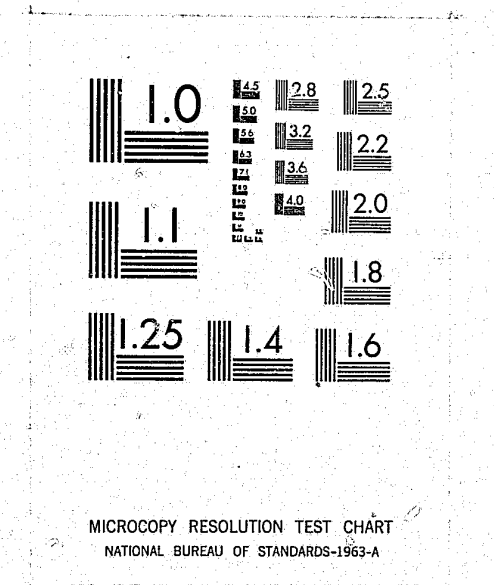


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PROGRAM CLASSIFICATION FOR
ACADEMIC AND VOCATIONAL PROGRAMS

Report Number 2

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Purpose of the Study

The purpose of the study is to describe program classification and its effectiveness in matching clients to programs. It is an important link in the program delivery system, because the decisions made in program classification affect client participation in programs.

Content and Organization of the Report

The findings in this report present both strengths and weaknesses of the program classification process, but the focus of the report is on the problems which impede or obstruct the process. An emphasis on the problems was chosen for this interim report, because it was thought that discussion of the process' few weaknesses, rather than its many strengths, could lead to improvements in program classification. Some of those weaknesses are not the responsibility of the program classification process, but rather are problems which impinge on the process.

The report includes a description of program classification, general findings related to more than one facility, a few findings specific to only one facility, and recommendations for improving program classification.

The contents of the report are presented in the following sequence:

1. The program classification process is described.
2. The findings on the program classification process are presented.
3. They are compared to existing policies to identify the strengths or weaknesses of the process and determine its effectiveness.

4. If improvements can be made, recommendations for some of the problems are suggested. The recommendations are based on existing standards which present what should minimally occur in program classification. They are not offered as final remedies; nor are they comprehensive. But they are, hopefully, realistic suggestions for improving the program classification system.

5. The Appendix contains the tables referred to within the report.

Purpose of Program Classification

The purpose of program classification is to assign residents to academic and vocational programs, work assignments, and institutional on-the-job training which meet their individual needs and abilities, as well as the needs of the facilities. (PD-BCF-40.01)

Methodology

The study of program classification was conducted at eleven facilities. Knowledge about program classification is based on information gathered from six sources:

1. The Classification Directors were interviewed to obtain their perceptions of the program classification process.
2. Three to five residents from each facility who were classified into programs were interviewed to obtain their perceptions of the program classification process.
3. The program classification operation was observed to determine how the process functioned at each of the facilities.

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4. Thirty institutional client records of residents who were admitted January, 1977 through June, 1979 were randomly selected from each of the facilities in order to identify:

- A. What types of program assignments were made for residents at their initial facility placement;
- B. How many residents were classified into programs which were recommended in R&GC; and when they were not, the rationale for program classification decisions.
- C. The average time spent by residents before placement into the recommended program.

5. Reference is made throughout the report to relevant policy directives, because they present objectives and intentions of program classification. The Administrative Rules and Statutes for the Michigan Department of Corrections were also consulted for further clarification of what must be accomplished in program classification.

6. Standards of the program classification process found in the Manual of Standards for Adult Correctional Institutions, sponsored by the American Correctional Association (ACA Manual), are also consulted to identify what should be done in program classification.

Description of the Process

Analysis of the program classification process occurred at a time when the structure was changing. The process historically was conducted by a

committee, consisting of a Treatment Team Supervisor, Resident Unit Manager, or Counselor, in addition to the Classification Director. A recent policy change (PD-BCF-40.01) has made it no longer necessary to do program classification with a committee.

Program classification is the process in the program delivery system which occurs after client intake and selection for programs, and formally links intake procedures to client placement in programs.

Classification Directors gather information from three sources which help them make decisions about program placements for residents. They are the client's institutional file or counselor file, an interview with the resident, and other criteria. A discussion of the three sources follows:

1. The file contains information including the past history of the resident, educational completions, the pre-sentence investigation (PSI), and transcase recommendations. This information gives Classification Directors some background on the resident. It is examined either before or during the interview with the resident.
2. The interview with the resident is held shortly after the resident's arrival at the receiving facility. Residents are notified to appear at program classification, where they are interviewed by the Classification Director or a Classification Committee. At the interview, some Directors give residents information about programs available, but most residents already know of available programs at the facility from orientation held before program classification. Another purpose for interviewing residents is to give them an opportunity to express their choices of programs

and work assignments. The intent of existing policy is to give consideration to residents' choices (PD-BCF-40.01; Administrative Rule 791.4430).

The residents' desires for programs and work assignments are elicited at all facilities, but the degree of resident participation in the program classification process varies. The degree of involvement on the part of the resident is related to the way in which the preferences of the residents are obtained by the Classification Directors. Some residents were asked, "What would you like to do here?", while others were asked, "Where would you like to work?" Both questions seemed to present the resident with choices, but one question narrows the possibilities by urging the resident to choose a work assignment. From this, it is apparent that some residents are more involved in their classification reviews than others.

3. In addition to considering residents' desires for programs and work assignments, other criteria are used to make decisions about program placement. These criteria include R&GC recommendations, educational level of the resident, available program openings, institutional needs, length of the resident's sentence, age of resident, type of crime or crime history of the resident, and the racial balance of programs. Of these criteria, R&GC recommendations are very important to Classification Directors because policies specify that these recommendations must be considered. (PD-DWA-11.01 and PF-BCF-40.01). Determining program needs for residents is a responsibility of R&GC, but Classification

Directors need to have this information prior to classifying residents.

After considering the necessary information, Classification Directors make decisions about program placements for residents. PD-BCF-40.01 indicates that Classification Directors have final authority for these decisions. The decisions are usually recorded on the Classification Review Forms or half-sheets which become part of the client's institutional or counselor file. Policy specifies that the rationale for program classification decisions and programs which are of interest to the resident must be documented (PD-BCF-40.01). Other information to be included on the Classification Review form are dates of the program classification, and program completions or achievements of residents.

Participation in programs is voluntary, unless residents have been identified as those who need "job readiness programming." R&GC includes routine work assignments in this category, especially for those designated as residents with "poor work habits" (See R&GC Recommendations CS0-104, pg. 1). Although no policy says explicitly that residents must work, it is assumed that they will if possible, and Administrative Rule 791.4435 speaks very directly to the consequences for residents who refuse work assignments. A standard also states that residents are expected to work. (Standard 4380 ACA).

Residents expect negative consequences for refusing both programs and work assignments, and Classification Directors admitted there are some penalties.

GENERAL FINDINGS

The R&GC Recommendations for Client Program Involvement

R&GC recommendations for programs as specified on the Transcase Form R&GC Recommendations are frequently inadequate and cannot be followed by Classification Directors. There were mainly three problems found with transcase recommendations:

1. Recommendations are made for client involvement in programs which are no longer offered at any facility. An example of one such program which is recommended but no longer offered is Computer Programming. Although the program recommendation may be particularly appropriate for meeting the needs of the client, the client is unable to participate at any facility placement.
2. Programs are recommended which are not offered at the particular facility the client expected to be placed at. For example, residents are sent to facilities because they meet the requirements for custody or security, but that facility may not offer the programs which are recommended. When the resident arrives at the facility, it becomes necessary to make adjustments in program recommendations. R&GC may have been able to make an initial match between facility placement and program need. Because this is not always done, there is duplication of effort.
3. Sometimes programs which are necessary for residents have not been recommended, and the rationale has not been stated. For example, remedial education is necessary for residents who test below 6.0

grade level (PD-DWA-40.01), but it is not always recommended. (Twelve of the 331 cases indicated a need for an ABE program though it was not recommended.)

In spite of deficiencies of the transcase recommendations, study of the client institutional files and counselor files showed that, of 331 cases, 72% were classified to a recommended program at their first facility placement.

This percentage is greater than would be expected, in light of the problems of the R&GC recommendations. But it is only this high because several program recommendations are frequently made for a single resident, ensuring assignment to at least one recommended program. For 331 cases, 718 program recommendations were made, while 391 program classification assignments were made. While 70% of the cases were recommended for more than one program only 21% received more than one program classification assignment at their first facility placement. (See Tables 1 and 3).

To be fair to R&GC, several programs may be recommended for individual residents because they need or can benefit from many types of programs. (See Table 1). In addition, program recommendations are sometimes based on what residents need and not on what programs are available at a particular facility. This is reasonable if the residents' needs are to be considered seriously. R&GC staff, knowing that not all programs are available at all facilities, may only recommend necessary programs with the hope that, eventually, a resident will be placed at a facility where the program is offered.

Although these factors explain why recommendations are made, they do not make the job of Program Classification Directors easier.

When R&GC recommendations for programs are inadequate or inappropriate, it is not possible for Classification Directors to follow R&GC recommendations, even though one policy requires them to do so (PD-DWA-11.01), and another strongly encourages consideration of the R&GC recommendations (PD-BCF-40.01).

Recommendation

R&GC should be provided with update information about programs at all facilities on a regular basis. This information should originate from the facilities and be distributed to all facilities. This is a responsibility of the facilities.

It is the responsibility of staff at R&GC who make program recommendations, to refer to the information about programs which is provided so that they are knowledgeable about the programs offered at individual facilities.

Though most Classification Directors reported that they receive enough information from the R&GC transcase form, additional information which would be useful are the following items:

1. More information about previous prison records, a synopsis of residents' past institutional behavior, and which institutions they had been placed at. (According to the security classification director at R&GC, this information is available and provided.)
2. Pending charges and indication of whether those charges were cleared or dropped. (This information cannot always be determined

by the time the resident is classified for programs.)

3. The present Transcase Form and checklist are appreciated but more commentary on the rationale for recommendations is desired.
4. If many program recommendations are made, they should be ranked by importance.

Documentation of Program Classification

Documentation related to program classification actions is frequently inadequate or missing from the client's institutional files. These specific problems were identified:

1. The Classification Review Form, or classification half-sheet, which is used to record program classification actions is not always included in the client files. When the form is missing, it cannot be determined if clients were classified to recommended programs.
2. The dates of program classification actions are sometimes missing. The result is that the amount of time between when programs were recommended and when residents are classified into programs, cannot be established.
3. The rationale for program classification decisions is not consistently documented, although a policy specifies that the rationale must be provided (PD-BCF-40.01). When justification for program classification decisions is not recorded, it is impossible to determine why clients are assigned to or excluded from certain programs and why R&GC recommendations were not followed. When

program classification assignments differed from the R&GC program recommendations, the records indicated the following reasons:

1. Program classification action was based on the request of the resident.
2. R&GC recommendations were not followed because the resident was placed in a psychiatric unit, segregation, on a medical status due to an injury or other physical condition, went to court, or refused to participate in the programs recommended. (Sometimes R&GC recommendations were not made for the same reasons.)
3. R&GC recommendations were in error. This could be the case for three reasons:
 - a. R&GC recommendations were made although the resident was not tested.
 - b. R&GC recommendations were not based on the test results which indicated the program needs.
 - c. Resident had completed the recommended programs.
4. Program classification assignments were in error. (One resident with an AGR of 5.4 was assigned to a college program.)
5. No program classification action was taken because there were no available openings in the programs.
6. Program classification actions were based on facility needs. (One resident assigned to routine work was asked, "where would

you like to work?" though his recommendations were for College and Auto Body.)

7. The facility did not offer the programs recommended by R&GC. (Two of those cases were assigned to a routine work assignment which was similar to a vocational program recommended. Also, college was recommended for residents who were placed at facilities where the program was not offered.)
4. Program completions or achievements of residents are not recorded consistently on the Classification Review Form. Some Classification Directors explained that information on residents' achievement, academically or vocationally in previous programs, is not always available. An examination of the Classification Review Forms or half-sheets verified this. In these cases, the resident is the only source of current information. Since program classification decisions are based on past program completions, this information is necessary at the time of program classification. Past program completions indicate that residents have individual strengths. Policy specifies that these strengths should be emphasized (PD-DWA-40.01).
5. Programs which are of interest to the resident, regardless of whether they exist, are not documented on program classification forms. Again, policy specifies that this information should be recorded (PD-BCF-40.01 and PD-DWA-40.01).

Recommendation

Classification Directors should contribute complete information to the residents' files, which will be helpful to staff at residents' future placements. This information should include rationale for decisions, dates of program classification actions, and program completions and achievements.

Assessing the Needs of the Resident

Assessment of resident needs, which includes activities like educational and vocational counseling and discussion of program needs and individual strengths are needed by Classification Directors before program classification. There is little evidence that activities to provide this information take place.

Only 18% of the residents who were interviewed reported that they had ever had educational and vocational counseling, and only 25% of the residents reported having discussions with staff about their program needs. Eighty-four percent of the residents interviewed said that staff had not discussed their strengths, although almost all of those residents cited strengths that they felt they had. One articulate resident stated that, prior to program classification, the staff who had contacted him were concerned only about the crime he had committed and his criminal history. PD-DWA-40.01 specifies that programs should emphasize individual strengths, rather than weaknesses or past failures. It also indicates that vocational counseling should be offered.

If residents are to be involved in their classification reviews, and be prepared to make wise decisions about program choices, they should know their

academic and vocational needs and strengths, and know them prior to program classification. This is not happening. Some Classification Directors report that academic/vocational counseling is offered at the school. If so, it occurs too late to be of value to the Classification Director. Other Classification Directors say that academic/vocational counseling is optional, although policy never indicates that it is an option.

Recommendation

Academic/vocational counseling should be offered prior to program classification at R&GC, or at the receiving facility. The recipients of this counseling should be all residents who will participate in programs. This would prepare them to responsibly choose programs which they need (Standard 4396 ACA). In addition, residents' abilities and strengths should be explored so that they are in a better position to further develop what abilities they have. The recognition of residents' assets would be a more positive approach when assessing residents' needs and desires.

Residents' Knowledge of Program Options Before Classification

In contrast to the weaknesses of needs assessment of residents, most facilities do provide residents with information about program options in an effective way. For a few facilities, this is accomplished by counselors, who interview the residents before program classification. For most institutions, knowledge of available programs is acquired at orientation, which is usually held within the residents' first week at the facility. Orientation is frequently conducted by the Classification Director, and at most facilities, it occurs prior to program classification.

Although policies do not specify that orientation must occur before the program classification process, it is desirable for residents to know of available programs before program classification, so that they are prepared to make meaningful selections of programs. Just as assessment of client needs is important, so is knowledge of available programs if residents' choices for programs are to be an important consideration at the time of program classification. Knowledgeable residents will be more prepared to participate in the classification review (Standard 4374 ACA Manual). For this reason, providing opportunities to learn of program options at the facilities contributes to the program classification process and must be viewed as a strength of the process. It appears that the Departmental orientation policy (PD-DWA-30.03) is being implemented.

Residents' Involvement in Program Classification

The residents' choices for programs are very important to Classification Directors. Most of them reported that it was counterproductive to place residents in programs and work assignments which they did not want, in spite of institutional need. Some Classification Directors even considered the clients' desires more important than R&GC recommendations if they were in conflict with those recommendations. About 60 of the cases examined documented a rationale for assigning programs which differed from the R&GC recommendation. Twenty-three of those cases indicated that the program assignment was the result of a resident request.

Perhaps this is why residents felt that their desires for programs were considered more in program classification than at the R&GC. It may also explain why residents agreed to program placements. Eighty-six percent of

the residents agreed to or requested their assigned programs. (80% of those residents thought that they would benefit from those programs.) This is very important, in light of Standard 4374 ACA, which stresses that the involvement of residents in their classification is essential. It is a strength of the program classification process.

TYPES OF CLASSIFICATION ASSIGNMENTS

Routine Work Assignments

Some Classification Directors report that there are not enough work assignments for all the residents who need or wish to work.

Judging from R&GC recommendations made in the sample of client institutional files, 137 (41%) of the cases are recommended for routine work assignments. 131 (40%) of all cases were classified for routine work assignments at their first facility placement. 96% of all cases recommended for routine work were assigned to it. Of those 131 cases, 70 were assigned to routine work when it was not a recommendation. This would indicate that routine work assignments are plentiful. Residents noted that their classification usually included a work assignment. According to residents, one such work assignment, the kitchen, was assigned often. As one resident succinctly commented, "When men refuse the kitchen, they go to the hole, and when they come out, they go to the kitchen."

Work assignments are frequently assigned because of institutional needs, rather than because of needs of clients, and residents will probably continue to be classified to work assignments as long as there are such institutional needs.

The frustration for Classification Directors and the residents they assign to work is that jobs which simultaneously satisfy institutional needs and residents' desires, and are likely to lead to productive work in the community are scarce. In some cases these goals are actually contradictory.

Academic and Vocational Assignments

An examination of the recommendations and assignments show that when an academic program is recommended, it is frequently assigned. Of 331 cases, 240 (73%) were recommended for an academic program. Of those 240 cases, 203 (85%) were classified to an academic program at their first facility placement. In fact, some cases were assigned to more than one academic program at their initial facility placement since more than one assignment is often made for each case. (See Table 2 and 4).

Vocational programs are assigned less frequently. Of 204 cases (62%) recommended for a vocational program, 50 (25%) were assigned one at the first facility placement. (See Table 2 and 4). Only two cases were assigned to more than one vocational program at their first facility placement. One explanation for the few cases classified to vocational assignments is the paucity of available vocational assignments at facilities. There are usually waiting lists for vocational programs at all facilities. In fact, the fifty cases classified includes cases placed on waiting lists for vocational programs.

While the academic programs of ABE and GED are offered at all facilities, the same vocational programs are not offered at the same facilities. This reduces the options for entry into the specified vocational program.

Perhaps another reason for few vocational assignments is the influence of educational Departmental policy which specifies a criteria of at least 6.0 grade level for entry into vocational programs. Classification Directors abiding by this policy would tend to place a higher priority on assigning academic programs to residents until the time they have completed remedial education. Some Classification Directors place a higher priority on residents' placement into any school program including the GED, than entry into a vocational program. Table 5 presents the type of initial program classification assignments made by facility for all 331 cases.

RELATIONSHIP BETWEEN R&GC RECOMMENDATIONS AND ASSIGNMENTS AT FIRST FACILITY

Matches

Though one case could be classified to more than one R&GC program recommendation, 238 cases (72%) were classified to at least one program that was recommended by R&GC. (See Table 6). These "matches" were examined to determine the type of assignment match. Seventy-one cases (21%) were classified for more than one program assignment, which was recommended by R&GC. Each of these cases is included in more than one type of assignment category. For example, if a case was recommended and classified to an academic and a routine work assignment, the case would be considered a double match and included in both the academic and routine work categories. (See Table 7).

Some cases matched R&GC recommendations more specifically than others. 79 cases (45%) assigned to an academic program were assigned to the exact program recommended by R&GC. 98 cases (55%) were classified to an academic program that was not the specific program recommended. These cases include

those classified at an SPSM facility where cases are classified to "school", a less specific classification assignment than the recommended program of "Remedial" or "GED". More specificity for program at the time of program classification, at the facility level, was the expectation, particularly since the same academic programs are offered across facilities. (See Table 8).

Of the 46 vocational matches, 19 cases (41%) were classified to the exact R&GC program recommendation. Twenty-seven (59%) were not classified to the specific vocational program recommended. For example, some cases were recommended for the Welding program, but classified for Vocational School or another vocational program. Perhaps less specificity occurs in classification assignments for vocational programs because the specific program recommended was not offered at the first facility placement, or the specific vocational program was offered, but had no available openings at the time of program classification.

Sixty-one cases (47%) were recommended and classified to routine work assignments. Routine work is frequently assigned in conjunction with another assignment. When cases were classified to more than one assignment, (71 cases), 55% were assigned to routine work for one of the assignments.

Cases Not Matching

93 cases (28%) were not classified to any assignment recommended by R&GC. 60 of the cases could have been matched to a program recommended which was offered at the first facility placement at the time they were classified. ("Actual" non-matches). (See Table 6).

The other 33 cases not matching are cases which could not have matched a program recommendation. They are cases which either had no R&GC recommendations, no program assignment, or the program was not offered at the first facility so another program was substituted. ("Technical" non-matches).

Cases which did not match were divided into two categories: (1) Cases for which programs recommended were not assigned (75%) and (2) Cases for which classification actions were assigned but not recommended (25%). (See Table 9).

One case can be included in more than one program category if it does not match in more than one action. For example, a case assigned to both a vocational and academic program, but recommended for routine work is included under the categories:

- (1) Cases recommended but not classified - Routine Work
- (2) Cases classified but not recommended - Academic
- (3) Cases classified but not recommended - Vocational

Most of the cases which did not match were included in the category of vocational programs. One-hundred and fifty-eight cases (98%) had at least one vocational program recommendation but were not assigned to any vocational program. Only four cases were assigned to vocational programs though they were not recommended by R&GC.

Sixty-three cases (71%) were recommended but not assigned to academic programs while 26 (29%) were classified to an academic program though they were not recommended for one.

Seventy cases (48%) were assigned to routine work though it was not recommended by R&GC. However, routine work was frequently recommended when it was not assigned. (76 cases).

Communication and Coordination in Program Classification

A general lack of communication and coordination is one of the most pervasive problems in the program classification system. Classification Directors related several communication problems which affected program classification:

1. Programs which are not offered at some facilities, or not offered at all, are recommended (See discussion of R&GC recommendations). This may indicate that R&GC staff are not familiar with programs offered at individual facilities, or programs deemed appropriate for residents are not offered at their first facility placements.
2. There is not sufficient exchange of information between program classification staff and those who write policies for program classification. New policies are implemented at facilities without discussion of interpretation or in-service training for implementation. This explains the comments of some program classification staff who reported that: (a) "Policies are not related to the actual reality of the institution," (b) "Policies conflict with each other," (c) "Lansing has a tendency to write policies for Jackson" (at the risk of being inappropriate for other facilities).

There is also no single manual which contains the information and policies relevant to program classification. Since these policies

and information are not all located in one place, it is difficult for Classification Directors to refer to them.

3. There is not sufficient exchange of information among program classification staff at different facilities. There are no meetings held where ideas and problems can be shared and discussed. Classification Directors make important decisions weekly, and could benefit from contact with other Classification Directors who may be confronted with similar problems. These decisions are also made without adequate direction from policy makers.

Some Classification Directors are frustrated with the lack of communication and resultant lack of continuity and relevance in the program classification area. The residents interviewed were generally cynical about the significance of any decisions made in program classification.

Recommendation

A format for sharing problems and ideas among Classification Directors does not yet exist. A periodic annual meeting of all program classification staff may be advantageous. Problems could be discussed and perhaps solved, and ideas could be exchanged. The program classification staff could make decisions which could improve the effectiveness of the process. Implementation of policies could be discussed in the presence of policy makers, who could offer interpretations of those policies.

A manual consisting of policies and other material which are related to program classification should be available to all program classification staff. It should be reviewed and updated as necessary (Standard 4373, ACA).

FACILITY - SPECIFIC FINDINGS

Northside Facility at SPSM

Northside Facility at the State Prison of Southern Michigan has a capacity of 1,000 men, but this facility does not have its own Classification Director. The Classification Directors at the Central Complex and Trusty Divisions alternately assume the duties of program classification at Northside, in addition to fulfilling their other assigned functions. Because there are two Classification Directors for three facilities, it might be assumed that men at Northside would wait longer before they went to program classification than residents at other facilities. On April 24, 1979, the men at Northside who had waited the longest period of time for program classification had been there since the last week of March and the first week of April, 3-4 weeks. This is not a longer waiting period than residents have at some other facilities. One of the Classification Directors reports that the amount of waiting time is due to the large population and turnover of that population, rather than actual delays in program classification. However, both Classification Directors admitted that they often feel "rushed" when conducting program classification, and one of the Classification Directors was interrupted frequently by other staff members while he was classifying men into programs.

On November 8, 1978, a memorandum from the two SPSM Classification Directors, sent to the Department of Civil Service, said that provisions for a full-time Classification Director at Northside had not been made for "budget purposes." The memorandum also said that each SPSM Classification Director was spending 20% of his time with program classification at Northside.

Recommendation

Northside is larger than most facilities. Directors who have other assigned functions, and who conduct program classifications for Central and Trusty Divisions, should not be required to conduct program classification at Northside. A Classification Director should be assigned to the Northside facility.

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Occasionally, decisions made by the Classification Directors have been overridden by Superintendents and Wardens. This has resulted in:

1. Residents' placement into programs before others who have waited their turn for the program and were promised the program,
2. Residents' expulsion from program for undocumented, or insufficient reasons, like a resident's past history;
3. Negative effect on the racial balance of programs.

PD-BCF-40.01 indicates that the authority of Classification Directors is final.

Recommendation

If Classification Directors' decisions are to be overridden, the reason should be specified in writing.

Cassidy Lake Technical School

Assignment to a facility because of reduced custody only is particularly upsetting to program classification staff at Cassidy Lake. 95% of all the

residents go to school. Because residents meet the requirements for reduced custody, they are sent to Cassidy Lake Technical School, regardless of their need for school. If they have already completed school, there are few programs available. There are no college courses or work-pass programs at Cassidy Lake Technical School, and the few work assignments available are assigned to residents who have completed all their programs at Cassidy Lake. This represents a conflict between required custody level and obtaining necessary programs for residents.

Conclusion

Recommendations made in this report have not been made for all the problems observed. In some cases, it is too early to identify solutions. Other problems are manifested in program classification, but are less problems of the process than peculiarities of a particular facility or the entire prison system - like overpopulation, which has widespread ramifications for all facilities and service delivery areas.

These types of problems will remain dilemmas for program classification staff and the residents they classify to programs.

A P P E N D I X

TABLE 1

NUMBER OF R&GC RECOMMENDATIONS PER CASE

| Recommendations | 0 | 1 | 2 | 3 | 4 | 5 | Total Number of Cases |
|-----------------|----|-----|-----|-----|----|----|-----------------------|
| Cases | 18 | 79 | 117 | 75 | 31 | 11 | 331 |
| Percent | 6% | 24% | 35% | 23% | 9% | 3% | 100% |

TABLE 2

RECOMMENDATIONS BY PROGRAM CATEGORY

| | <u>Academic</u> | | | | <u>Vocational</u> | | | | Routine Work | Total Program Recommendations |
|--------------------------------|-----------------|------|-------|-------|-------------------|-------|----------------|-------|--------------|-------------------------------|
| | Rem. | GED | Coll. | TOTAL | Auto Mech. | Weld. | Other Voc. Ed. | TOTAL | | |
| Number of R&GC Recommendations | 87 | 146 | 46 | 279 | 54 | 59 | 189 | 302 | 137 | 718 |
| Percent of Recommendations | 12.1 | 20.3 | 6.5 | 38.8 | 7.5 | 8.2 | 26.4 | 42.1 | 19.1 | 100 |

TABLE 3

NUMBER OF PROGRAM CLASSIFICATION ASSIGNMENTS PER CASE

| Assignments | 0 | 1 | 2 | 3 | Total Number of Cases |
|-------------|----|-----|-----|----|-----------------------|
| Cases | 19 | 241 | 62 | 9 | 331 |
| Percent | 6% | 73% | 19% | 2% | 100% |

TABLE 4

CLASSIFICATION ASSIGNMENTS BY PROGRAM CATEGORY AT FIRST FACILITY PLACEMENT

| | <u>Academic</u> | | | | | <u>Vocational</u> | | | | Routine Work | Total Program Assignments |
|--|-----------------|------|-------|--------|-------|-------------------|-------|---------------|------|-----------------|------------------------------|
| | Rem. | GED | Coll. | School | TOTAL | Auto Mech. | Weld. | Other Voc. | Ed. | TOTAL | |
| # of Prog. Class. Assignments | 20 | 60 | 17 | 111 | 208 | 6 | 10 | 36 | 52 | 131 | 391 |
| Percent of Prog. Class. Assignments | 5.1 | 15.4 | 4.3 | 28.4 | 53.2 | 1.5 | 2.6 | 9.2 | 13.3 | 33.5 | 100 |

TABLE 5

TYPE OF INITIAL PROGRAM CLASSIFICATION ASSIGNMENTS
FOR CASES BY FIRST FACILITY PLACEMENT

| First Facility Placement | Number of Cases Classified at First Facility Placement | Academic Programs | Vocational Programs | Routine Work Assignments | Total # of Assignments |
|--------------------------|--|-------------------|---------------------|--------------------------|------------------------|
| SPSM-Close | 68 | 32 | 0 | 32 | 64 |
| SPSM-Medium | 24 | 13 | 0 | 11 | 24 |
| SPSM-Minimum | 30 | 7 | 1 | 21 | 29 |
| MCF | 30 | 24 | 15 | 2 | 41 |
| MPC | 15 | 11 | 5 | 15 | 31 |
| Marquette | 1 | 1 | 0 | 0 | 1 |
| MR | 31 | 15 | 6 | 15 | 36 |
| RCF | 20 | 7 | 0 | 8 | 15 |
| CLTS | 19 | 16 | 6 | 1 | 23 |
| MTU | 49 | 44 | 10 | 4 | 58 |
| MDCF | 14 | 12 | 4 | 9 | 25 |
| HVWF | 30 | 21 | 3 | 13 | 37 |
| | | 203 (53%) | 50 (13%) | 131 (34%) | 384 (100%) |

TABLE 6
CASES CLASSIFIED TO FIRST FACILITY
WHICH MATCH AND DO NOT MATCH THE R&GC RECOMMENDATIONS

| First Facility Placement | Cases Matching | Cases Not Matching | Actual Non-Matches * | Technical Non-Matches * | Total Cases |
|--------------------------|----------------|--------------------|----------------------|-------------------------|-------------|
| SPSM-Close | 47 | 21 | 18 | 3 | 68 |
| SPSM-Medium | 15 | 9 | 4 | 5 | 24 |
| SPSM-Minimum | 17 | 13 | 8 | 5 | 30 |
| MCF | 25 | 5 | 3 | 2 | 30 |
| MPC | 14 | 1 | 0 | 1 | 15 |
| MBP | 0 | 1 | 1 | 0 | 1 |
| MR | 23 | 8 | 8 | 0 | 31 |
| RCF | 9 | 11 | 4 | 7 | 20 |
| CLTS | 18 | 1 | 0 | 1 | 19 |
| MTU | 47 | 2 | 1 | 1 | 49 |
| MDCF | 13 | 1 | 0 | 1 | 14 |
| HVWF | 10 | 20 | 13 | 7 | 30 |
| | 238 (72%) | 93 (28%) | 60 | 33 | 331 (100%) |

*Cases could not have matched because (1) the program was not offered at the facility. (2) The case had no R&GC recommendations. (3) The case had no program classification action.

"Actual" Non-Matches are cases which could have been matched to a recommended program offered at the first facility placement.

TABLE 7
RELATIONSHIP BETWEEN R&GC RECOMMENDATIONS
AND ASSIGNMENTS AT FIRST FACILITY PLACEMENT

| | | Academic | Vocational | Routine Work | TOTAL |
|----------|--------------------------------------|------------|------------|--------------|------------|
| MATCHING | Cases Recommended and Classified | 177 (66%) | 46 (22%) | 61 (29%) | 284 (42%) |
| | Cases Recommended but not Classified | 63 (24%) | 158 (76%) | 76 (37%) | 297 (43%) |
| | Cases Classified but not Recommended | 26 (10%) | 4 (2%) | 70 (34%) | 100 (15%) |
| | TOTAL | 266 (100%) | 208 (100%) | 207 (100%) | 681 (100%) |

TABLE 8
PROGRAM CLASSIFICATION ACTIONS MATCHING
THE SPECIFIC AND GENERAL PROGRAM
RECOMMENDED BY R&GC

| | Academic | Vocational | Routine Work | TOTAL |
|--|------------|------------|--------------|------------|
| Cases Classified to the Exact R&GC Program Recommendation | 79 (45%) | 19 (41%) | 61 (100%) | 159 (56%) |
| Cases Classified to the Program, but not the Specific One Recommended* | 98 (55%) | 27 (59%) | | 125 (44%) |
| TOTAL | 177 (100%) | 46 (100%) | 61 (100%) | 284 (100%) |

* Includes cases recommended for "Remedial" or "GED" and classified to the more general category of "School".

TABLE 9
PROGRAM CLASSIFICATION ACTIONS WHICH DO NOT
MATCH R&GC PROGRAM RECOMMENDATIONS

| | Academic | Vocational | Routine Work | TOTAL |
|---|-----------|------------|--------------|------------|
| Cases Recommended for Programs but not Assigned | 63 (71%) | 158 (98%) | 76 (52%) | 297 (75%) |
| Cases Classified to Programs which were not Recommended | 26 (29%) | 4 (2%) | 70 (48%) | 100 (25%) |
| TOTAL | 89 (100%) | 162 (100%) | 146 (100%) | 397 (100%) |

TABLE 10

TYPES OF RECOMMENDATIONS AND INITIAL PROGRAM CLASSIFICATION ASSIGNMENTS

| Program Classification Assignments | | | | | | | | | |
|--------------------------------------|----------------|--------------|---------------|--------------------|----------------------|---------------------|-----------------------------|--------------|---------------|
| Program Recommendations | Academic | Vocational | Routine Work | Acad. & Vocational | Acad. & Routine Work | Voc. & Routine Work | Acad., Voc., & Routine Work | No Assign. | TOTAL |
| Academic | 15* | 1 | 9 | | 3 | 1 | | 3 | 32(9.7%) |
| Vocational | 5 | 6* | 16 | 1 | 4 | 1 | 1 | 2 | 36(10.9%) |
| Routine Work | 7 | 1 | 17* | | | | | 1 | 26(7.9%) |
| Academic & Vocational | 49 | 1 | 16 | 22* | 8 | 3 | 2 | 7 | 108(32.6%) |
| Academic & Routine Work | 28 | | 13 | 1 | 8* | | | | 50(15.1%) |
| Vocational & Routine Work | 1 | 2 | 6 | | | | 1 | 1 | 11(3.3%) |
| Academic, Vocational, & Routine Work | 30 | 1 | 10 | 4 | 4 | | 1* | | 50(15.1%) |
| No Recommendation | 7 | | 4 | | 2 | | | 5* | 18(5.4%) |
| TOTAL | 142 (42.9%) | 12 (3.6%) | 91 (27.5%) | 28 (8.5%) | 29 (8.8%) | 5 (1.5%) | 5 (1.5%) | 19 (5.7%) | 331 (100%) |

* Indicates classification assignments which match program recommendations.