



Program Categorization and Implementation Updates

2014 Update Report to the Legislature

As required by Third Engrossed Substitute Senate Bill 5034, 2013

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Bernard Warner, Secretary
bernie.warner@doc.wa.gov

Keri L. Waterland, Senior Administrator - Programs
Offender Change Division
keri.waterland@doc.wa.gov

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Legislative Directive

The 2013 Legislature, through Third Engrossed Senate Bill 5034, directed the Department of Corrections (DOC) to work collaboratively with a consultant to develop a written implementation plan that identifies the types of programs DOC will phase in, the sites where the programs will be located, along with a timeline and the projected number of offenders to be served, within available funding. The proviso legislative language stated:

(b) \$150,000 of the general fund –state appropriation for fiscal year 2014 and \$75,000 of the general fund –state appropriation for fiscal year 2015 are provided solely for the Department to contract with a consultant who can facilitate and provide project expertise on the implementation of community and prison based offender programming that follows the risk-needs-responsivity model.

(i) By September 1, 2013, the Department shall provide to the consultant an inventory of all existing programming both in prisons and in community operations. The Department shall consult with the Washington State Institute for Public Policy (WSIPP) to determine whether programs are evidence-based or research-based using definitions provided by WSIPP and shall include this information on the inventory.

(ii) By October 1, 2013 (later amended to March 1, 2014), the consultant shall report to the Department, the Office of Financial Management, and legislative fiscal committees on the Department’s current plans and processes for managing programming including processes for phasing-out ineffective programs and implementing evidence-based or research-based programs. All Department programs should be considered by the consultant regardless of whether they are included on the most recent list of WSIPP approved identifiable evidence-based practices in (b)(i) of this subsection.

(iii) The WSIPP, in conjunction with the Department, shall systematically review selected programs to determine the effectiveness of those programs at reducing recidivism or other outcomes. The WSIPP shall conduct a benefit-cost analysis of these programs when feasible and shall report to the legislature by December 1, 2013.

(iv) Based on the report provided by the consultant and the WSIPP review of programs, the department shall work collaboratively with the consultant to develop and complete a written comprehensive implementation plan by January 15, 2014 (later amended to July 15, 2014). The implementation plan must clearly identify the types of programs to be included, the recommended locations where the programs will be sited, an implementation timeline, and a phasing of the projected number of participants needed to meet the threshold of available program funds.

(v) Using the written implementation plan as a guide, the Department must have programs in place and fully phased-in no later than June 30, 2015 (later amended to January 1, 2016).

(vi) The Department shall hold the consultant on retainer to assist the Department as needed throughout the implementation process. The consultant shall review quarterly the actual implementation compared to the written implementation plan and shall provide a report to the secretary of the Department. The Department shall provide reports to the Office of Financial management and legislative fiscal committees as follows:

- (A) The written comprehensive implementation plan shall be provided by January 15, 2014 (later amended to July 15, 2014); and
- (B) Written progress updates shall be provided by July 2, 2014, and by December 1, 2014 (later amended to December 1, 2014 and June 1, 2015 respectively).

Executive Summary

The 2013 Legislature, through Third Engrossed Senate Bill 5034, directed the Department of Corrections (DOC) to work collaboratively with a consultant to develop a written implementation plan that identifies the types of programs recommended for DOC to phase in, the sites where the programs may be located, a timeline, and the projected number of offenders to be served. Any changes were to be accomplished within available funding.

DOC established a contract with Washington State University (WSU) to provide project expertise in order to categorize all DOC programs as evidence-based, research-based, or promising practice. Due to the accelerated timelines given by the legislature, DOC's first year priority was the assessment of the programs currently funded by the legislature. The legislature further directed DOC to phase out programs that did not meet the criteria for evidence or research based and to implement evidence-based or research-based programs. However, after categorization, WSU recommended that none of the legislatively funded programs be phased out.

As written in the proviso, the second year was intended for DOC to implement the plan for the phasing out of some programs and the expansion of others. Since no funded programs were recommended to be phased out, and there was limited additional funding to expand programming during year two of the proviso, this report will focus on what DOC is able to do with current funding to further the efforts of the risk-needs-responsivity model (RNR). WSU and DOC are now focusing on categorizing the remainder of our programs (those not currently funded by the legislature) in order to determine which programs meet evidence-based, research-based, or promising practice. Additionally, WSU is identifying intermediate outcomes for many Department programs, which will assist in determining effectiveness at addressing needs and responsivity, in addition to assessing impact on risk of recidivism.

Report Overview

The DOC submitted its written comprehensive implementation plan titled “Program Categorization and Implementation Plan” in October of 2014. That report extensively outlined the year one scope of work completed by both DOC and WSU. Additionally, that report identified recommendations proposed by WSU and addressed them in the “Implementation Plan Summary Fiscal Year 2015” section.

This report is a written progress update submitted to the Office of Financial Management and legislative fiscal committees, as directed in the Third Engrossed Senate Bill 5034(1)(b)(vi)(B). The first section of this report outlines the deliverables to DOC in DOC’s contract with WSU and the dates we have given them for items to assist in meeting our obligations. This process and our progress so far is discussed in the section titled “Progress on Second Year Scope of Work.” The second section of this report, titled “Progress on Implementation Plan Summary - Fiscal Year 2015” will discuss DOC’s progress in the implementation of the recommendations from WSU as discussed in the “Program Categorization and Implementation Plan” report.

Progress on Second Year Scope of Work

While this section is not explicitly reporting on progress by DOC, it gives a timeline of the due dates and deliverables as outlined in DOC's contract with WSU. This information has been included, as these deliverables will assist DOC in meeting its obligations.

Deliverable 1 – Evaluation Tool Calibration: Due November 15, 2014

- As described in DOC's first report, the "Program Categorization and Implementation Plan", WSU developed and piloted a tool to evaluate whether the DOC programs met identified criteria for evidence based or research based programming. This tool, the Evidence Based Indicator Scorecard (EBIS), included a survey of staff and program components to evaluate relative competencies and program model adherence. Initial data collected on the legislatively funded programs that were evaluated using the EBIS has provided a baseline of data in which the tool can be assessed for reliability and validity. Using this information to ensure accuracy of the instrument, WSU will make any necessary adjustments to the EBIS prior to the continued categorization of the DOC's programs.
 - Progress: WSU consultants have indicated they have completed measures of reliability of the questionnaire to make sure that the individual items/questions produce results that are consistent with the overall intent of the questionnaire. Initial findings for the EBIS appear very strong, however there is not enough data currently to complete the analysis. Therefore the tool will remain in a piloting phase while data is collected from DOC programs.

Deliverable 2 – Evidence-based Practices Evaluations: Due April 1, 2015

- As DOC prioritized legislatively funded programs in order to determine which, if any, should be targeted for phase out, full program evaluations were only completed on these select programs. For year two scope of work, DOC will compile a list of all currently uncategorized programs and will prioritize them for evaluation by WSU based on the likelihood of the program to impact recidivism. The evaluation stages will be completed as follows:
 - Component Match
 - For those programs or program categories which appear on the Washington State Institute of Public Policy's (WSIPP) 2013 meta-analysis, a component match will be conducted.

- The component match will review the studies utilized by WSIPP in its analysis and determine the proportion of components of DOC programs that match with those from the WSIPP study.
 - Evidence-based Practices Survey
 - All listed programs will be administered the online survey developed in year one to determine evidence based practices.
 - EBIS Evaluation
 - For programs that remain uncategorized following the component match and survey, an EBIS evaluation will be conducted.
 - DOC will select staff to be trained by WSU consultants in the use of the EBIS. These staff will then conduct site visits, administering the tool and reporting the information to WSU for final scoring and analysis.
 - For programs with which the results from the component match and survey exceed the requirements for evidence based practices established in year one, the EBIS will not be administered.
 - Evidence/Research-Based Ranking
 - Following the component match, survey, and EBIS administration, evaluations will be completed for each program and a ranking will be provided indicating if a program has achieved a status of Evidence Based, Research Based, or Promising Practice. Programs not identified as Evidence or Research Based will be recommended to be phased out, unless the program is identified to provide a substantial benefit via its improvement of intermediate outcomes. In this event, a review will be conducted to determine the extent to which the program has the potential to provide substantial impact on correctional goals via these intermediate outcomes.
 - Progress: The list of uncategorized DOC programs, prioritized by likelihood of impact on recidivism, was submitted to WSU on October 10, 2014. WSU is preparing to conduct an assessment of the literature regarding the component match portion of this evaluation.

Deliverable 3 – Intermediate Outcome Identification and Implementation: Due April 1, 2015

- Using the list of programs provided by DOC, WSU will make an initial identification of the programs which would benefit from an evaluation of possible successful intermediate outcomes. Additional programs may be added to this list following EBIS evaluations.

- Following a thorough review of the literature, WSU will provide recommendations as to the intermediate outcomes to be collected for the identified programs as well as their intended use.
- Additional recommendations will be provided by WSU as to implementation of intermediate outcomes, methods of data collection, and frequency of evaluation.
 - Progress: The list of DOC programs prioritized by anticipated likelihood of presence of successful intermediate outcomes was submitted to WSU on October 10, 2014. WSU is preparing to conduct an assessment of the literature regarding intermediate outcomes associated with the corresponding types of identified programs.

Deliverables 4 & 5 – Technical Assistance and Recommendations: Due July 1, 2015

- Quarterly reports will be submitted to DOC detailing progress of the scope of work.
- A final report will be submitted for year two.
- Following completion of the final report, a technical assistance presentation will be provided to DOC describing year one and two progress, findings, and recommendations.
- Recommendations for how to continue work going forward will include:
 - A gap analysis of programming needs
 - Follow up on implementation of intermediate measures
 - EBIS follow up
 - Additional program evaluations and related consultation
 - Progress: WSU has submitted its first quarterly report to DOC detailing the scope of work and the anticipated work to be completed in Quarter Two.

Progress on Implementation Plan Summary - Fiscal Year 2015

Sex Offender Treatment Program (SOTP)

- Continue to gather risk/needs assessment data on convicted sex offenders to inform future expansion following the RNR model.
 - Progress: In February, 2014, DOC began using the Static 99-R risk assessment to assess for risk of sexual re-offending. The Static 99-R is being used on all sex offenders entering prison through the reception process with more than six months remaining on their sentence. DOC also began conducting the STABLE 2007 assessment on offenders as they enter the SOTP. The data from these assessments continues to be compiled and analyzed, informing programming decisions moving forward.
- Pilot an amenability group at the Airway Heights Corrections Center (AHCC), prioritizing offenders who are higher risk/need and determined to be “non-amenable”
 - Progress: A non-amenable curriculum and implementation plan is being developed, with the anticipated start date for the initial group occurring during the fourth quarter of FY15. It should be noted that DOC is not currently resourced for this pilot group, so initial staffing will need come out of existing resources.
- Prioritize higher risk sex offenders with an identified chemical dependency need for the substance abuse treatment program at AHCC, prior to eligibility for SOTP to give exposure to treatment and increase likelihood of enrolling in SOTP.
 - Progress: DOC is updating policies and developing a process for admitting certain offenders to substance abuse treatment prior to the timeframes in the current entrance criteria. DOC will then determine if participation in substance abuse treatment impacts those offenders’ amenability and enrollment in SOTP.
- Within existing resources, develop a Quality Assurance process. When resources are available, establish and implement a Quality Assurance component.
 - Progress: The Sex Offender Treatment Programming Unit now utilizes periodic “blind scoring” on its assessments as well as an analysis of that scoring in order to ensure and maintain inter-rater reliability. An SOTP Quality Assurance position description is currently under review with Classification and Compensation. An initial implementation plan has been developed, which allows for the provision of Quality Assurance of program components/curriculum and treatment. This will require dedicated resources to initiate this practice in the DOC’s sex offender treatment program(s). Realizing the value of Quality Assurance, DOC is currently determining if this position can be funded temporarily by utilizing staff vacancy savings.

- Adjust treatment dosage, to provide differing program intensity and duration, commensurate with risk.
 - Progress: The DOC has begun the process of adjusting treatment dosage commensurate with risk and needs.

Substance Abuse Treatment

- Modify entrance criteria for the substance abuse treatment program at AHCC to allow higher risk sex offenders with a substance abuse treatment need to complete treatment prior to eligibility for SOTP.
- Prioritize higher risk, non-amenable sex offenders for the AHCC Intensive Outpatient Program.
 - Progress: Progress on the prioritization of higher risk and non-amenable sex offenders is discussed in the SOTP progress summary above in that “DOC is updating policies and developing a process for admitting certain offenders to substance abuse treatment prior to the timeframes in the current entrance criteria. DOC will then determine if participation in substance abuse treatment impacts those offenders’ amenability and enrollment in SOTP.”
- Expand substance abuse treatment to a Medium and/or Close Custody unit at the Washington State Penitentiary (WSP), within available resources, or provide “out-patient” services, whichever can be done within the allotted budget.
 - Progress: The DOC has obtained licensing to begin providing substance abuse treatment at the WSP Medium unit. The contractor has hired a Chemical Dependency Professional (CDP) who will attend the January 2015, 6-week CORE training.
- Develop strategies to implement Quality Assurance across the continuum of substance abuse services. Since these services are provided in multiple locations across the state, within prisons, and in the community, it may be necessary to pilot a Quality Assurance process on a smaller scale to determine the resources needed to establish and implement a Quality Assurance process across the continuum.
 - Progress: The DOC has drafted position descriptions to establish Quality Assurance Chemical Dependency Professionals (QACDP) located throughout Washington State. These QACDPs will ensure services are being delivered in accordance with the evidence based standards. As these positions require dedicated resources, DOC is currently determining the best way to proceed, within existing resources. The DOC anticipates creating one pilot position which would, as WSU suggests, “Pilot a Quality Assurance process on a smaller scale to

determine the resources needed to establish and implement a Quality Assurance process across the continuum.”

- Determine intermediate outcomes that indicate effectiveness of substance abuse programs.
 - Progress: The primary contractor delivering Substance Abuse/Chemical Dependency services in DOC facilities and in community field offices across Washington State is providing quarterly reports to the DOC. These quarterly reports provide data on performance measures such as service completion, retention rates, and service termination rates. DOC is currently determining measurable intermediate outcomes, such as increased protective factors and decreased risk factors.
- Establish a data collection and program improvement process to assist with future program resource allocation and identification of program improvement needs.
 - Progress: The Resource Program Management (RPM) has been migrated from the Offender Based Tracking System (DOC’s previous data management system), and is now a component of the current system, the Offender Management Network Information (OMNI). This conversion allows DOC to more easily track the use of programs, sessions, providers, referrals, attendance, participation, and can be used as a tool for prison Classification Counselors and Community Corrections Officers to identify offender needs in accordance with assessment needs. Additionally, the integration of offender programming into an Automated Capacity Management application within OMNI, currently being developed by DOC, will ensure the right offender is placed in the right service at the right time to ensure successful re-entry upon release. A new management analyst position will be hired. This position will focus on the data share process of getting Target data imported in to DOC’s data tracking system.

Thinking For a Change (T4C)

- Expand T4C to Medium Custody units (expansion funding requested in the 2015-17 budget request).
 - Progress: As stated in this component, funding has been requested in the upcoming budget submittal. In preparation, Offender Change staff has been working with current programming sites to establish best practices for initial implementation at the proposed expansion sites.
- Continue to expand T4C to address the needs of the population in the community.
 - Progress: Currently, T4C is generally delivered by Community Corrections Officers (CCO) in a rotational manner. These officers deliver the program to a

single group and are then removed from the rotation, oftentimes for 12 months or more, before facilitating another individual group. This has led to difficulties with program fidelity from a Quality Assurance (QA) standpoint. Additionally, this has created the need to train a considerable number of CCO's in order to provide programming under this strategy. The Community Corrections Division (CCD), in collaboration with the Offender Change Division (OCD), is developing a modified delivery strategy for T4C to be delivered in the community. This strategy involves the repurposing of up to 40 current CCO positions as dedicated resources to deliver Cognitive Behavioral Treatment (CBT) programming in various locations throughout the state. Increasing the number of dedicated facilitators who deliver CBT programming will allow DOC to deliver CBT interventions to a greater number of eligible offenders in the community with greater program fidelity and efficacy. DOC anticipates that this delivery strategy will be implemented by the end of the fourth quarter of FY15.

- All DOC QA staff have all been trained in T4C and as trainers for T4C. This training, and the new delivery strategy, will allow QA staff to provide meaningful feedback, mentoring, and coaching to the facilitators.
- Establish intermediate outcomes and consistent data collection process.
 - Progress: Integrating the RPM system into OMNI allows for far greater accuracy and ease of tracking program capacity and utilization both in prisons and in the community. Additionally, WSU's contract for their second year scope of work includes their determining successful intermediate outcomes for many of DOC's current programs as well as a plan for implementing and integrating those outcomes into its overall programming strategy.
- Implement facilitated Advanced Skills practices for T4C completers.
 - Progress: Offender Change staff is currently working to adjust facilitation strategies to ensure that Advanced Skill Building will follow an offender's successful completion of the main T4C program. This strategy will be utilized as new program cohorts are developed and programming delivery begins.

Vocational/Transition/Re-entry Programming

- Pilot expansion of transitional courses at two Community Justice Centers.
 - Progress: The contract with the State Board for Community and Technical Colleges (SBCTC) includes funding to deliver the Job Seeking Skills classes at King County's Seattle Community Justice Center, and Pierce County's Tacoma Community Justice Center. These classes are scheduled to take place during FY15.

- Continued piloting of “navigator” positions through the SBCTC contract.
 - Progress: There are two navigators currently working in the community. One is through Tacoma Community College and works to support female offenders releasing from the Washington Corrections Center for Women (WCCW) and from Mission Creek Corrections Center for Women (MCCCW). The second is through Walla Walla Community College and serves male offenders releasing from the Coyote Ridge Corrections Center (CRCC) or WSP who are attempting to locate in the King County area. A third navigator is being hired by Edmonds Community College and will also serve offenders releasing in the Seattle area. Interviews are currently being held and the position is anticipated to be filled and operational before the end of the calendar year.

Correctional Industries (CI)

- Expand CI employment at AHCC, CRCC, and WSP.
- Increase offender jobs from 1,500 to 2,250.
 - Progress: The plan to employ 2,250 offenders in Correctional Industries (CI) positions is in progress and on track. Approximately 130 new offender positions were created and deployed at CRCC on 8/1/14, comprising the bulk of the current CI population increase to the current level of 1,880 offenders. Additionally, plans are in place to add 200 more CI offender workers at AHCC on 1/1/15 and 250-300 more at WSP on 4/1/15, reaching the goal of 2,250 offender CI positions by the end of fiscal year 2015.

Female Specific Programming

- Evaluate Moving On program at 12 and 24 months after implementation.
- Implement a pilot of Moving On in the community, so that it can be included in a future evaluation.
 - Progress: Moving On, a CBT intervention developed specifically for female offenders, is currently being facilitated at both WCCW and MCCCW. A plan for a pilot implementation of Moving On in the community in Everett has been formulated and awaits the modification of the CBT facilitation strategy for Community Corrections as outlined in the Thinking for a Change (T4C) component earlier in this report. If funding is obtained for continued consultation, and DOC retains WSU as the consultant in program evaluations beyond the current two year scope of work, evaluations of the Moving On program could occur at 12 and 24 months after implementation.

Aggression Control Training (ACT)

- When resources are available, train staff located in the Intensive Management Units (IMU) in Core Correctional Practices (CCP), Motivational Interviewing (MI), and ACT and implement Quality Assurance (QA) at CBCC.
 - Progress: The DOC is in the process of developing the internal capacity to train its CBT programming facilitators, including ACT, CCP, and MI. Currently, DOC has approximately 20 staff members certified to train CCP facilitators. As of the end of November 2014, QA staff members have been certified to train ACT facilitators. As this is currently unfunded, the DOC is exploring what can be done within existing resources, therefore DOC is determining the requirements and resources necessary to develop the internal capacity for Motivational Interviewing trainers, as well as delivering these trainings to our IMU staff, to include QA staff.
- When resources are available, conduct a small ACT pilot study at Snohomish County's Everett Community Justice Center.
 - Progress: A plan for implementing ACT as a pilot in Everett has been developed. However, there are currently no resources allocated for conducting a pilot study on the efficacy of ACT in the community, so the implementation of the pilot is dependent upon the anticipated deployment of the dedicated program delivery staff being developed in the Community Corrections Division (CCD).
- Build on the continuum by prioritizing higher risk offenders who complete ACT for T4C and other criminogenic programming as time/resources allow.
 - Progress: With the expansion of T4C (2015-17 budget proposal) to the Medium Custody units (discussed in the T4C section above), where ACT is currently being facilitated in both facility IMUs and the Close Custody unit of WSP, we will be able to "step-down" those offenders who have completed ACT and have promoted to lower levels of custody while maintaining a continuum of care and reinforcing a treatment progression model.