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	PROCEDURE				
			Approving	Quincy L. Booth	
			Authority	Interim Director	
	SUBJECT:RISK AND NENUMBER:4021.1A		EDS ASSESSMEN	Т	
	Attachments:	None			

# SUMMARY OF CHANGES:

Section	Change
	Minor Changes throughout the policy.

#### **APPROVED:**

D L Smith

<u>11/15/16</u>

Quincy L. Booth, Interim Director

Date Signed

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- PURPOSE AND SCOPE. To provide guidelines for use of the Northpointe Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk Screening and Needs Assessment software within the DC Department of Corrections (DOC).
- 2. **POLICY.** It is DOC policy to promote services that help inmates to identify goals and self-accountability for positive behavioral changes; thereby reducing recidivism and improving long-term public safety.

# 3. APPLICABILITY

This policy applies to staff, pretrial detainees and sentenced inmates who respectively conduct or receive screenings, assessments, case management, programming, and release preparation services within DOC facilities.

### 4. PROGRAM OBJECTIVES

DOC will use an automated risk and needs tool designed to assess criminogenic needs and risk of recidivism. The assessments can guide the agency in making informed decisions about treatment and services and assists case managers when coaching inmates to identify and develop their release case plan that maps a path to achieving positive changes.

5. NOTICE OF NON-DISCRIMINATION. In accordance with the DC Human Rights Act of 1977, as amended, DC Official Code § 2-1401.01 et seq., (Act) the District of Columbia does not discriminate on the basis of race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income, status as a victim of an intra-family offense, or place of residence or business. Sexual harassment is a form of sex discrimination which is also prohibited by the Act. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action.

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### 6. DIRECTIVES AFFECTED

#### a. Directives Rescinded

OM-14-002 Gender Responsive Risk and Needs Assessments (1/6/14)

### b. Directives Referenced

- 1) TRM 4090.4 Custody Classification Instruments
- 2) PP 4090.4 Custody Classification System
- 3) PP 4923.5 Reentry Program and Services
- 4) PP 6050.3 Residential Substance Abuse Treatment (RSAT)
- 5) PP 8010.1 Work Release Program

### 7. STANDARDS REFERENCED

American Correctional Association (ACA) 4th Edition Standards for Local Detention, Facilities: 4-ALDF-2A-31, 4-ALDF-2A-40, 4-ALDF-5A-05 through 4-ALDF-5A-08, and 4-ALDF-5B-13.

## 8. AUTHORITY

a. DC Code § 24-211.02, Powers; Promulgation of Rules

## 9. COMPAS SOFTWARE USE OVERVIEW

- a. The Northpointe COMPAS Suite is a web-based assessment and case management system used to make decisions about institutional and community services for inmates..
- b. The software calculates general recidivism risk; risk of committing violent crimes; basic criminogenic needs such as anger, criminal associates/peers, employment problems; as well as factors in the individual's strengths and support systems (such as positive associates, families, peers, and community resources and supports).

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- c. COMPAS then automatically calculates such scales asrisk inventory, positive supports, assessed needs and strengths and translates the findings into a narrative report. This information helps the case manager to:
  - Guide the inmate to make informed decisions about choices they have made and link them to critical interventions and services that will contribute to positive outcomes, and
  - 2) Monitor the inmate's progress on personal and treatment goals that he or she has set as well as for an important pre-release preparation guide.
- 10. **RISK AND NEEDS ASSESSMENT PROJECT TEAM.** The DOC Risk and Needs Assessment Project Team will consist of the following members:
  - a. *DOC COMPAS Web Administrator*. The Web Administrator creates and manages user accounts.
  - b. *Program Managers*. Designated Program Managers are assigned to administer the project, conduct training on use of the software; monitor staff compliance; provide quality assurance, and evaluate its effectiveness about the needs of DOC returning citizens.
  - c. *Case Managers and Clinicians*. Case Managers and Clinicians administer testing; help inmates to identify goals they want to achieve; and during the period of incarceration, help them connect with relevant community service providers.

## 11. COMPAS RISK SCREENINGS.

- a. During intake, Case Managers will conduct the COMPAS Risk Screening for all persons when committed to DOC.
- b. Procedures for conducting the Risk Screenings are as follows:
  - 1) CDF Intake Case Managers will complete and input data from the four (4) questions Risk Screening for each newly committed adult male.
  - 2) The CTF Intake Case Manager will complete and input data from the four (4) questions Risk Screening for each newly committed woman.
  - 3) The DOC Case Manager for juveniles will complete and input data from the thirteen (13) questions Risk Screening used for each newly committed juvenile.

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- 4) Occasionally when Case Managers conduct a COMPAS records search they may discover that a Risk Screening was not completed at Intake. The Case Manager must then pull appropriate documents and complete the Risk Screening prior to preparing any Needs Assessments as described in Sections 12-15 of this directive.
- 12. **NEEDS ASSESSMENTS TYPES.** The following needs assessments are used in DOC. Section 13 of this directive contains criteria for use of each tool.
  - a. The Men's Adult Core Risk/Basic Needs Assessments (74 items)
  - b. The Men's Full Core Assessment (132 items)
  - c. The Adult Women's Gender Responsive Needs Assessment (198 items)
  - d. The Women's Low Risk Needs Assessment (79 items)
  - e. The Youthful Offender Assessment (208 items)

**GROUPS SELECTED TO RECEIVE COMPAS NEEDS ASSESSMENTS AND CASE PLANS.** Needs Assessments and Case Plans will be prepared for inmates.

- a. Work Release
  - The Office of Community Corrections Programs (OCCP) will prepare halfway house packages for sentenced misdemeanants approved for work release; and
  - 2) Will request that the Chief Case Manager at the facility where the inmate is housed to ensure completion and submission of the COMPAS Needs Assessment and Case Plan.
  - The Case Manager will use the Men's Adult Core Risk/Basic Needs Assessment (74 items) for men who have been approved for Work Release.
  - 4) The Gender Responsive Needs Assessment (198 items) will be used for women who are approved for Work Release.

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- b. General Needs Assessments
  - <u>Sentenced misdemeanants who are not recommended for Work Release</u> will only receive a Needs Assessment and aCase Plan when <u>all</u> of the following conditions are met:
    - a. The inmate is sentenced to 60 or more days, and
    - b. Upon sentence computation the inmate has at least 45 days left to serve, and
    - c. The inmate's Risk Screening Score is *Medium* or *High*.
  - 2) Reentry Unit (Men). The 132-item Men's Full Core Needs Assessment shall be used.
  - 3) General Population and Department of Employment Services (DOES) Unit. The 74-item Men's Core Needs Assessment shall be used.
- c. Residential Substance Abuse Treatment Needs Assessments (RSAT)
  - 1) All female participants in RSAT will receive the 198-item- Adult Women's Gender Responsive Needs Assessment and a case plan.
  - 2) All male participants in RSAT will receive the 132-item Men's Full Core Needs Assessment and a case plan.
  - Because of the emphasis on treatment, RSAT clinicians may also opt to use additional assessment tools in COMPAS such as the TCU Criminal Thinking Questionnaire, and the University of Rhode Island Change Assessment (URICA).
- d. Juveniles. All newly committed juveniles will receive the Juvenile Risk Screening (13 items) and Needs Assessments (208 items) and a Case Plan that assigns institutional programming.

#### 13. OBJECTIVES FOR USING NEEDS ASSESSMENTS

a. *The COMPAS Needs Assessments*, blended with Case Manager's or Clinician's social services skills and experience, will be used to help identify

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the inmate's greatest criminogenic needs that may contribute to the individual's re-involvement in criminal activities.

- b. Needs Assessments help to:
  - 1) Create a picture of what is going on in the person's life;
  - 2) Provide the opportunity to help the individual connect the dots from the beginning of criminal involvement to the present, and
  - 3) Help the individual to figure out factors that may have contributed to the individual's behavior. Some of the factors are:
    - a) Criminal record,
    - b) Association with peers who have criminal records,
    - c) Criminal attitudes such as *what a person thinks, believes or values and their attitudes about the world and their place in it;*
    - d) Criminal personality such as *impulsiveness, domination, manipulation, lack of conscience;* and
    - e) Criminal opportunity such as thrill-seeking, lack of constructive activities, etc., and
    - f) Other Predictors may include:
      - 1) Substance use,
      - 2) Positive and negative influence of family and friends,
      - 3) Education/vocational/ economic history,
      - 4) Motivation and readiness to change, and
      - 5) Potential opportunities for a better future.
- c. The COMPAS Needs Assessment can be used to explain the factors identified in order to help the inmate:

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- 1) Identify key issues and behavior that have negatively impacted the individual's life,
- 2) Determine behavioral or life changes he or she may want to make,
- 3) Identify things that throw them off track,
- 4) Identify personal strengths and available resources that can be helpful in maintaining a realistic and successful plan of action, and
- 5) Ultimately assume responsibility for follow-through on the case plan.

# 14. CASE PLAN DEVELOPMENT

- a. COMPAS Case Planning is an interactive process used to guide inmates in identifying behavior that has resulted in incarceration and to help them to develop individualized and specific interventions during their incarceration and supports when released; thereby reducing recidivism.
- b. Depending on the individual's length of sentence the Case Plan may be for designation of institutional programming and/or the release plan.
- c. The Case Plan may include:
  - 1) *Goals.* During the interview the Case Manager will discuss basic needs identified in the needs assessment.
    - a) Based upon the identified needs, goals should be identified to tackle the areas that are most critical to the individual inmate's success (ex: housing, mental health care, financial support/employment, substance use).
    - b) Goals should be SMART (i.e., Specific, Measurable, Attainable, Realistic and Timely). They should be simple, written in the first person tense (i.e., "I will") and achievable in a relatively short period of time.
  - 2) Pre Release Planning
    - a) The Case Manager/Clinician will guide the offender to enroll in institutional treatment that may address some of the offender's criminogenic needs.

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- (1) COMPAS contains pre-populated institutional services to include in the institutional case plan.
- (2) The Case Manager may further add goals and tasks that are strictly designed to meet more personalized issues for the individual.
- b) The DOC COMPAS software contains an updated database of community partners to include in the inmate's release case plan.
- c) The Case Manager/Clinician will assist the inmate to identify and/or connect with community providers associated with continued treatment as well as to obtain basic necessities such as government issued identification cards, enrolling in a health care plan, and determining where the offender will live and work upon release.

#### 15. TRAINING

- a. *Software*. Designated staff is issued software user licenses when they have received the computer-based training on the application of the COMPAS assessment tools, software definitions and product usage.
- b. *Specialized Services*. Case Managers, Clinicians, Managers and Operations staff may also receive supplemental training based upon the population they are working with. Examples are:
  - 1) Working with Women Offenders
  - 2) Trauma-Informed Care
  - 3) Gender responsiveness
  - 4) Working with Juvenile Offenders
  - 5) Substance Use Education
  - 6) Substance Use Treatment
  - 7) Motivational Interviewing.

#### DOC/PP4021.1/11/15/16