

Community Corrections Task Force Colorado Commission on Criminal and Juvenile Justice

Minutes

February 13, 2014, 12:30PM-4:30PM
710 Kipling, 3rd floor conference room

ATTENDEES:

CHAIR

Theresa Cisneros, 4th Judicial District, District Court Judge

TASK FORCE MEMBERS

Brandon Shaffer, Parole Board

Dennis Berry, Mesa County Criminal Justice System

Glenn Tapia, Division of Criminal Justice (phone)

Greg Mauro, City and County of Denver

Gregg Kildow, Intervention Community Corrections Services

Jacqueline McCall, Department of Corrections

Joe Cannata, Voices of Victims

Walt Pesterfield, DOC Division of Adult Parole and Community Corrections

STAFF

Paul Herman, CCJJ consultant

Christine Adams, Division of Criminal Justice

Kim English, Division of Criminal Justice

Guest

Jim Davis, Department of Public Safety, Chair of CCJJ

Doug Wilson, State Public Defender, Vice-Chair of CCJJ

ABSENT

Alaurice Tafoya-Modi, Private Defense Attorney

Bill Gurule, 12th Judicial District, Probation

Christie Donner, Criminal Justice Reform Coalition

David Lipka, Public Defender

Eric Philp, Division of Probation Service

Harriet Hall, Jefferson Center for Mental Health

Kathryn Otten, Jefferson County Justice Services

Peter Weir, 1st Judicial District

Shannon Carst, Colorado Community Corrections Coalition

Stan Hilkey, Sheriff, Mesa County

Steve Reynolds, 9th Judicial District

Steve King, State Senator

Issue/Topic:	Discussion:
Welcome and Introductions	<p>Theresa Cisneros welcomed the group and previewed the agenda. Walt Pesterfield, Director of Parole, was introduced as the newest member of the task force and the group was asked to introduce themselves.</p> <p>Jim Davis announced that he and Doug Wilson, chair and vice-chair of the CCJJ, are hoping to attend more task force meetings to offer support.</p>

Issue/Topic:	Discussion:
<p>Community and Community Boards Work Group Report Back</p> <p>Action</p> <ol style="list-style-type: none"> Finalize work group membership at our next meeting. <ul style="list-style-type: none"> Present in April. Collect and Review Board membership across community corrections boards. <ul style="list-style-type: none"> This may include a review of current statutes and local ordinance/rules. Make recommendations for improvement if necessary. Present in April. Continue discussion on scope of work related to community corrections boards. <ul style="list-style-type: none"> Scope of work will be presented in April. Continue discussion related to board decision making. <ul style="list-style-type: none"> Scope of work will be presented in April. 	<p>Greg Mauro reported on behalf of David Lipka for the group. This work group was tasked with looking at the local boards within the system.</p> <p>We are hoping to formally articulate in writing a purpose statement.</p> <p>We are meeting once a month and current members include task force members Greg Mauro, Kathy Otten, David Lipka, and Harriett Hall. In addition, Frank Schoengarth has agreed to join our work group. A District Attorney representative from Weld County is not available to join our work group. Judge John Kuenhold is interested and will review his schedule. David Lipka is gathering information on an active deputy district attorney from the Western Slope who receives high marks for his involvement in COM COR issues. Other DA candidates will be discussed and vetted at the next meeting.</p> <p>Possible areas of focus include legislative review of community corrections generally, board composition, board scope, and board decision-making. Where is the community in community corrections? Looking at this concept to make sure the community is represented and engaged.</p> <p>Can you talk a little more about the “community” conversation? We didn’t go too deep into this at the work group meeting. But this has been discussed at the last two task force meetings.</p> <ul style="list-style-type: none"> Does our system reach out to non-agency individuals? Is there an opportunity to extend the involvement? We need to better define what we mean by community. Why is community corrections a good idea for some offenders? There is an issue of whether I’m representing a certain section of the community or am I there as a community member representing myself? <p>Does statute define exactly who has to be on each board? It used to be very specific but the law was changed to be less specific. However, many boards still have some key members.</p> <ul style="list-style-type: none"> Is it locally defined (by a local ordinance) if it’s not defined in statute anymore? Should there be recommendations if there are gaps? The Front Range

	<p>will probably have some similar structures but it may be different in more rural areas.</p> <ul style="list-style-type: none"> • Who are members employed by? The positions are usually voluntary appointments. Remember that each board is for a judicial district, not a county.
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Issue/Topic:	Discussion:
<p>Population Work Group Report Back</p> <p>NOTE: This group's focus has called for the removal of "continuum of care" from their title.</p> <p style="text-align: center;">Action</p> <ol style="list-style-type: none"> 1. Regroup and plan next meeting and get it on everyone's calendar. 2. Division of Criminal Justice (research staff): <ul style="list-style-type: none"> • Profile the low risk/high stakes and "super high risk" populations (profile of cases, number of cases). 3. Look at standards and determine necessary steps to get some flexibility. 4. Specifically define "super high risk" category. 5. Start looking at funding and the corresponding program models (e.g., making offenders find work immediately). 	<p>Glenn Tapia and Dennis Berry reported back for the Population work group. ***Two handouts were provided. One with 18 talking points and one with data reflecting the top four needs by risk categories for community corrections clients. These handouts are included at the end of these minutes.***</p> <p>We will meet monthly for now.</p> <p>Work group members include Steve Hagar, Eric Philp, Michelle Monzingo (from ComCor, Inc in Colorado Springs), Glenn Tapia and Dennis Berry. "Our purpose is to analyze how the Community Corrections continuum of care can address the particular needs of Low Risk/Low Needs and High Risk/High Needs outlier populations."</p> <p>Generally, low risk offenders need to be left alone. Need to get out of the way but still provide options to the courts.</p> <ul style="list-style-type: none"> • This is where the idea of ¾ houses may come into play. • Flexibility <p>There are others that may be too dangerous to admit to community corrections. We need to address resources, specifically distribution of funding for different types of programs, because it's more expensive to treat high risk offenders and we'll need specialized programs if we want providers to accept and help these individuals.</p> <ul style="list-style-type: none"> • Community corrections has been working toward getting programs to take more specialized populations. Such programs need to be more common around the state regarding participation without stretching them beyond their capability. This involves getting programs AND boards to accept these special high risk populations. <p>Dr. Fay Taxman, a known criminologist, told Glenn that substance use should be considered one of top 4 needs in the US even though the LSI research has not shown this (this research was based on the Canadian population where substance use doesn't come up as top 4).</p> <p>Dennis went over top four needs (see handout attached at end of minutes)</p> <ul style="list-style-type: none"> - Interestingly substance abuse was found to be the top need for all risk groups. <p>What we do is backwards though – we send offenders out to find jobs before dealing with their criminogenic needs.</p> <ul style="list-style-type: none"> • This is especially problematic for the highest risk group.

	<p>Generally the low risk offenders are coming pre-prison (diversion).</p> <ul style="list-style-type: none"> • We need a better understanding of the low risk/high stakes population (i.e., frequency, profile). • How many people are we talking about? • How much demand is there? • How many are sex offenders? <p>One thing that's been discussed elsewhere are repeat DUI offenders and the mandatory jail sentence. Some have suggested that Community Corrections might be a more appropriate placement to address the substance abuse issue.</p> <p>Remember, in this data handout low risk could include sex offenders. They often look low risk on the LSI but we use another tool for them.</p> <p>Are the issues on the handout (attached at end of minutes) a comprehensive list of issues to be addressed by this working? What else should be included? Are you aware of other groups working on any of this?</p> <ul style="list-style-type: none"> - Board decision making is implied in one item and is being addressed by one of the other working groups on this task force. - Same for the referral process. <ul style="list-style-type: none"> o There has been discussion about the possibility of the referral process being need based rather than time based. o Need to resource boards with options. - Are there any other groups (outside of this task force and the CCJJ) that are looking at any of these issues? <ul style="list-style-type: none"> o The Coalition is looking at resources. o The referral work group discussed a lack of knowledge about any given case which limits their ability to make good decisions. (item 10 on list). They will start looking at privacy concerns and relevant statutes. - Is the Governor's Advisory Council (GAC) or the state wide steering committee looking at the DCJ standards to make them more evidence based? <ul style="list-style-type: none"> o If you look at #2 is that what GAC is looking at? o The need to have evidence based standards is somewhat narrower than what is stated here. But that doesn't mean we can't address the same issues. o Also, if we want providers to focus on treatment first, rather than employment, we have to address funding issues. <p>Are LSI scores standard across the states?</p> <ul style="list-style-type: none"> • Probation and DOC use different cut points. • Community corrections uses same cut points as probation which are higher between medium and high than those used by DOC.
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<p>Issue/Topic: Referral Process Work Group Report Back</p> <p>Action</p>	<p>Discussion:</p> <p>Greg Mauro reported back for the Referral Process work group.</p> <p>We looked at four referral categories. We want to look at the statutory requirements.</p>
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<ol style="list-style-type: none"> 1. Review current statutes and current DOC ARs to look for opportunities for risk informed decision making. 2. Look at Mesa County for guide on how to structure diversion process. 3. Will still meet in March even though task force is not meeting. 4. What impediments are there for sharing information? <ul style="list-style-type: none"> • Statutory barriers, federal regulations, HIPPA, etc. How many of these are real limitations vs policy issues? ○ Get list of statutes and/or regulations that limit access to clinical information on sex offenders. ○ Start with the AG for legal opinion on this. Any state agency head can ask for legal opinion regarding what we can and can't do and what the impediments are. Since this is something that has come up multiple times we should go to the Commission and ask them to submit such a request. 5. Greg Kildow will explore risk driven decision making at the provider level. 	<ul style="list-style-type: none"> • Currently transition offenders are referred based on time. But is that the best process? • We're reviewing the system as it looks today but we also need to think about how we want it to look in the future. <p>Also discussed were possible referral differences for high and low risk offenders.</p> <p>Currently for transition offenders the first referral is mandatory by time. Subsequent referrals are based on case manager opinions. But offenders can waive their right to a referral.</p> <ul style="list-style-type: none"> • Would it be better to look at risk driven referrals? • Currently the referrals are from the case manager. Is this the right structure to generate a referral? Do they know enough about the case and what is available in the community? <p>C-TAP could have major implications on this process. We need to learn more about it though (see the next box in these minutes for more on C-TAP).</p> <p>Are we using an evidence based method regarding the court process for the diversion side?</p> <ul style="list-style-type: none"> • Typically community corrections is not the first step for a diversion client. They usually fail other options first. <p>Providers also have a decision to make regarding whether or not to accept an offender, are their decisions evidence based?</p> <ul style="list-style-type: none"> • Generally, no. They need to be evidence based rather than based on a gut feeling. <p>What about the decision made by the bench?</p> <ul style="list-style-type: none"> • Courts need more assessment information as well as information about each program and what it offers to help match needs a little better. • Work is being done to develop an early assessment. Working with the public defenders to help have more before the plea agreements without making the defense too uncomfortable. • Sometimes the judges don't know what's out there as far as services. Mesa County has found that there is a huge inconsistency as far as what's really available vs. what the district attorney, public defender and judge THINK is available. <p>Release of information is also a major issue. We don't share information that would help us make better decisions. This issue affects every step in the system.</p> <ul style="list-style-type: none"> • We need to see what statutory obstacles are out there.
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	<p>Also discussed was our own group membership to make sure we have the right people at the table. We're satisfied for now. The members include:</p> <ul style="list-style-type: none"> • Theresa Cisneros • Greg Kildow • Joe Cannata • Brad Kamby • John Draxler • Susan White • Jackie McCall • Ellen Walker <p>We plan to meet monthly for now.</p>
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Issue/Topic:	Discussion:
<p>Action</p> <ul style="list-style-type: none"> • At the April task force meeting: <ul style="list-style-type: none"> ○ Jackie McCall will present CTAP. ○ Alex Walker, from DCJ/Community Corrections, will present the progression matrix. 	<p>Jacki McCall stated that DOC has partnered with the University of Cincinnati to bring in the Ohio Risk Assessment System (ORS). This assessment and case management tool for the Colorado Department of Corrections is called the Comprehensive Transition Accountability Plan (CTAP).</p> <p>The program has been customized and has added in the LSI-R. The original plan was to have a three phases. We are in the process of training our staff. Prior to release from prison offenders will have a reentry tool to help with the first 90 days, until they're stable, when the LSI will be implemented to help with treatment.</p> <ul style="list-style-type: none"> • This will be implemented on June 1. • The automated system will start in April 2015. <p>For the first time ever the case plan will be built on a validated assessment and will address criminogenic needs. We are in the process of developing the training and are assessing what the needs are to best implement this. We've currently have 59 staff trained on this and are practicing the assessment process.</p> <p>What does this do to the community corrections case managers who have a whole regimen of things to do that may conflict with this case plan?</p> <ul style="list-style-type: none"> • Community corrections didn't know the plan would go that deep. <p>In addition to a more in depth presentation on C-TAP we also need to see presentation on the progression matrix being implemented by community corrections so we can see them side by side and be clear about how they will work together.</p>

Issue/Topic:	Discussion:
<p data-bbox="253 323 375 352">Work Plan</p> <p data-bbox="274 396 354 426">Action</p> <p data-bbox="94 464 509 638">***Specific actions are included in the minutes above, in the appropriate box for each work group. Other discussion is included here.</p>	<p data-bbox="976 254 1114 283">Discussion:</p> <ul style="list-style-type: none"> <li data-bbox="565 289 906 319">➤ What are the next steps? <li data-bbox="565 323 1027 352">➤ What do you need to do this work? <li data-bbox="565 357 1235 386">➤ What do you anticipate being able to report in April? <p data-bbox="565 430 1492 495">Population Work Group – discussion while planning next steps (listed in Action column above).</p> <ul style="list-style-type: none"> <li data-bbox="565 504 1511 569">• Need feedback from the task force on which of the topics listed here should be our area(s) of focus. <ul style="list-style-type: none"> <li data-bbox="659 573 1520 926">• Low risk/high stakes and super high risk offenders are the main targets. <ul style="list-style-type: none"> <li data-bbox="753 646 1520 926">▪ There is some concern that DOC might develop a plan to not refer the low risk offenders anymore. There was previous agreement that low risk offenders shouldn't be in community corrections anyway but there are some unique situations with the low risk/high stakes people that are primarily part of diversion. We need to be aware of what other groups are doing but regardless we'll need to figure out how to best manage this population. <li data-bbox="565 934 1430 963">• What exactly is the issue regarding resources? Need to clearly define. <li data-bbox="565 968 708 997">• ¾ house <li data-bbox="565 1001 813 1031">• Early assessment <li data-bbox="565 1035 1406 1064">• Program/board capacity and expertise to accept high risk offenders <li data-bbox="565 1068 919 1098">• Modify risk factor analysis <ul style="list-style-type: none"> <li data-bbox="659 1102 1308 1293">• Target population: <ul style="list-style-type: none"> <li data-bbox="753 1152 1308 1218">▪ Low risk/High stakes <ul style="list-style-type: none"> <li data-bbox="847 1190 1308 1218">• What do we do with these people? <li data-bbox="753 1222 1276 1293">▪ Super high risk <ul style="list-style-type: none"> <li data-bbox="847 1260 1276 1293">• What do we do with this group? <li data-bbox="565 1297 1235 1327">• There is a need for flexibility in the aforementioned areas. <p data-bbox="565 1365 1463 1430">Referral process work group – discussion while planning next steps (listed in Action column above).</p> <ul style="list-style-type: none"> <li data-bbox="565 1438 1503 1503">• We know that agencies have different cut points regarding risk levels. Does this difference matter? <ul style="list-style-type: none"> <li data-bbox="659 1507 1430 1575">○ It's only a 2 point difference between medium and high (DOC requires lower score to be considered high risk). <li data-bbox="659 1579 1495 1644">○ Colorado has used the LSI for many years but one thing that hasn't been studied is inter-rater reliability especially across agencies. <li data-bbox="565 1648 1446 1925">• Does anyone besides DOC use the CARAS? <ul style="list-style-type: none"> <li data-bbox="659 1686 1446 1751">○ Denver does. Mesa is working on a similar tool. But getting the information is difficult. <li data-bbox="659 1755 1398 1925">○ CARAS is used on the back end, LSI is used on the frontend (diversion). <ul style="list-style-type: none"> <li data-bbox="753 1829 1390 1894">▪ The LSI was developed many years ago to be used throughout the system. <li data-bbox="753 1898 1492 1925">▪ The CARAS was statutorily mandated to be created for the

	<p>parole board. But the CARAS doesn't look at needs. It looks at likelihood to commit a new crime. It's only a risk assessment. It's not a needs assessment.</p> <ul style="list-style-type: none"> ○ Why not use the CARAS from the beginning? <ul style="list-style-type: none"> ▪ Because it includes the offender's behavior while incarcerated. ▪ It's not used by Probation because it's built on a release from prison population.
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Meeting was adjourned at 3:23pm.

Meeting Schedule and Location for 2014

*Thursday, Mar. 13 th	12:30pm-4:30pm	CANCELED, work groups can still meet in room at normal <u>task force time</u>, if desired.
Thursday, April 10 th	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
Thursday, May 8 th	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
Thursday, June 12 th	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
**Thursday, July 10 th	12:30pm-4:30pm	JAC, <u>2nd floor</u> conference room (Remington building on Hwy 6 frontage road)
***Thursday, August 7	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
Thursday, Sept. 11	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
Thursday, Oct. 14	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
Thursday, Nov. 13	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room
Thursday, Dec. 11	12:30pm-4:30pm	710 Kipling St., 3rd floor conference room

Unless noted below, work groups can meet at the same location as the task force, from 10am-12pm, on the same day.

*The 3rd floor conference room is NOT available the morning of March 13 for the work groups. But since the task force meeting has been cancelled the work groups are free to meet in the afternoon at the normal time and location.

**In July, both the work groups and task force will meet at the JAC.

***In August, work groups will be able to meet at the Jefferson County Court House (100 Jefferson County Pkwy, Golden) in the Ken Caryl, Bergen Park, and Evergreen rooms (all connected). When you walk into the court house you will go left just past the Starbucks and down the hall. The room names will be posted. You will not have to go through security.

NOTE: The August meeting is NOT the second Thursday but is the Thursday before the CCJJ meeting.

HANDOUT #1 from Population Work Group

Meeting Notes from CCTF Population Workgroup

2/6/14

Below are some issues that need to be addressed in order to design an infrastructure where low risk/high stakes offenders and very high risk (but community-appropriate) offenders can be placed and effectively managed in community corrections system. The following issues will need attention in order to move further into this concept area:

- 1) The infrastructure needs to be designed in order to get out of the way of low risk offenders and then appropriately address the risks and needs of very high risk (but community-appropriate) offenders
- 2) The Colorado Community Corrections Standards (CCCS) at the Division of Criminal Justice (DCJ) need to be changed to allow flexibility within a program to provide appropriate and effective supervision and treatment of low risk, medium risk, high risk and very high risk offenders. One-size-fits-all standards won't be effective in this regard.
- 3) Providers need to be financially resourced in order to incentivize more placements of higher risk offenders.
- 4) Funding for providers needs to be appropriate for and targeted for addressing the Top 4 criminogenic needs prior to community access for employment and leisure/recreation privileges.
- 5) There might be an opportunity to develop a "specialized program" for very high risk offenders that includes a differential per diem, appropriate standards, and access to services to address the Top 4 criminogenic needs.
- 6) There needs to be an effective distribution of specialized programs throughout the State to address local-level sentencing and placement needs. However, not all providers are currently equipped to handle even higher risk offenders without some advancement of their correctional practices.
- 7) The DCJ should develop an evaluation tool that is an evolution of the current Risk Factor Analysis. This tool should assess a program's adherence to evidence-based principles and practices or should otherwise adequately assess program quality and strength to accept a special contract for very high risk offenders.
- 8) Community corrections boards should be resourced and incentivized to accept higher risk offenders. Resources may include a structured decision making process that sorts risk levels of offenders, need profiles, and appropriateness for community placement.
- 9) Local jurisdictions should be incentivized, through access to a specialized program, to accept higher risk offenders and low risk/high stakes cases.
- 10) Board members need education to make appropriate placement decisions
- 11) According to Dr. Faye Taxman, substance use in the US population should be considered a Top 4 criminogenic need – both for the reasons of prevalence data and general US policy related to the linkage between substance use and criminality. Recent CCIB data analysis shows substance used to be a priority need in community corrections and supports Dr. Taxman's recommendation.
- 12) Local jurisdictions need a continuum of services for low risk offenders (such as a 3 / 4 house model) where they aren't placed with high risk or medium risk offenders but are rather supervised on an intensive but non-residential status. Offenders in this category should have more latitude to engage in the community while still being appropriately supervised at a level between non-residential and residential status.
- 13) The probation model for the Assessment Summary Report in the PSIR should be accessible for boards and providers to use in order to make effective and informed risk-based acceptance and placement decisions.

- 14) We need some data related to the demand of these types of offenders in each jurisdiction. It may be plausible for the Judicial Branch to provide some filing/conviction data on certain crime types to estimate a global demand for these types of placements.
- 15) The group needs to identify any statutory barriers to this concept.
- 16) In the absence of any explicit statutory barriers, the CCTF should consider the degree to which legislation is needed to further this concept - or if it can be effectively achieved through policy and funding changes.
- 17) The group needs to consider any impacts at the plea-stage where risk assessment or decision making structure might be necessary.
- 18) The group needs to address the fact that community-based treatment providers need substantial education and competency about the risk/needs/responsivity (RNR) framework. There needs to be some formalization to require demonstrated competency in RNR among treatment staff who will be addressing criminal thinking and other priority needs among very high risk offenders and low risk/high stakes offenders. It will be necessary to have contractual requirements that place requirements on treatment providers that they have demonstrated RNR competency for any specialized programming in this regard. Simple CAC certification or professional licensure is not enough for the current population nor for higher risk offenders.

Top Four Needs by Risk Category

The following tables represent data for residential Community Corrections clients terminated in FY2011 and 2012, only. Data was created by the Division of Criminal Justice, Office of Research and Statistics with data obtained from the Office of Community Corrections (2013).

Table 1. Percent (%) of each risk category that need each treatment type.

		Risk Category (LSI Score)		
		Low (1-18)	Medium (19-28)	High (29-54)
Needs	Employment	51.8	52.6	54.4
	Financial	48.6	40.7	30.1
	Family/Marital	26.1	22.2	21.6
	Accommodation	7.7	8.2	9.1
	Leisure/Recreation	41.0	39.2	32.0
	Companion	38.7	42.2	39.9
	Substance Abuse	55.5	75.7	84.4
	Emotional/Personal	26.0	20.7	28.7
	Attitude/Orientation	44.5	49.1	52.7

*The top four needs for each risk category are highlighted.

- Substance abuse was the #1 need for all risk categories.
- Employment was the #2 need for all risk categories.
- Attitude/Orientation and Companion were the #3 and #4 needs, respectively, for the medium and high risk groups.
- Only the low risk group had Financial needs in the top four (#3) followed by Attitude/Orientation.

Table 2. Percent (%) of those with "super high" risk scores in need of each treatment type

		Super High (LSI of 36-54)
Needs	Employment	54.4
	Financial	26.1
	Family/Marital	19.1
	Accommodation	9.5
	Leisure/Recreation	28.1
	Companion	36.5
	Substance Abuse	85.5
	Emotional/Personal	36.5
	Attitude/Orientation	54.2

*Super high is defined as having an LSI score of 36 or more. Note that these individuals were included in the "high" risk category in Table 1.

- No major differences were found when the "super high" risk group was separated.
 - Substance abuse was still the #1 need followed by Employment (#2), and Attitude/Orientation (#3).
 - Companion and Emotional needs were tied for #4.