional Facility-Technical Needs

CPAI/Assist Cur.
Training EBP CUR/resources
Motivational interviewing
ICON reports (data information)
Outcome measures-quality assurance plans
Coordination of line staff (by-in) examples
Development of intranet
ICON/email assess to all staff ie: computers
Available assessment tools/attitude checklist
Coach-technical assistance for EBP core team (implementation)

IMCC-Technical Needs

Invite another state in
Supervisor concentrated training
Staff training-Assist-MI
CPAI
Guidance on how to measure outcome.

NCCF-Technical Needs

CPAI Training

Thinking report training

Assist Curriculum

LSI-R re-training (from Institutional emphasis)

LSI-R QA Training

Alternatives to discipline ideas

Introduction/Overview of Evidence Based Practices and Motivational Interviewing

Motivational Interviewing/Stage of Change training for case managers and EBP Core team.

Inclusion of LSI-R score and current stage of change on waiting list report.

Appendix D

Institution: Proposed Performance Measures

Recidivism

Institution Score Card

- √ % of medium to high-risk offenders that are receiving interventions for one, two, three, or four of their top criminogenic needs
- √ % of medium to high-risk offenders whose LSI-R risk score dropped significantly during institution supervision.
- √ % of medium to high-risk offenders that received interventions that were not linked to their top four criminogenic needs.
- √ % of offenders returned to prison within three years after release from prison

Drill Down Measures

- √ % of medium to high-risk offenders
 - Were referred to evidence based interventions for one, two, three or four of their top four criminogenic needs but have not yet started an intervention.
 - Were referred to evidence based interventions for one, two, three, or four of their top criminogenic needs prior to reentry case plan closure
- √ % of appropriate assessments completed correctly per policy (LSI-R, Sex offender, substance abuse etc.)
- √ % of offender reentry case plans completed within policy guidelines
- √ % of intervention programs designated by Offender Services as evidence based

- √ Intervention program success rates

Safe & Orderly

Institution Score Card

- Data collected by location & time
 - √ Number of offender deaths* and / serious injuries.
(* Other than from natural causes)
 - √ Number of staff serious injuries
 - √ Number of critical incidents: types/ times/ locations
 - Escapes (# Max / # Med-Minimum)
 - Disturbance/ hostage/ uprising
 - Staff sexual misconduct
 - √ Institution Climate/ Culture
 - Sick leave utilization level
 - Number of staff turnover by reason
 - Number of grievances: Staff / offender by issue
 - Offender rating: food, staff interaction, etc.
 - Number of assaults on staff/ on offenders

Drill Down Measures:

- √ % Of Staff training plan achieved
- √ Dollar cost of inmate litigation by issue
- √ Number of incidents of supervised offender harm to public
(define harm to public).
- √ Number of offenders assigned in accordance with custody risk
assessments
 - √ Institution Climate/ Culture: Number of incidents
 - Inmate self-destructive behavior

- Use of force
- Gang activity (define)
- Drugs / serious contraband
- Protective Custody requests
- % Of inmates receiving disciplinary report for serious rule violation (Class A or B)

Restoration/ Reparation of Victims

Institution Score Card

- √ % Of restitution paid by offender at time of parole, work release, discharge
- √ % of offenders receiving victim impact intervention before release to CBC or discharge
- √ Number of community service hours

Resource Management

Institution Score Card

- √ Parole Release recommendation rate / BOP release decisions
- √ Per Diem rates / food/ clothing, etc.
- √ % of appropriation redirected due to transformation initiative efficiencies

Drill Down

- √ % Of FTEs corresponding to workload formula
- √ Average length of time in institution by risk level
- √ Average length of incarceration prior to parole recommendation by offense type
- √ Average length of incarceration prior to parole

recommendation by risk type

- √ Average length of incarceration compared to DOC projected Reentry recommendation date

Definitions

- Collect by institution
- Medium / high-risk offenders = Cut off scores determined by currently used LSI-R scales.
 - Medium = 24 -33.
 - Medium High = 34 - 40.
 - High = 41+.

CBC offender is prescreened using the Iowa Risk to determine if LSI-R will be completed. An Iowa Risk Score of 12 or above requires completion of LSI-R. All offenders entering institution system require completion of LSI-R. Includes any offender who would be classified as medium/ high risk at any time during their supervision.
- Case Reentry Plans: Required on all institution offenders and includes identification of top four criminogenic needs.
- Intervention program success rate:
- Evidence Based:
 - Risk assessment to determine criminogenic need
 - Enhancement of intrinsic motivation
 - Targeted interventions: risk, need, responsivity, dosage
 - Cognitive- behavioral intervention strategies
 - Positive reinforcement- follow-through and redirection
 - Ongoing support / community resources
 - Measurement / feedback
- Serious injury: Disabling, serious or significant injury resulting in medical treatment (other than basic first aid), loss of consciousness, restriction of work, significant impact on basic life functions
- Deaths = other than from natural cause
- Life safety code violations = List to be developed/ gathered by safety officers/ new DOC Safety position.

To do before July 1

Plan to designate which programs / interventions are evidence based: CPAI audit or similar review of “evidence based” issues. Check assessments tools for inter-rater reliability and fidelity to model, motivational interviewing, use of case plans, and cognitive behavioral programming fidelity. Are program elements delivered as designed? Is a continuum of sanctions and reinforcements available? Are sanctions and reinforcements appropriately applied?

Define intervention success rate

Guidance to Research Unit regarding what data is to be gathered by gender, mental illness etc.

Appendix E

Judicial District Department of Corrections: Proposed Performance Measures

Recidivism

District Score Card

- √ % of medium to high-risk offenders that are receiving evidence-based interventions for one, two, three, or four top three criminogenic needs
- √ % of medium to high- risk offenders whose risk level has dropped at time of discharge from CBC supervision
- √ % of medium to high risk offenders that received interventions that were not linked to their top four criminogenic needs
- √ % of medium to high-risk offenders convicted for aggravated misdemeanor / felony within 3 years after discharge from system (annual measure)

Drill Down Measures

- √ % of medium to high risk offenders that:
 - Were referred to evidence based interventions for one, two, three, or four of their top four criminogenic needs but have not yet started an intervention
 - Were referred to evidence based interventions for one, two, three, or four of their top criminogenic needs prior to reentry case plan closure
- √ % of active low risk offenders that received interventions during supervision
- √ % of appropriate assessments completed correctly per

policy (LSI, Iowa Risk, Sex offender, substance abuse etc)

- √ % of required offender case plans completed within policy guidelines
- √ % of intervention programs designated by Offender Services as evidence based
- √ Recidivism level by risk score
- √ Intervention program success rates
- √ Number of employable offenders who are employed, 3 months, 6 months, or longer

Safe & Orderly

District Score Card

- √ Number of offender deaths* and / serious injuries (* Other than from natural causes)
- √ Number of staff serious injuries
- √ Number of critical incidents: types/ times/ locations
 - Escapes from residential facilities
 - New felony arrests of supervised offenders
 - Staff sexual misconduct
- √ Climate/ Culture
 - Sick leave utilization level
 - Number of staff turnover by reason
 - Number of Grievances: Staff / offender by issue
 - Number of assaults on staff/ offenders

Drill Down Measures

- √ % Of staff training plan achieved
- √ Dollar cost of offender litigation by issue

- √ Number of incidents of supervised offender harm to public (Define harm to public)
- √ Rate of active warrants
- √ Number of incidents of suicide threats / self-destructive behavior incidents.

Restoration/ Reparation of Victims

District Score Card

- √ % Of \$ of offenders restitution obligation paid at time of discharge
- √ % Of high-risk offenders receiving victim impact intervention before release

Drill Down

- √ Number of community service hours

Resource Management

District Score Card

- √ % of technical violations resulting in jail / prison / other
- √ Per Diem rates / food/ clothing, etc.
- √ % of appropriation redirected due to transformation initiative efficiencies

Drill Down

- √ Filled FTE as % of workload formula calculated demand

Definitions:

- Collect by work unit or geographical location and by supervision status (probation, parole, RF, etc)
- Medium / high-risk offenders = Cut off scores determined by currently used LSI-R scales.
 - Medium = 24 -33.
 - Medium/ High = 34-40.
 - High = 41+.

CBC offender is prescreened using the Iowa Risk to determine if LSI-R will be completed. An Iowa Risk Score of 12 or above requires completion of LSI-R. All offenders entering institution system require completion of LSI-R.

Includes any offender who would be classified as medium/ high risk at any time during their supervision.
- Case Reentry Plans: Required for medium high-risk offenders and includes identification of top four criminogenic needs.
- Intervention program success rate:
- Drop in Risk Level : Change in level of supervision resulting from change in Iowa Risk Score
- Evidence Based:
 - Risk assessment to determine criminogenic need
 - Enhancement of intrinsic motivation
 - Targeted interventions: risk, need, responsivity, dosage
 - Cognitive- behavioral intervention strategies
 - Positive reinforcement- follow-through and redirection
 - Ongoing support / community resources
 - Measurement / feedback
- Data collected by location and time
- Serious injury: Disabling, serious or significant injury resulting in medical treatment (other than basic first aid) , loss of consciousness, restriction of work, significant impact on basic life functions
- Deaths = other than from natural causes

- Life safety code violations = List to be developed/ gathered by safety officers/ new DOC Safety position.

To Do Before July 1

Plan to designate which programs / interventions are evidence based: CPAI audit or similar review of “evidence based” issues. Check assessments tools for inter-rater reliability and fidelity to model, motivational interviewing, use of case plans, and cognitive behavioral programming fidelity. Are program elements delivered as designed? Is a continuum of sanctions and reinforcements available? Are sanctions and reinforcements appropriately applied?

Define intervention success

Decision on how interventions provide internally vs. externally. (i.e. contracts etc) are addressed. Consideration to be given to performance contracts with providing agencies.

Guidance to Research Unit regarding what data is to be gathered by gender, mental illness etc.

Appendix F

Iowa Department of Corrections Proposed Scorecard Performance Measures

Recidivism

Corrections System Score Card

- ✓ % of medium to high-risk offenders that are receiving evidence-based interventions for one, two, three, or four of top three criminogenic needs.
- ✓ % Of offenders who were medium/ high risk at time of admission who's LSI-R gain score shows a significant reduction at final discharge from corrections system.
- ✓ % Of medium/ high risk offenders (at time of admission), who successfully complete case plan programming for each of their top four criminogenic needs before final release from corrections system. (Case plan closure)
- ✓ % Of offenders who were medium / high risk at time of admission are convicted for a new aggravated misdemeanor/ felony within 3 years after discharge from system (annual measure)

Safe & Orderly

Corrections System Score Card

- ✓ Number of offender deaths and / serious injuries

- ✓ Number of staff serious injuries
- ✓ Number of finding of life safety code violations

Drill Down Measures

- ✓ Number of incidents of “harm to public” by supervised offender.
- ✓ Total dollar cost of offender litigation by issue.
- ✓ Number of offenders assigned/ supervised in accordance with risk assessment/ classification instrument.

Restoration/ Reparation of Victims

Corrections System Score Card

- ✓ % Of restitution paid by offender at time of discharge.

Resource Management

Corrections System Score Card

- ✓ % Of population / capacity: Field, Residential, Institution, Program
- ✓ % Of technical violation resulting in jail/ prison
- ✓ Parole release recommendation rate
- ✓ Per Diem compared with other DOC *

Drill Down Measure

- ✓ Average length of time under supervision by risk level
- ✓ Average length of incarceration compared to DOC projected reentry recommendation date
- ✓ DOC administrative and support costs compared to other state D.O.C.s
- ✓ % Of appropriation realigned due to transformation efficiencies.

Definitions

- Medium / high-risk offenders = Cut off scores determined by currently used LSI-R scales.
 - Medium = 24 -33
 - Medium High = 34 - 40
 - High = 41+

CBC offenders are prescreened using the Iowa Risk to determine if LSI-R will be completed. An Iowa Risk Score of 12 or above requires completion of LSI-R. All offenders entering institution system require completion of LSI-R.

Any offender who would be classified as medium/ high risk at any time during their supervision will be included even if their score is now lower.
- Assessment at time of final discharge = Final discharge by court, Parole Bd. or expiration of sentence. Final discharge implies case plan is going to be closed out. LSI-R used for measure will be last LSI-R completed, which we will assume, was one done at time of consideration of release or change in case plan as required in policy and would not be older than one year.

Will use last LSI-R completed if an offender is low normal (score of 24 or below) or if their sentence is expiring and therefore no new LSI- R is completed.
- Significant reduction in LSI-R score:

Change in LSI-R score of 6 or more points.

Most significant change is to drop below a score of 23 points, which places offender at low risk.

Significant change has also occurred of offender drops into lower range of following score ranges:

 - 41 and above
 - 34 - 40
 - 24 – 33
 - 23 and below

- Evidence Based:
 - Risk assessment to determine criminogenic need
 - Enhancement of intrinsic motivation
 - Targeted interventions: risk, need, responsivity, dosage
 - Cognitive- behavioral intervention strategies
 - Positive reinforcement- follow-through and redirection
 - Ongoing support / community resources
 - Measurement / feedback

- Convicted for a new aggravated misdemeanor/ felony within 3 years after discharge from system – In Iowa per Data Warehouse/ Courts system

- Serious injury: Disabling, serious or significant injury resulting in medical treatment, loss of consciousness, restriction of work, significant impact on basic life functions.

- Deaths = other than from natural causes.

- Life safety code violations = List to be developed/ gathered by safety officers/ new DOC Safety position. Focus on those violations that are not corrected upon initial finding.

- Capacity information reflects that staffing / resources are formula driven. Includes caseload, bed space, program capacity

To Do List: Before July 1

Definition of “evidence based” program that all agree upon.

Ensure LSI-R’s (assessments & reassessments) and case plans are completed as outlined by policy beginning July 1. This includes the requirement that LSI’s are done when case plan significantly changes and release is being considered.

Ensure ATG does back feed commitment consolidation for offenders currently in the system

Decisions on how external interventions resources are going to be handled. (I.e. contracts require evidence-based principles)

Discussion of how we will get LSI-R completed on those reaching discharge of sentence and therefore will not have not had an LSI-R linked to release recommendation.

Training / business rules to address consistency in when/ why needs are closed.

Establish definition / collection for life safety violation information.

Which state do we want to compare Per Diems. How do we compare apples/ apples? *

Define “harm to public” by supervised offender and establish collection mechanism.

Appendix G

Iowa Government statewide Initiatives

Governor's Leadership Agenda

Iowa's Governor, Tom Vilsack has adopted an Enterprise Management System. The Governor's Enterprise Leadership Agenda consists of goals in each of the six broad policy areas and communicates the Governor's and Lt. Governor's top program and budget priorities and sets overall enterprise direction. Each of the state's Departments is assigned to one of the six policy areas or Enterprise Teams. The DOC is part of the Safe Communities Enterprise Team (described in more detail below).

Safe Communities Enterprise Management Team

This Team includes the Directors of the following executive agencies: Defense, Public Safety, Office of Drug Control Policy, Inspections and Appeals, Criminal and Juvenile Justice Planning, and Parole Board. As members of the Safe Communities Team they are charged with coordinating and collaborating to promote the Governor's Leadership Agenda. The Team meets monthly and shares information and collaborates on broad initiatives, and meets monthly with the Governor's Chief of Staff and quarterly with the Governor and Lt. Governor. The focus of these meetings is on data, and results achieved are published in the www.resultsiowa.org website.

Charter Agency

The Iowa DOC has taken the initiative, as part of its Charter Agency Agreement with the Governor, to refine the use of existing resources. The DOC paid \$500,000.00 to become a Charter Agency and in return, the Department is afforded some benefits and flexibilities and given consideration to conduct business outside of normal bureaucratic rules, including being exempt from across the board budget cuts. (The DOC saved \$6 million in cuts as a result.) As part of the Agreement, the DOC has committed to producing a number of results in terms of performance measures and special projects, several of which are clearly aligned with Evidenced-Based Practices. For example, during 2004, the Department has focused on developing community-based alternatives to incarceration and to develop a structured decision-making process and policy for consistent management of probation violations.

Accountable Government Act (AGA)

On June 1, 2001, Iowa's Governor, Tom Vilsack, signed the AGA into law institutionalizing many components of Iowa's existing governance system and bringing the legislative and executive branches together around a common focus on - and framework for - results. The AGA requires Iowa state government to adopt strategic planning, annual performance planning, performance measurement, results-based budgeting, performance reporting, performance audits, and return on investment. Iowa's results-oriented governance system is in essence, the way they do business. It is the overall management system used to achieve the best results for Iowans with limited resources. This governance system is grounded in best practices used in the private sector, including the Malcolm Baldrige Awards program. As the State of Iowa

continues to implement the principles of the Accountable Government Act, particularly those directed at evaluation of program outcomes and return on investment, the Department will be able to provide data on the impact of these programs with Iowa offenders.

Iowa Excellence Initiative (IEI)

Iowa Excellence self-assessments provide agencies with the means to assess all their critical systems and identify needs. Agencies use these assessments to improve their operations and as input for their strategic and performance planning. The Iowa DOC has chosen to participate in the Iowa Excellence Initiative, even though as a "Charter Agency", the DOC is not required because the DOC believes its involvement will afford yet another opportunity to analyze in detail its operations, key processes, and results. The Iowa Excellence process examines how the agency conducts its business based on a set of nationally recognized criteria (similar to Baldrige) for agencies that achieve success. While the DOC is looking forward to feedback to the Iowa Excellence self-assessment from examiners (available in the Fall of 2004), it is also taking the initiative to incorporate the Excellence Initiative principles and values throughout the organization. The DOC Executive Management Team has constituted itself as the "Performance Improvement Council" for the Department and as such this team is guiding efforts throughout the Institutions and Districts to comply with Baldrige principles and each member of the Executive Management Team has chosen to "champion" one of the Baldrige categories developing extensive knowledge of the category requirements and advocating for these principles department wide.

Appendix H

Iowa DOC Evidence Based Practices Training and Technical Assistance Plan In Conjunction with the Transformation Project through PSG Draft: April 13, 2006

The following represents the portion of the Transformation Project that involves the training and technical assistance related to evidence based practices. The ebp effort is part of the broader effort articulated under the Transformation Project that will lead to the established performance objectives.

What	Objectives	Attendees	When/Where	Notes
Pre-planning meeting	To plan for the BHAG's/scorecard, training, and timelines	Selected DOC individuals, PSG, TCG	March 23, Des Moines	Completed
EBP training for core teams (8 hours)	To lay a foundation around the research and implementation issues related to ebp and risk reduction performance outcomes	Each state institution and central office will select appr. five individuals to attend	June 19-21 Location?	Includes all institutions, not just the demonstration sites (and central office), to be repeated and delivered to half of the total group back to back over two days
Facility introductory training (4 hours) for demo sites	To give staff in each institution an overview of ebp and to prepare them for the changes that will be forthcoming	All direct service and management staff in demo sites	Between June 21 and August 8	Each demo institution will provide two time slots in the same day so all shifts can attend. One make up session will be scheduled for institutional staff who missed the institution specific training
Action Planning	To devise a specific ebp action plan for central office, demonstration sites,	Core team appointees (as noted above)	August 8-10	This is NIC sponsored. The action plans will look different for

} Pilot sites selected:
By May 15

} After training, each demo site sets up a local planning team to guide and prepare for the action planning meeting in August and to carry on the planning and implementation

	and non-demo sites			each of the three groups
Deep Skill and technical assistance	To target technical assistance responses to each site (institutional and/or central office) around the skills required under ebp or to do troubleshooting, planning, etc.	To be determined	August 11 through end of October	The remaining days of TCG contract will be split up under the demonstration sites and the sites will request assistance as needed (estimated at approximately 6-7 days per demo site)
Facility introductory training (4 hours) for non-demo sites	To give staff in each institution an overview of ebp and to prepare them for the changes that will be forthcoming	All direct service and management staff in non-demo sites	September, 2006 through June, 2007	This training will be provided outside of the PSG contract. Each non-demo institution will provide two time slots in the same day so all shifts can attend. One make up session will be scheduled for all institutional staff who missed the institution specific training. Means to deliver to be determined.