Thirteen (13) Questions Judges Should Ask Their Probation Chiefs

Instructions: For the justice system to reach its objective of enhancing public safety through reduction of recidivism, it is critical that the entire system be working together with similar knowledge, objectives, and tools/processes. This guide is designed to help the courts ascertain the kind of work being performed in their local community corrections agency. Judges are encouraged to ask these questions of the Probation Chief to determine the degree to which evidence based practices are being implemented in probation. ***The highlighted section is provided as a "preferred response" by the Probation Chief based on current research knowledge.*** Please be aware that this is the ideal state which does not happen overnight. For many agencies, it requires a cultural change that takes years to achieve. Judges and probation are encouraged to join efforts to make this a reality.

The following **Rating System** can be used to determine where to focus on improvement:

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1-This fully describes what is happening
2-This largely describes what is happening
3-Neutral
4-This largely does not describe what is happening
5-This fully does not describe what is happening

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Area	Question to Ask	Rating				
	1. What risk/need tools are you using and how are they being used by the officers?	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Assessment	**An evidence based response:** We use a number of tools, each which serve a distinct purpose. Actuarial risk and need tools provide us with better rearrest prediction than professional judgment alone. As such we have a brief screening tool that can be done quickly by the officer to determine if the offender is low risk. If so, the officer does not apply the general risk/need tool. This general risk/need tool takes longer to administer and tells us not only the offender risk level, but also his/her criminogenic needs. The identification of these criminogenic needs are critical for court reports, decisions on how intensely to supervise, what kind of officer to assign, how to handle violations, and how best to spend our limited time and programs (through the case plan). Finally, the general risk/need tool does not accurately assess every kind of offender. Certain offender types require a more specialized tool such as those for domestic violence, drunk driving, and sex offenders. All of our tools have been	Comments:				

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		1	2	3	4	5

	validated (i.e., proven to accurately predict risk and identify the right criminogenic needs for targeting) and normed on our local population (to take into account regional differences). We periodically revalidate and norm the tool to ensure long term viability.					
	2. How do risk/need tools influence your court reports? Supervision? Program placement?	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
	An evidence based response: The pre-sentence and pre-dispositional reports contain a section that describes the kind of programming that would be best suited for the individual offender based on risk to reoffend, criminogenic needs, and responsivity factors. Those with a higher risk to reoffend are recommended for more intensive supervision and external controls, medium and high risk for programming, and low risk for quick, short interventions. The criminogenic needs are portrayed in the recommended conditions of probation (such as treatment, cognitive behavioral programs, GED, etc.). And, the responsivity factors are taken into account when we identify the kind of programs the offender would most likely successfully respond to. The assessment provides us with this information that leads to how we tailor the court report, the type/intensity of probation, and the specific program(s) we place the offender into. The assessment tools provide us with the key factors that focus our attention, time, and resources and help us individualize our response.	Comments:				
	3. How do you separate offenders by risk level?	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
	An evidence based response: We have specialized caseloads based on risk level. (Note: this is harder to do in rural areas.) Certain officers handle the extreme high risk offenders. Their caseloads are very low (such as 15-30 adults per officer and 10-15 juveniles per officer). These offenders are not responsive to programming. Officers must monitor them very closely, seeing them multiple times per week, providing external controls, and partnering with law enforcement and the community. The low risk offender does not need much (if any) face to face time. They are generally self-correcting. The officers in charge of this low risk population manage very large caseloads (ranging from 200 to 1,000 per officer) and use techniques such as administrative supervision, banked caseloads, large group reporting, phone and/or mail monitoring, and automated phone and/or kiosks. The officers who specialize in medium/high risk cases have caseloads in the 65-75 range for adults and 30-35 for juveniles. They spend as much face to face time as they can and provide many opportunities to address their criminogenic needs. These offenders are best suited for cognitive behavioral programs. Finally, we take extra precautions not to mix risk levels in our lobby/waiting rooms and programs.	Comments:				

		1	2	3	4	5
	4. How do you know that staff is targeting criminogenic needs in their one on one sessions and program referrals?	☐	☐	☐	☐	☐

An evidence based response: This is a heavy emphasis for us. We know that if we spend our time on non-criminogenic areas we will not see any reduction in recidivism. Each officer is expected to use a case plan where at least the top four criminogenic needs are addressed. While they need not all be addressed at once, some successful intervention must occur during the time under supervision. Medium and high risk offenders come to us with a cluster of criminogenic needs, not just one or two. Therefore to be successful, we must address at least the top four needs. Some of these can be handled in-house through the officer's sessions. Others require a formal program. Furthermore, the sequencing is important. We train our staff on which criminogenic needs should be addressed first. For example, if we help an offender get a job before we address his/her anti-social attitudes/beliefs or increase their behavioral management skills, he/she will likely fail on the job.	Comments:

		1	2	3	4	5
Case Management	**5. What system is in place for offender rewards and incentives for compliance and progress? What sanctions are employed for non-compliance?**	☐	☐	☐	☐	☐

An evidence based response: We know that incentives are much more powerful motivators than disincentives. We also know that what is an incentive to one individual may not be for another. The provision of incentives and rewards reinforces the idea that a person who follows societal norms should expect to receive something of meaning (not all the time, but much of the time). Therefore, we try to replicate the real world of rewards and incentives through praise, reduced reporting, letters of support, certifications, early discharge, supportive comments to significant others, etc. We have devised a written system of rewards that each officer is encouraged to use. While rewards and incentives are powerful shapers of behavior, we also must balance that with a graduated list of sanctions for non-compliance and poor behavior. Misconduct is not overlooked but is responded through informally or formally depending on the severity of conduct and type of offender. A written list of graduated sanctions is provided to the officers and supervisory sign-off is required. Jail is on the list for higher severity misconduct and/or high risk offenders but it is used sparingly and with purpose, taking into account public safety and level of impact on the offender.	Comments:

		1	2	3	4	5
	6. What do you do with non-motivated offenders?	☐	☐	☐	☐	☐

An evidence based response: We view motivation as a changeable condition for the majority of offenders (with the extreme high risk as the possible exception). Certain interventions and officer skills can increase motivation which increases the likelihood of program completion and	Comments:

			1	2	3	4	5

sustainability. We view our job of getting offenders treatment-ready as one of the most important things we can do since long term treatment outcomes improve as the offender's motivation level increases. All direct service staff have been trained in motivational interviewing techniques. This gives them the skill to increase the offender's ambivalence and then commitment to take action. For those offenders who are not motivated and will not respond to one-on-one case management we do one of two things: we monitor them closely while we watch for their life circumstances to change (such as losing a job/freedom due to continued poor decision making) or we will place them into a structured, pre-contemplative group. This group uses a structured curriculum and is designed to increase motivation, not to "do therapy." If the offender responds well to the curriculum and increases their motivation we will then place the individual in a treatment program. A few programs (not many) build in a procedure to increase a participant's motivation once placed. We will refer a non-motivated offender to programs only when they contain this feature.

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7. How are treatment programs selected for offenders?

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Programs

An evidence based response: We use the risk, need, and responsivity principles to place offenders. We will limit any kind of programming for low risk offenders as this programming is not likely going to reduce risk of reoffense any further than the very act of getting arrested and convicted. We will not use programs for the extreme high risk as they will not respond favorably and will likely disrupt the work of others. We will limit most of our treatment programs to the medium and high risk offenders. Applying the need principle means that we will place these medium and high risk offenders in programs that are designed specifically to address their criminogenic needs. Each program should have a specific set of criminogenic needs that it addresses. Officers will place offenders in those programs that target the specific criminogenic needs of the referred offender. Finally, responsivity suggests that some programs work better with certain offenders and matching these characteristics is important for good results. For example, an offender with a low IQ will not do well in a traditional cognitive behavioral group without assistance even if he/she is medium or high risk. A female offender, especially one with previous victimization in her background will need a female specific program. We therefore seek programs that match up with the individualized offender risk, needs, and responsivity factors.

Comments:

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8. How do you know the programs you refer offenders to are working as they should?

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

An evidence based response: We seek to use only those programs that are evidence based and clear about which criminogenic and responsivity needs they can meet. To ensure that this happens we have a person on staff who works with our community based organizations to clarify what we need and what kind of services they should provide. The staff person

Comments:

	monitors the programs through a variety of techniques including on-site observation. We have created a preferred provider list for our officers. Those programs on the preferred provider list have met our standards as being evidence based. In addition, we provide technical assistance for the community based organizations to provide process and outcome measures. Some of the programs have been using the CPAI (Correctional Program Assessment Inventory) or the CPC (Correctional Program Checklist) that measures the level to which the program contains the research based features known to reduce recidivism.	

9. What kind of cognitive behavioral programs are in place?

1	2	3	4	5
☐	☐	☐	☐	☐

An evidence based response: We have built a continuum of cog programs in order to meet the varied needs of the offenders. We have a need for programs that are responsive to women, different cultures, different ages, and varying motivation levels. In addition, the risk and need tool indicates that offenders may need varying intensities/dosages and types of cog. Therefore, we have built a series of programs that contain cognitive restructuring (changing the way offenders think and examine their belief system), cognitive skills (building concrete problem solving skills), and life skills (assisting with how to cope with life's daily demands). All of the cog programs are behavioral in nature (i.e., they contain experiential learning and use of role plays and assignments).	Comments:

Training and Staff Deployment

10. What evidence based practices training do staff receive?

1	2	3	4	5
☐	☐	☐	☐	☐

An evidence based response: All direct service staff are trained on the foundational principles of evidence based practices (risk, need, and responsivity) followed by training on motivational interviewing (two day skill training), use of assessment, effective case management, supervision strategies, and effective programming. Some staff also receives cognitive behavioral interventions depending on their job type. Booster training is provided periodically as a means of refreshing knowledge and skills.	Comments:

11. How is staff placed in the agency?

1	2	3	4	5
☐	☐	☐	☐	☐

An evidence based response: We attempt to match officer characteristics with corresponding offender typology and the specific job requirements in the same way we look to match offender characteristics with the program referral (i.e., the principle of responsivity). Staff who is street savvy and who prefer to flex their working hours to evenings and weekends manage the extreme high risk caseloads. Staff who is well organized and who work well with technology handle the large caseloads of low risk offenders. And, medium and high risk offenders are placed on caseloads of officers who possess skills and temperament conducive to changing offender behavior. These skills/temperament include features such as comfort with authority, engaging, supportive, able to set limits, verbal acuity, and flexible. Some agencies use assessment tools (such as the CMC-Client Management Classification) to identify offender	Comments:

			1	2	3	4	5

Fidelity and Evaluation	typologies and assign officers accordingly. We are considering adding this feature.	

	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
12. What data do you give your officers to help them improve their effectiveness?					

An evidence based response: Each officer is provided data on their caseload on a monthly basis. The data is provided in graph form and is easy to read. It includes the key success factors such as (examples) the number/percent of their caseload that is in treatment, has a case plan in operation, has the top four criminogenic needs being addressed, is employed, and has increased or decreased the risk/need scores. The officer gets a running total of this data to see trends. Furthermore, he/she receives a report on how their caseload percentages compare to the agency average in each category. If an officer has an unusually high or low mark a review is conducted to see what might be contributing to those scores. Officers who continually receive scores above the agency average provide coaching and training to peers. The manager's review these data to problem solve and improve quality. A structured review process is scheduled each month to analyze a subset of the data. Targets for specific outcomes are set each year. Feedback on the effectiveness of various programs is provided to the courts and county administration.	Comments:

	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
13. How do you know the risk/need tool is working properly? How do you know that the EBP knowledge and techniques you have put in place are working once staff are trained?					

An evidence based response: We know that if we don't put quality assurance mechanisms in place our adherence to the model and outcomes will deteriorate. As a result, we do a number of things. First of all, we have set up a quality assurance committee made up primarily of line staff. Its job is to review the quality of the work being performed and to provide booster training and coaching for their peers. A quality plan is put in place each year. This plan includes features such as booster training for staff around assessment tools, motivational interviewing, case planning, and cognitive behavioral interventions. Peer review tools are provided so that staff can get ongoing feedback on how well they are managing their cases. These tools usually consist of checklists that a peer or supervisor uses when observing an interaction. In addition, staff submits a video or audio tape of a client session at least annually to a reviewer for feedback on how to improve interviewing skills. We hold annual inter-reliability sessions whereby a small group of officers review the facts of a case and score the assessment tool. Differences in scoring should be small and inconsequential. If the differences are high, then additional training and review is provided. Office-wide data around the key success factors are reviewed with staff on an ongoing basis (at least quarterly) and improvements sought based on the data results.	Comments:

Scoring Sheet for Thirteen Questions

Category	Question	1	2	3	4	5
Assessment	1. What risk/need tools are you using and how are they being used by the officers?					
	2. How do the risk/need tools influence your court reports? Supervision? Program placement?					
	3. How do you separate offenders by risk level?					
Case Management	4. How do you know that staff is targeting criminogenic needs in their one on one sessions and program referrals?					
	5. What system is in place for offender rewards and incentives for compliance and progress? What sanctions are employed for non-compliance?					
	6. What do you do with non-motivated offenders?					
	7. How are treatment programs selected for offenders?					
Programs	8. How do you know the programs you refer offenders to are working as they should?					
	9. What kind of cognitive behavioral programs are in place?					
Training and Staff Deployment	10. What evidence based practices training do staff receive?					
	11. How is staff placed in the agency?					
Fidelity and Evaluation	12. What data do you give your officers to help them improve their effectiveness?					
	13. How do you know the risk/need tool is working properly? How do you know that the EBP knowledge and techniques you have put in place are working once staff are trained?					
Total						