

NATIONAL TASK FORCE ON CORRECTIONAL SUBSTANCE ABUSE STRATEGIES
Substance Abuse Program Strategy Brief

Program Name: Special Intensive Supervision Drug Project

Agency: Pennsylvania Board of Probation and Parole

Address: 3101 North Front Street
P.O. Box 1661
Harrisburg, PA 17105-1661

Contact Person: Joseph M. Long

Phone: (717) 787-6208

Fax #: (717) 772-2156

Statement of Program Purpose/Goals:

The program goal is to provide special intensive supervision for a select group of parolees who have a history of drug dependency, are considered high risk, and reside in a densely populated metropolitan area where drug usage is high.

There are three objectives which are the foundation of this project: 1) to increase supervision control and impact on drug abuse; 2) to reduce crime caused by drug abuse; and 3) to provide treatment services to clients amenable to treatment.

The emphasis on control is achieved through structured and stringent supervision requirements, frequent urinalysis testing and the use of various sanctions, including electronic monitoring. Simultaneously, the program places a high priority on treatment. This is achieved by having made arrangements with treatment providers to provide inpatient, partial inpatient, and outpatient treatment for parolees who can benefit from such treatment.

What were primary factors/events which lead to the establishment of program:

Data from Board cohort follow-up studies of supervision effectiveness has demonstrated that parolees who are assessed as frequent abusers of drugs have a higher rate of recidivism (29%) after 12 months of supervision, in comparison with clients who are assessed as having no interference with functioning (19%). This corresponds with the findings of a study by a National Research Council panel which found that criminals who are drug abusers commit crimes at least twice as often as other offenders and may commit as many as six times more crimes during periods of heavy use.

A predominant characteristic in the Board's client population is drug abuse, particularly in the metropolitan areas of Philadelphia and Pittsburgh. In these cities between 20% to 25% of the Board's caseload have been identified as having various types of drug histories. These nearly 2,000 clients represent about 30% of an estimated 6,600 Board clients statewide who have been identified with drug problems.

From our studies, the Board's field staff are effective at making clinical assessments regarding the detrimental effects of drug abuse on successful parole completion. However, the provision of supervision services and sanctions for the frequent abuser client has been inadequate due to high parole agent workloads. The project is intended to address this deficiency.

PROPERTY OF

IC R O F

126863

**U.S. Department of Justice
National Institute of Justice**

This document has been reproduced exactly as received from the person or organization originating it. Points of view or opinions stated in this document are those of the authors and do not necessarily represent the official position or policies of the National Institute of Justice.

Permission to reproduce this ~~document~~ material has been granted by

Public Domain

National Institute of Corrections

to the National Criminal Justice Reference Service (NCJRS).

Further reproduction outside of the NCJRS system requires permission of the ~~document~~ owner.

Operational Features:

List Critical Components with brief description, if needed.

This project provides special intensive supervision and needed treatment services to adult felon parolees under the jurisdiction and supervision of the Pennsylvania Board of Probation and Parole. The program has two operational sites in densely populated areas of Philadelphia and Pittsburgh where there is a high incidence of drug usage and crime. The critical components of the program include the following:

- 1) intensive supervision of the client, beginning with 20 client/collateral contacts each month;
- 2) imposition of a curfew for the first 30 days of supervision using electronic monitoring equipment;
- 3) extensive use of urinalysis;
- 4) extensive use of treatment with clients;
- 5) imposition of various sanctions for failure to follow program requirements, including the use of home confinement, electronic monitoring, etc.;
- 6) emphasis on team work among staff to provide the most effective supervision of the clients; and
- 7) a close and cooperative working relationship with local police and positive community groups.

Clients remain in the program for at least 12 months, moving progressively through the three program phases as warranted by their behavior.

Note - More detail is found in the section on supervision/surveillance strategies.

How are clients referred to the program:

As the program began, clients in the targeted areas were reviewed to identify clients already under supervision who met the program criteria. A reassessment was completed on each client as part of the review process before transferring the cases to the project.

New clients come into the program through the pre-parole process. Parole plans are initially screened to determine if they meet the program criteria and are located in the project's area. In these cases, the parole plans are submitted to the program's unit supervisor to investigate in the usual manner, at which time a second review is made of the eligibility of the client for the program.

It is also possible for the Board to order the parolee into the program as part of the parole release conditions.

Assessment:

What type of clients are accepted

Describe the assessment process which led to the referral and which was used in the program, if different.

Risk/needs initial assessment and reassessment instruments and a client management classification system are used 1) to identify clients who have drug abuse histories and/or continue to have drug abuse problems, and 2) to assist the parole agent in the development of a supervision plan for each client. These instruments were developed in 1982 as a result of the Board's involvement in the NIC Model Probation and Parole Management Project.

Drug Screening Process:

Clients
Staff

Detection of drug usage is done by frequent urinalysis of clients. In the beginning phase of the project, a minimum of six urine samples per month are collected from each client on a random basis. The samples are taken in the home and the office, seven days a week, including holidays. When drug usage is detected, samples are taken more frequently, and the client is required to come to the office on Saturdays and Sundays to provide urine samples.

The Board contracts with a private laboratory to conduct the urine testing to determine the presence of a wide array of drugs. The laboratory is required to use the thin-layer chromatology (TLC) process for the initial screening, and the confirming tests are done by enzyme immunoassay (EMIT).

There is no drug screening policy for staff.

Supervision/Surveillance Strategies (either by program or outside of program as related to clients):

Program requirements include frequent client contacts and urinalysis, curfews, limited use of electronic monitoring and participation in treatment programs as needed. Therefore, caseloads are limited to 35 clients per parole agent. There are three phases to which the client may move in the program. The phases range from 12 client contacts (field and office) and 8 collateral contacts per month to 5 client contacts and 2 collaterals. The field contacts are always random, unannounced, at various times of the day and night, seven days a week. Curfews are also imposed requiring the clients to be home at night unless they are employed during the evening hours. Permits for travel outside Philadelphia or Pittsburgh are prohibited except in Phase 3, when travel permits may be issued for family and non-recreational purposes.

When clients violate established rules and procedures, the parole agent has the option of imposing one or more sanctions. Sanctions may include written instructions, administrative conferences, increased urinalysis, intensified reporting requirements, including weekends and evenings, imposition of special conditions, house arrests, and electronic monitoring. The use of electronic monitoring equipment is the final alternative to incarceration and may be used when other sanctions are not adhered to by the client. Electronic monitoring equipment may be used up to a maximum of 60 days continuous with any client.

Weekly contacts are made with the appropriate law enforcement agencies in the community to secure additional information on clients. The police district or precinct has complete data on all clients in the program and cooperates fully by providing information about clients as they receive it.

There is a regular sharing of client information among the supervising agents so that each one will have some knowledge of all of the clients in the unit, particularly when the agent is assigned weekend/holiday duty. A parole supervisor is assigned to every unit with management responsibilities for the program, including work assignments of parole agents, coordinating planned arrest and absconder searches, etc. The supervisor is also responsible for the development of a community advisory committee to increase the community awareness of the program and to seek citizen cooperation in providing information about clients.

Treatment/Intervention Strategies:

Critical to the success of this project is the provision of needed treatment and other support services. Through the cooperation with the Department of Health, evaluations, inpatient, partial inpatient and outpatient treatment services are available for clients being supervised in this project.

Treatment services are provided differently in the two project sites. In Philadelphia, there is no TASC program, and treatment is provided through the City of Philadelphia Coordinating Office for Drug and Alcohol Abuse Programs. This coordinating office has provided funds to treatment providers to service the Board's parolees in the program. The Board's parole agents determine which specific program to refer the client to, based on client needs and the treatment provider's program components.

A TASC program operates in Pittsburgh through the Allegheny County Mental Health/Mental Retardation program. Funds are provided to one agency to evaluate each parolee in the program to determine the treatment needs. This evaluation unit then makes the referrals to the specific treatment providers.

To what extent are criminal justice sanctions employed in requiring or mandating an offender into treatment and in maintaining clients in the program:

Sanctions are used rather extensively in requiring clients to participate in both outpatient and inpatient treatment programs. In some instance the Board includes this requirement as a condition of release on parole. In other cases, the supervision staff imposes a special condition requiring participation in treatment programs. When a client fails to adhere to such a condition, additional sanctions are usually imposed and may result in the client being recommitted to prison when the client is out of control and unwilling to participate in a treatment program.

Personnel:

Number

Roles

Required Training

State Standards and/or certification requirements - None

Role of ex-offenders

Role of paraprofessionals and volunteers - no volunteers are used directly with clients

Staff included in the project include the following:

2 parole supervisors - manage the program operations

11 parole agents - provide direct service and supervision to clients

1 human services aide - ex-offender, paraprofessional who assists the professional staff and provides some direct service to clients

4 clerical

All staff in the project were transfers of experienced supervisors and parole agents selected for their ability in working with offenders. There were no specific educational or other requirements for program staff. However, all of the agents had previous training in working with drug offenders, drug identification, etc., through the Board's ongoing in-service training program.

In addition, an initial one-week orientation and training session was conducted in the beginning of the project for all members of the staff, including the support staff. The training provided insight into the goals and objectives of the program, additional training in working with the drug offender, urine testing procedures, and team building. In addition, several staff from another jurisdiction's intensive supervision program provided training based on their experiences of working in a similar program for a year or more.

Follow-up training experiences are scheduled on a regular basis to secure feedback from program staff on the project's development and to provide further training related to becoming more effective in working with drug offenders.

Program Evaluation Strategies:

The Board's Division of Management Information has been assigned the primary responsibility for data collection and analyzation related to the project. The research and statistical analysts' work is directed toward providing information used to measure the achievement of program objectives. These objectives include the impact on crime by a reduction in new offense recommitments, by intervening with higher technical parole violation arrests and to reduce the rate of convicted parole violator recommitments.

Sources of Program Funding:

Are user fees assessed? If so, explain:

The Pennsylvania Commission on Crime and Delinquency is providing funds to the Board from the federal Narcotics Control Assistance Program for an initial three-year period. These funds received total \$1,321,168 and are used primarily for personnel costs, leasing of electronic monitoring equipment and urine testing. In addition, state matching funds are used to pay for other operational costs.

Clients do not pay any fees for participation in the program, including the use of electronic monitoring. The Probation and Parole Act of Pennsylvania which governs the work of the Board does not permit the collecting of fees from clients.

Key Variables which have contributed to the program's success:

A number of factors have contributed heavily to the program's success including the following;

- 1) the strong support and commitment of the Board and the Director of the Bureau of Supervision for the basic goals of the project;
- 2) the outstanding quality and commitment of the staff who volunteered or were assigned to the project; and
- 3) the cooperation of the Department of Health in allocating funds to provide treatment services to the clients.

Key Variables which have caused difficulties for the program:

Overall, the project has been extremely successful with few difficulties except the following:

- 1) delays in securing electronic monitoring equipment due to cumbersome procurement procedures beyond our control;
- 2) the turn around time for urine test results has been too long; and
- 3) a shortage of available beds for inpatient treatment.

If appropriate, how is continuity of services managed when a client leaves the program:

Clients remain in the program until they demonstrate the ability to overcome their drug dependency. At such time as it is determined that these clients no longer need this intensive supervision, they are transferred to the Board's other supervision units for continued supervision until their maximum sentence expires. If continued treatment services are needed for the clients, they are furnished by treatment providers.

Miscellaneous Comments:

THANK YOU! Return to:
The National Academy of Corrections
Attention: Sally Cullerton
1790 30th St. Suite 430
Boulder CO 80301

SUPERVISION GUIDELINES

1. Criteria for Selection of Clients for Supervision

- a) Pennsylvania parole cases
- b) High risk assessment (intensive and close)
- c) History of drug abuse
- d) Repetitive, drug or drug related offenses
- e) Board ordered special condition
- f) Residence in the targeted area
- g) Priority will be given to clients recommended for the project as a result of an evaluation by a Department of Health service provider.

2. Process for Placing Current Clients in the Project

When a client currently under supervision meets the criteria for inclusion in the project the following steps shall be taken:

- a) The client's agent and unit supervisor shall hold an administrative conference with the client to:
 - review the problems being encountered with the client, e.g. positive urines, lost employment, etc.
 - describe the new program to the client, including the initial supervision requirements, the process for movement in the project with the goal of being returned to a regular supervision unit, and have the client sign a statement acknowledging the explanation of the program; and
 - inform the client of the name of the new agent and/or new office location, if applicable.
- b) If the case is being transferred, the case must be brought up-to-date and a PCR must be completed prior to the transfer after January 11, 1988.
- c) The special intensive supervision drug unit supervisor may reject inappropriate referrals which do not meet the criteria, with the concurrence of the deputy district director.

3. The Process for Inmates Being Released to the Project

Through cooperation with the Department of Health, drug program service providers will be evaluating inmates who reside in the project's target area. When the evaluation recommends an inpatient, partial inpatient, or outpatient program, such information will be given to the institutional parole staff and will be incorporated in the parole plan and possibly the special conditions. When making such recommendations, the service provider should have program space available for the client when released to the community and be receptive to the parole agent's initial and subsequent contacts. Priority will be given to accepting these clients into the unit, even if it means transferring clients in Phase III to other supervision units.

More specific process details will be developed after meetings are held with the drug and alcohol single county authority in Allegheny and Philadelphia Counties.

4. Supervision Requirements

-2-

All clients assigned to the project are placed in Phase I. The requirements listed below are minimums.

<u>Supervision Activity</u>	<u>Phase I</u>	<u>Phase II</u>	<u>Phase III</u>
Client Field Contacts	1/week or 4/month (1 must be a curfew check)	1/week or 4/month (1 must be a curfew check)	3/month
Client Office Contacts	2/week	1/week	2/month if employed/comm. service, or 1/week, otherwise
Collateral Contacts	1/week 1/week police	1/week 2/month police	2/month
Urines	6/month	4/month	2/month
Curfews*	6 to 8 pm	10 pm/11 pm weekends	12 midnight
Travel Permits	None, except emergencies	None, except emergencies	Limited, family, non-recreational
Electronic Monitoring	Selective, max.-60 days	None	None
Employment/Training/ Community Service	Encouraged but not required	Employment group	Employable adv. empl. group community service
* To be modified if the client has employment during the evening hours.			
Requirements to move to next phase	6 months initially	3 months	
	no sanctions or violations in last 3 mos.	no sanctions or violations	employed, comm. service, training, other income source

5. Sanctions

a) Criteria for Imposing Sanctions

When clients violate established rules and procedures, they will be subjected to one or more sanctions. The following is a list of violations that will result in the imposing of sanctions in lieu of incarceration.

- 1) Failure to report as instructed (all clients assigned to the units must be provided with specific reporting instructions in writing)
- 2) Positive urinalysis results
- 3) Violation of general conditions or special conditions
- 4) Arrests for summary or minor misdemeanors
- 5) Marital or domestic conflicts
- 6) Loss of employment through negligence
- 7) Refusal to participate in treatment program, employment group, training program or community service, if applicable.
- 8) Curfew violations

b) Sanctions

The following is the list of proposed sanctions that may be imposed by supervision staff as dictated by the criteria above.

- 1) Warning/Written Instruction (PBPP-348)
- 2) Administrative conference
- 3) Increased urinalysis
- 4) Intensified reporting requirements
- 5) Stricter curfews
- 6) Weekend/evening reporting to office
- 7) No residence changes without the parole agent's permission
- 8) Mandatory registration with local police precinct
- 9) Agent imposed special conditions
- 10) 48-hour detention in a CSC
- 11) Electronic monitoring
- 12) House arrest - Clients who consistently violate established rules may be confined to their homes for specific periods of time, except for approved brief periods to handle verified legal, vocational or medical matters.
- 13) Return to a stricter phase of supervision

6. Electronic Monitoring

a) Maximum Use

Electronic monitoring equipment may be used with a client up to a maximum of 60 days continuously.

b) Installation of Electronic Monitoring Equipment

- 1) When it is determined that electronic monitoring equipment should be used, the parole agent will arrange a time for the client to meet with him/her and the unit supervisor/designee to explain the use of electronic monitoring equipment, the consequences of not adhering to the conditions for the use of the equipment, and to install the equipment.
- 2) At the pre-arranged time, the unit supervisor/designee and the parole agent will meet with the client and after appropriate explanations will install the equipment, including the transmitter on the client, and run sufficient test programs to insure proper functioning of all the equipment.
- 3) The parole agent shall also impose a specific special condition describing the use of the electronic monitoring equipment, using Special Conditions (PBPP-236). Example of a special condition - You will participate fully in the electronic monitoring program; you will not tamper or remove the transmitter from your person; you will be responsible for the cost of replacing any equipment damaged, destroyed or lost intentionally or recklessly; and you will be present in your approved residence between the hours of xx and xx, unless approved in advance by your parole agent. Any failure to adhere to these conditions will result in an immediate violation of parole.

c) Monitoring the Electronic Monitoring Equipment

- 1) The electronic monitoring computer in the sub-office will be checked each morning by all parole agents when possible or the duty agent, and on a regular basis during normal working hours by the duty agent, human services aide or clerical employees. When a deviation of any client's program is noted the unit supervisor shall be informed immediately and the information recorded in an activity log.
- 2) The unit supervisor will be responsible to see that deviations are investigated immediately by the appropriate parole agent or other staff as assigned by the supervisor, by a home contact.
- 3) After investigating the incident, the parole agent must discuss the matter with the unit supervisor to decide on a course of action including the arrest of the client for a technical violation.

7. Treatment and Support Services

Critical to the success of this project is the provision of needed treatment and other support services. Through the cooperation with the Department of Health, evaluations, inpatient, partial inpatient and outpatient services will be available for clients being supervised in this project. Parole agents should use these services when appropriate. When a client is in an inpatient program the minimum supervision requirements are waived and a weekly collateral contact with the program staff is required. In addition, parole agents should be well acquainted with support groups in the area such as Narcotics Anonymous and strongly urge clients to join and become active in such a group.

8. Community Relations Program

The staff will make a serious effort to develop and maintain close working relationships with the law enforcement unit(s) and other supportive agencies in the sub-office area. Attempts should be made to have police districts/stations in the area name a liaison officer to work closely with the Board's staff in the surveillance of these clients. The police units should be provided with current information on the clients being supervised and any special conditions imposed on the clients.

A community advisory committee is to be established in the sub-office area. The committee should consist of a cross section of community persons, including the police, treatment program personnel, and other citizens interested in aiding in the Board's attempt to reduce crime in the community. The community, through these committees, should be notified to contact the staff immediately if they have information of wrongdoing by Board clients so that our staff may respond appropriately. After work hours and during weekends and holidays, the staff should be contacted through the use of the Board's "800" number. Drug education programs should be developed and the staff should make efforts to speak to school and other community groups about drug abuse and its debilitating effect on the user.

9. Staff Coverage on Weekends, Holidays and Evenings

In order to meet the supervision requirements, the following guidelines must be adhered to by unit staff.

a) Weekend Scheduling

A rotation schedule at the beginning of each month shall be developed at least two (2) weeks in advance by the unit supervisor whereby assignments will be made to the parole agents, unit supervisor and the human services aide to be in the sub-office at least a half a day on Saturdays, Sundays and holidays to review the electronic monitoring computer messages on those cases when the electronic monitoring is being used, to take scheduled urines, and to meet clients when required to come to the office on these days. Staff will be available for the coverage on the weekends and, therefore, each individual would usually only have to be available for weekend duties one day a month.

If it appears there has been a violation of the electronic monitoring or other conditions, the duty agent will contact the unit supervisor or, in his absence, the supervising parole agent and the deputy district director who will determine the seriousness of the violation and the deputy district director will assign an agent(s) to follow up as required.

The assignment for the half-a-day monitoring can be considered overtime. Any call-outs assigned by the supervisor will be overtime and appropriate payment will be made.

b) Holiday Scheduling

A rotation schedule will be made at least two (2) weeks prior to the beginning of the year for assignment of staff to cover the office during state holidays.

c) Evening Supervision Contacts

Inherent in this intensive supervision program is the need for evening contacts with clients. Therefore, agents will be expected to work some evening hours for home and office contacts, particularly when sanctions such as curfews, house arrest, and electronic monitoring are imposed. Additionally, the local police precinct must be contacted periodically to strengthen the supervision process. Agent-controlled hours will be utilized for the time used for evening contacts.

d) Staff Teamwork

In order to meet the supervision requirements, particularly evening hour client contacts in high crime areas, it is appropriate and recommended that agents periodically work in teams of two. This is especially important when there is a possibility of an arrest of a client.

9. Urinalysis

To meet the minimum urinalysis requirements each client will have a mandatory urinalysis day to be established on a rotating basis each week. A second urine test is to be taken within a 72-hour period at the agent's discretion. At least one time per month the 72-hour period will cover a weekend. When it is determined the client's usage of drugs occurs on a weekend, the agent and supervisor will determine if a field contact and urinalysis should be made on Saturday and Sunday. Agent-controlled hours with appropriate overtime beyond 40 hours may be utilized for this purpose.