

National Institute of Corrections Technical Assistance Report

Colorado Department of Corrections

NIC TA No. 13C1052 Final Report



U.S. Department of Justice
National Institute of Corrections

Washington, DC 20534

DISCLAIMER

RE: NIC Technical Assistance No. 13C1052

This technical assistance activity was funded by the Community Corrections Division of the National Institute of Corrections. The Institute is a Federal agency established to provide assistance to strengthen state and local correctional agencies by creating more effective, humane, safe and just correctional services.

The resource persons who provided the on site technical assistance did so through a cooperative agreement, at the request of the Colorado Department of Corrections, and through the coordination of the National Institute of Corrections. The direct onsite assistance and the subsequent report are intended to assist the agency in addressing issues outlined in the original request and in efforts to enhance the effectiveness of the agency.

The contents of this document reflect the views of the authors. The contents do not necessarily reflect the official views or policies of the National Institute of Corrections.

SECTION I: BACKGROUND & REQUEST FOR TECHNICAL ASSISTANCE

During May of 2013, officials at the Colorado Department of Corrections (CDOC) contacted Jim Cosby, Chief, Community Services Division, and requested technical assistance from NIC regarding a variety of issues. These issues included a desire to examine organizational policies and offender management practices, and to assist CDOC in improving their operational approach to these matters. After the request was initiated, CDOC selected Roger Werholtz as its Interim Executive Director. Director Werholtz was supportive of the request for technical assistance, and conversations then occurred between Mr. Cosby, Mr. Werholtz and Madeline (“Mimi”) Carter regarding the nature of this potential assistance. Ms. Carter was ultimately asked to serve as the lead technical assistance provider for this effort, and she subsequently asked Ms. Peggy McGarry, Mr. Richard Stroker and Dr. Matthew DeMichele to join her in providing the requested assistance.

It was determined that the technical assistance would be provided in three phases. First, Dr. DeMichele would engage in an analysis of current CDOC policies and practices regarding the use of electronic monitoring technology and offer suggestions regarding CDOC’s practices in this area. Secondly, Ms. Carter, Ms. McGarry and Mr. Stroker would engage key CDOC managers in a “system mapping” exercise that would help to identify critical decision points in the offender management process and then attempt to develop consensus amongst these managers regarding those topics that may be in need of further attention. Finally, technical assistance would be offered to CDOC that could assist the organization in making specific improvements in their offender management practices in the areas identified through the technical assistance effort.

This technical assistance report involves the “system mapping” exercise that was conducted, the identification of “priority areas” within the system, and the provision of follow-up technical assistance regarding these priority areas. A separate report will document the work conducted by Dr. DeMichele related to electronic technologies.

reviewed by the entire group and a system-wide map was constructed. Ultimately, the group reviewed, critiqued, and accepted the contents of the system map. The following major components of the offender management system were identified and discussed:

1. Time and release
2. Assessment, classification, intake
3. Central classification, institutional case management
4. Prisons- facility management, pre-release, programming, clinical care, reclassification, transitional services, pre-parole
5. Pre-release, community corrections referred process, community reentry
6. Community supervision, programs, ISPI
 - a. Regression
7. Parole board, condition setting and discretionary release, MRD
8. Parole supervision
9. Community programming
10. Revocation
11. Discharge
 - a. From institution
 - b. From Parole

Key decision points within each of these broad areas were identified and discussed as the system map was developed.

Next, the overall objectives of the offender management system were discussed. The following goals of the system were identified and accepted by the group:

Departmental Goals

1. Return offender to the community able to be successful
2. Create an external environment that makes change possible, change that we know is needed.

Finally, the group collectively determined those areas that should be prioritized for receiving attention or assistance in the near future. These areas are:

Priority Target Areas

1. Assessment process (following DOC intake)
2. Development of the case plan/ case manager discretion
3. Institutional program referrals
4. Pre-parole planning
5. Release decision making
6. Release planning
7. Eligibility criteria for release on ISPI
8. CPO discretion as it relates to ISP (and E.M.)

SECTION III: PHASE II Technical Assistance Regarding Priority Areas

Introduction

After the completion of Phase I of this technical assistance effort, it was determined that Mr. Stroker would conduct the second on-site visit. Mr. Stroker coordinated this visit with Ms. Carter, Mr. Cosby, and Mr. Werholtz. Prior to the visit, Mr. Stroker reviewed a variety of CDOC policies and regulations and the system map that had been produced as a result of the Phase I site visit.

The purposes of the Phase II technical assistance visit were to:

- Review the system map that was developed as part of the Phase I site visit
- Conduct focus groups with line staff to gain their insights and input regarding the system map
- Explore priority areas developed through the system mapping work and develop an action plan regarding future work on these topics, and
- Review existing strategic planning, “lean projects,” and other actions underway, and integrate future work on priority topics with existing planning efforts and work group activities.

Site Visit Overview

Line Staff Focus Groups

On July 11 and 12, 2013, Mr. Stroker conducted eight focus groups with staff that are primarily front line staff or first line supervisors. Each focus group had 10 or more participants, and each group was devoted to a particular area of the system map. A list of focus group participants is appended to this report.

Focus groups were devoted to the following topics:

- Diagnostic and intake
- Initial classification and institutional assignment
- Institutional case planning
- Institutional programming
- Prerelease planning and reentry
- Release decision making
- Parole and ISP supervision (2 groups)

- Mark Gardunio
- Mary Carlson
- Paul Hollenbeck
- Travis Trani
- Mike Miles
- Todd Helvig
- Mary Donohue

The system map review resulted in a few minor revisions to the flow chart that had been developed. The system map has subsequently been finalized and is appended to this report.

As noted above, the earlier system mapping meeting led to the identification of nine priority areas. These priority areas were thoroughly discussed during the focus group meetings and during the day-long meeting with CDOC leaders and managers on July 22, 2013.

A review of the work activities, actions and decisions that are contained within the system map led to a broad discussion about a variety of critical work topics. Issues within each critical area were explored during the meeting. At the conclusion of the discussion it was determined that the following twelve areas would benefit from further exploration or effort at this time. Among these twelve areas, five were determined by the group to have the greatest priority for attention at this time.

Top 5 Issues

- Explore opportunities to identify significant offender criminogenic needs at intake, and develop a meaningful needs “summary” that can be used to inform an individualized case plan.
- Develop a single case plan for each inmate and utilize this case plan to inform institutional placements/transfers, institutional programming placements, the imposition of parole conditions, and parole supervision.
- Identify opportunities to generally reduce the number of institutional moves that occur for each inmate during their period of incarceration.
- Expand available institutional programs, review programs to determine their value and whether they are operated with consistency; expand the pre-release program to allow more inmates to participate in this program.
- Review existing community treatment, program and service options, and explore opportunities to expand these opportunities for parolees.

case manager, a programmer, clinical staff, Offender Services, and a parole officer. A charter should be developed for this group by CDOC Executive Managers.

2. The issue of developing and effectively utilizing a single case plan for each offender is the focus of an existing group known as "CTAP" (Colorado transition accountability plan). Information from the system mapping meeting will be shared with CTAP team members to assist them with moving forward with their work.
3. To reduce the number of institutional moves for inmates, a new group would be formed. This group would be chaired by Mark Flowers and Kellie Wasko, and group members would include Paul Hollenbeck, Steve Hager, and representatives from Offender Services and Clinical Services.
4. To examine existing institutional programming, it was noted that an existing work group is focused on this area. It was determined that Mark Flowers and Kellie Wasko should be added to this group, and should provide the group with the information discussed during the system mapping meeting. This information includes the desire to:
 - a. Expand available programs that have value for CDOC
 - b. Encourage greater consistency in program operations
 - c. Expand the pre-release program so that more inmates may participate, and
 - d. Encourage continuity in institutional programming.
5. An existing work group is focused on available community options, and is also exploring ways to promote or increase the use of evidence-based practices. It was determined that this work group should have the following personnel added to it: Heather Salazar, Kelley Messamore, Renee Jordan. Information from the system mapping meeting should be shared with this work group.
6. Finally, the group discussed opportunities to reduce the amount of time that staff are engaged in certain activities. Specifically, it was noted that the following actions could be taken to allow staff to have more time to perform critical daily work responsibilities:
 - a. Eliminate/consolidate/terminate some number of existing work groups. The number of groups currently working on issues is extraordinary and the time spent by staff on these work groups keeps individuals from having time to work on other important duties. It was suggested that CDOC Executive Managers or some other designated group should be given the authority to review the status of all groups, prioritize them, and determine which groups could be "retired," combined, or otherwise eliminated. The twelve issues identified during this meeting could be used to help create a hierarchy of critical work issues.
 - b. Current required and optional training topics should be reviewed by CDOC Executive Managers to determine which training efforts/requirements could be reduced, revised, or made more relevant for participating staff.
 - c. Some specific work duties for front line staff could be eliminated or reduced. It was suggested that each Executive Manager should review work activities of key staff,

3. *Reduce institutional moves of inmates.*

Efforts should be made to reduce the number of institutional moves that occur. It appears that oftentimes inmates are moved in order to maximize existing bed spaces. Offender programming needs, their status in programs, proximity to program completion or parole eligibility, need for pre-release services, etc., does not appear to play a very significant role in institutional movement decisions. Reducing these institutional moves may positively impact program placements, the ability to engage in effective case management work, and an opportunity for parole board members to receive case information further in advance of hearings.

4. *Expand available institutional programs.*

Institutional programming should be examined and, if possible and appropriate, expanded. A review of existing programs (to determine the nature, value, and operation of programs) is currently underway. Findings from that work should help inform CDOC leaders regarding the need to develop, expand, improve, or promote consistency amongst institutional programs. When inmates are denied parole, community corrections placements, or returned from supervision for violations, efforts could be made to link the reasons for denial/failure to programming so that relevant issues could be addressed.

5. *Expand available community services, programs and options.*

Opportunities to expand community services and programs that are available to parolees should be considered. There is a great demand for community services and programs for parolees, and opportunities to expand programs or promote placements should be considered. It is also suggested that efforts be made to tailor the conditions imposed on parolees so that only those community programs most needed/required by parolees are placed as conditions.

6. *Provide staff with more guidance regarding the use of discretion.*

In a number of critical areas, considerable discretion is granted to line staff (case managers, parole officers, etc.) to make a variety of offender management decisions. These decisions (such as program placements or decisions regarding placement on ISP) appear to be made without much policy guidance. In order to make the best use of staff time, program availability and existing resources, it is suggested that some effort be made to provide additional policy guidance to line staff so that the most "appropriate" offenders (from both a policy and evidence-based practice perspective) are matched with the most necessary programs or services.

7. *Review the imposition and decision making regarding ISP/EM.*

A separate report is being developed regarding the Intensive Supervision Program (ISP), the use of electronic monitoring (EM) equipment, and responses to ISP and EM violations. It appears that the parole board imposes a condition in the vast majority (perhaps over 90% of cases) that states: "ISP, at the discretion of the parole officer." In this area, it is recommended that the parole board develop criteria for imposing this condition, that parole officers be given additional policy guidance to help determine which parolees are most appropriate for this sanction, and that CDOC consider the purposes and goals

SECTION IV: FUTURE TECHNICAL ASSISTANCE OPPORTUNITIES

Should NIC and CDOC agree that future assistance is appropriate and necessary, the following areas of work might be considered:

- 1. Effectively gathering and utilizing offender needs information and incorporating this information into a single case plan that follows the offender through the CDOC system.***
CDOC is just finishing an update of its male classification system (with assistance from Dr. James Austin), but that work is not likely to assist in determining the best ways to gather critical criminogenic need factors, or to determine how best to use that information to support development of an offender case plan. Development of a single case plan could incorporate existing treatment plans (mental health and medical treatment plans), could be used to inform parole condition setting, and assist with parole supervision case management priorities. CDOC leaders indicated that they wanted to move forward with the idea of a single case plan, but they may require some assistance in determining how best to effectively utilize risk/needs assessment information, and build a case management model.
- 2. Appropriately “matching” offenders to available and appropriate institutional programs.***
At present, case managers make decisions about which offenders to place in institutional programs. Policies, regulations, priorities, and criteria could be developed to assist case managers with making decisions and placements. Assistance could be provided to assist CDOC with the development of criteria, supporting policies, etc.
- 3. Parole board condition setting.***
Assistance could be provided to the parole board to aid them in identifying and selecting the most appropriate special conditions to impose in specific types of cases, and to reduce the number of standard conditions that are imposed in all cases.
- 4. Improving the effectiveness of EM/ISP.***
Assistance could be provided to aid the parole board and parole supervision staff in deciding the goals and purposes of ISP and EM, help establish criteria or policy expectations regarding the value or need of using these conditions, determining when ISP could be imposed without EM, and developing more effective responses to ISP and EM violations.
- 5. Continuing to improve the use of EBP in parole supervision.***
Field staff could use assistance regarding the appropriate use of risk/needs assessment information, creating effective case plans, effectively interacting with parolees to resolve problems, responding to violations using the new CVDMP tool, and the effective use of incentives. Creating additional intermediate sanctions that could be used by field staff could be another part of this topic.
- 6. Reducing/eliminating work groups, training requirements, and non-critical job tasks.***
Moving towards an evidence-based practices approach to offender management requires staff to have adequate time to work effectively with inmates and parolees. A time study is being conducted (by the National Center for State Courts) to help identify how parole officers spend their time. A similar effort could be undertaken regarding case

APPENDIX

- **July 11-12, 2013 Focus Group Participants**
- **Colorado Department of Corrections System Map**
- **System Mapping Findings and Observations (PowerPoint Presentation)**

Friday, July 12, 2013

8:30 a.m. – 11:00 a.m. Group 5, Pre-Release Planning and Re-entry

Rebecca Volz, Pre-release Spec.	Liz Mestas, GP V – Clinical HQ
Christine Richard, Comm Re-entry Spec.	Morrisa Robertson, Comm Re-entry Spec.
Michelle Fleckenstein, Comm Referral Spec.	Patrice Baldwin, HP VII – Clinical HQ
Greg Thompson, Comm Parole Officer	Amy Cook, CM I – DWCF
Charles Fosnot, DRDC Programmer	Heather Carter, Tech IV – Time Comp

10:15 a.m. – 11:45 a.m. Group #6 Release Decision Making (ComCor, ISP-I, Parole, MRD)

Carlo Ochs, Parole Supervisor	Sara Phelps, Team Leader
Deb Brunner, Comm Parole Officer (Den)	Debbie Ross, GP III - CTCF
Amberly Chalbert, GP III - Denver	John Mills, AA III - Denver
Heather Carter, Tech IV – Time Comp	Amanda Roatch, CM I - DWCF
Brandon Shaffer – Parole Board (phone)	Rebecca Oakes – Parole Board
John O'Dell – Parole Board	

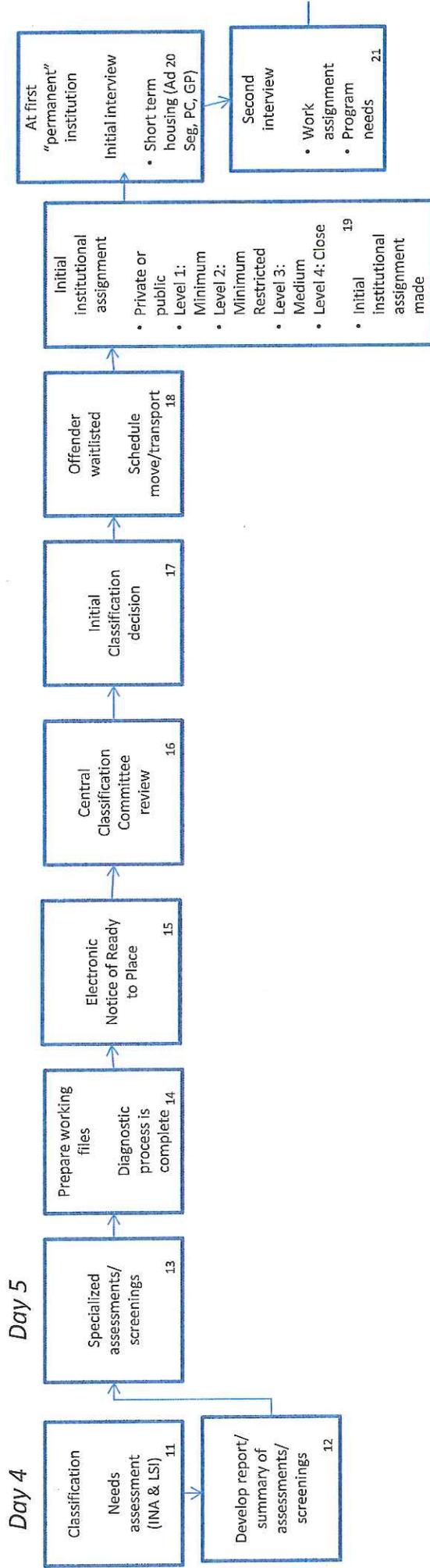
1:00 p.m. – 2:30 p.m. Group #7, Parole & ISP Supervision

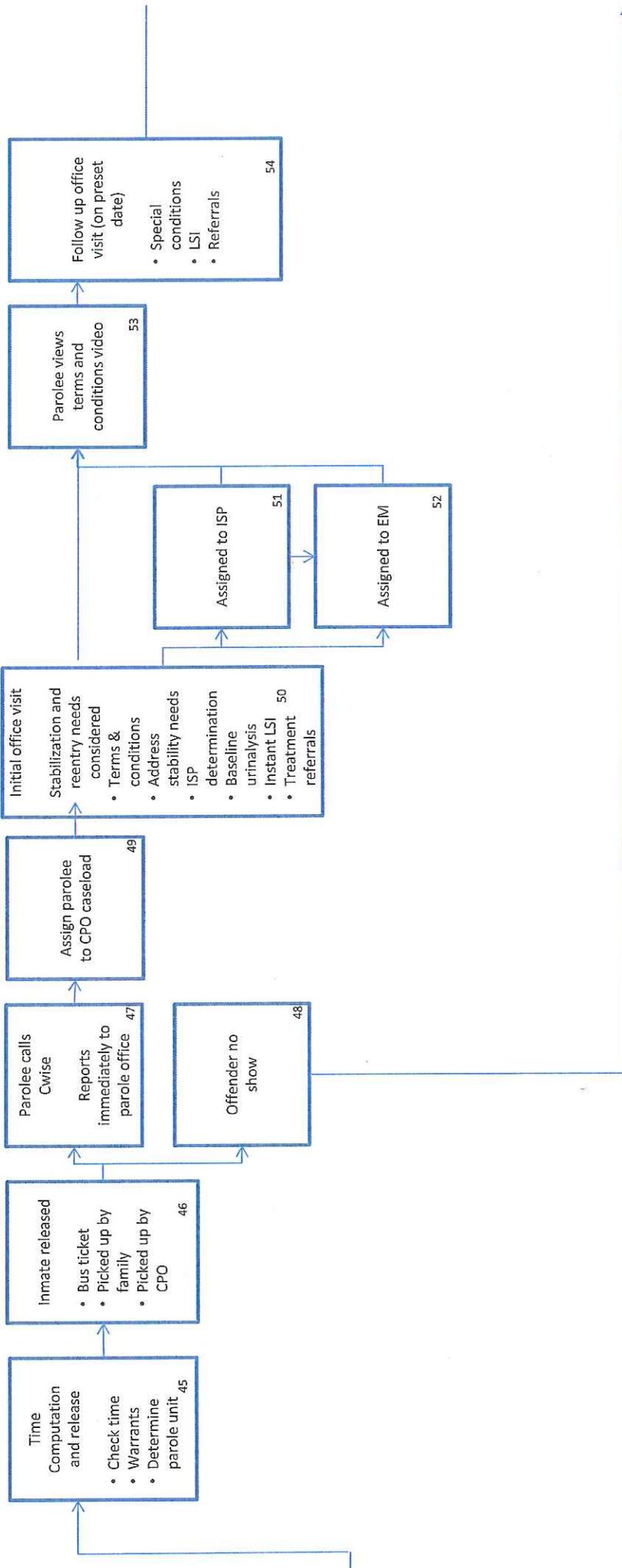
Ryan Burch, Comm Parole Officer	Megan Zimmerman, Comm Parole Officer
Jennelyse Brunsting, Comm Parole Officer	Amy Reyes, Comm. Parole Officer
Brian Bettger, Comm. Parole Officer	Ryan Coryell, Comm. Parole Officer
Deb Duran, Parole Mgr.	John Gomez, Comm. Parole Officer
Jeff French, Parole Supervisor	George Klebak, Team Leader

2:45 p.m. – 4:15 p.m. Group #8, Parole and ISP Supervision

Libby Hicks, Comm Parole Officer	Bob Hudspeth, Comm Parole Officer
Amber Creech, Comm Parole Officer	Anita Archuleta, Comm Parole Officer
Aaron White, Comm Parole Officer	Dana Bassnett, Comm Parole Officer
Joe White, Parole Mgr.	Matt Goldberg, Parole Supervisor

Colorado Department of Corrections System Map





COLORADO DEPARTMENT OF CORRECTIONS: System Mapping

July 15, 2013
Richard P. Stroker

Overview of the day

- ▶ I. Review of the system map
- ▶ II. Discuss identified "priority areas" and decision points within the system map
- ▶ III. Review "priorities" amongst issues
- ▶ III. Reflections on activities already underway
- ▶ V. Integrating priority items with existing work
- ▶ VI. Reviewing implementation plans and next steps

Overview

---Goal for the day: Leave with a clear idea of the four or five things you need to do organizationally to better reach your objectives; create some steps for helping you move forward

- ▶ In general:
 - The agency is in a "transition" time – trying to move in new directions
 - Tremendous number of changes underway
 - Trying to make changes using existing resources

• "All generalizations are wrong, including this one."
Mark Twain

Looking Ahead

- ▶ Future work may need to be focused on how to harmonize or integrate new goals or requirements with existing duties and expectations
 - And not just "layering" new duties on staff
- ▶ Changes that are moving forward will require leaders to clarify priorities, determine how resources and staff time can best be used, and eliminating (as well as adding or changing) some critical aspects of work.

Issues identified by staff

- ▶ Need information that is not available (PSIs)
- ▶ HIPPA keeps information confidential – certain information needs to be shared
- ▶ Transfer sheets from county often don't contain critical information about conduct
- ▶ LSI is not used
 - Except for determining substance abuse issues
 - Is used more extensively for female offenders
 - LSI is used more extensively with YOS cases.

Central classification –initial assignment

- ▶ Goal is to get 45 inmates out of DRDC each day
- ▶ Look at “codes” (P and M), custody issues (co-defendants, etc.), inmate physical limitations, commitment offense and time to serve
- ▶ Look at chart that identified which institutions can handle inmates based on time, codes and nature of crime
- ▶ There are available Level I and II beds – but backlogs for higher custody beds
- ▶ Goal is to place inmate in lowest level bed consistent with classification and medical/mental health/special needs.

General issues – recurring themes

- ▶ Difficulty getting “critical” information from county, from court.
- ▶ The “mitt comes through the CDOC filter” – is not identical to the “mitt” that the court produces
 - Apparently incompatible technologies
- ▶ Try to send inmate to lowest level security institution consistent with safety/security but physical plant, absence of services, etc. make placements difficult
- ▶ System is bedspace/security classification driven
- ▶ System was designed for 15 /day – now at 45
 - “Change is good. Constant change is not.”

B. Case management

- ▶ Offenders are assigned a case manager at their initial “permanent” institution
 - Case loads are generally over 100 per case manager
- ▶ Case managers are given many other duties to perform with the institution (“we are the dumping ground for work”). They work with inmates on:
 - Understanding their sentence
 - Practical institutional issues (banking, etc.)
 - Emergency contacts
 - Parole and release planning
 - Community corrections opportunities
 - Institutional jobs
 - Institutional programming

Case plan after release

- ▶ The LSI is administered once parole supervision starts
 - But parole staff indicated that it has little relevance for primary supervision activities other than to determine supervision level and contacts
- ▶ A case plan is generated after the LSI is completed
 - But parole staff indicated it does not drive case management work. Case management work is focused on the conditions imposed by the Board, and meeting case contact standards.
- ▶ Much of the electronic institutional offender information is available on automated systems
 - But some staff seemed unsure about being able to access or wanting/needing to use this information.

C. Institutional program referrals

- ▶ Key decision points:
 - ▶ Inmates may be assigned to institutions based on critical medical and mental health needs – and available medical/MH services
 - ▶ Inmates are generally not assigned to institutions based on other types of needs
 - ▶ Inmates are assigned to institutional programs based on perceived needs by the case managers – with some input from some program staff (depending on the program)

Issues

- ▶ Program staff see inmates assigned to programs after critical institutional service needs (kitchen, etc.) are met.
- ▶ Mental health case loads are “high” (120 per treatment professional at some facilities).
- ▶ No apparent “continuity of care” regarding programs or services other than mental health
- ▶ Programs and services are operated in compliance with standards – but perhaps little consistency in actual operation
- ▶ Getting inmates to “show up” is a problem

Issues, continued

- ▶ There are “global waiting lists” and prioritizations for some programs (substance abuse and GED)
- ▶ Inmates are not generally not placed or moved based on program needs – and may be moved despite their involvement in a current program
- ▶ Inmates are placed or removed from programs by case managers for a variety of reasons (again, there is no central case plan).

Discretion in community corrections placements

- ▶ It appears that considerable discretion exists with case managers regarding the initial and re-submission of community corrections requests
 - It was unclear what QA measures were in place regarding the making of these referrals
- ▶ There is complete discretion with Community Corrections Boards regarding decisions on submitted cases.
 - Some boards give no reasons for rejection



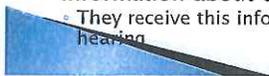
ISPI

- ▶ Inmates who are eligible for this intensive supervision program can be referred to Community Corrections boards for acceptance (before P.E.D.)
- ▶ Approximately 500 inmates on this program
- ▶ Usually used for inmates who have already been placed in community corrections facilities as a "step down" for community supervision.
- ▶ Discretion with case managers and parole officers to request this placement.



F. Release Decision Making – Parole Board

- ▶ Key Decision Points:
- ▶ The majority of inmates are eligible for parole consideration.
 - Efforts are made to hear cases at or before P.E.D.
- ▶ Software has been developed to assist the Parole Board in reviewing available and pertinent inmate information
 - A guideline "matrix" has been developed that provides recommendations in individual cases
- ▶ Parole board members receive electronic information about cases they will review
 - They receive this information shortly before the hearing



Release Decision Making

- ▶ If granted a parole decisions are made regarding conditions to be imposed
 - Board considers numerous factors in case file to determine conditions
 - unclear if LSI plays any role in this determination
 - there is no formal "case plan" to guide the imposition of conditions
- ▶ If parole is denied, the Board can determine a time to re-hear the case
 - Usually rehear in one year or less



EM/ISP

- ▶ ISP decisions are made by staff based on a variety of factors to include:
 - Nature of current conviction(s)/facts of offense
 - Prior criminal history/ prior supervision history
 - Availability of resources (staff and equipment)
 - Other factors gleaned from the admission data summary and other documents



EM/ISP Issues

- ▶ Consistency in decision making – it was not apparent if there is a guideline used by staff in deciding which parolees should be placed on ISP
- ▶ Issues regarding responses to EM violations will be addressed separately
- ▶ Variations in certain EM/ISP practices occur from county to county



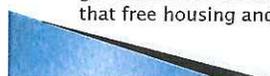
General parole supervision issues

- ▶ Parole staff indicated that they are required to participate in a significant amount of training that is not very valuable for them
 - Starting with basic training; doubled amount of firearm and PPCT training; 40 hours of required training that is often not pertinent to their work, etc.
- ▶ Staff have difficulty connecting the value of the LSI and the case plan that flows from that with their work
 - Supervision time is devoted to working with the parolee regarding the conditions of their supervision
- ▶ Staff have concerns about the CVDMP and their inability to have offenders revoked or revoked for any meaningful period of time.
 - Some staff feel that more revocation time should be imposed.



I. Community treatment referrals

- ▶ Gaining access to critical community services is important for the success of many parolees.
- ▶ Conditions imposed by the Board may require participation in certain programs or services.
- ▶ Staff indicated that long waiting lists, availability, costs and other factors may make it difficult for parolees to access these programs and services
 - Supervision staff seem to believe that parolees are given misinformation in the institutions – being told that free housing and other services will be provided



IV. What do you have going on now regarding these issues

- ▶ About 30 combined “lean” projects and strategic planning efforts appear to be underway and related to the topics referenced here including projects involving “outside” experts including:
 - “CTAP” (U. of Cincinnati; yet to start)
 - Parole time study with NCSC (planned)
 - Offender reentry/transition planning (Johns Hopkins; completed)



On-going projects – institutions

- ▶ Revalidate and implement male classification system (assessing results).
- ▶ Standardize offender movement between facilities – develop criteria; reduce offender moves
- ▶ C-TAP (yet to start) – focuses on developing a single case plan
- ▶ Cost-effective housing for aging offenders
- ▶ Defining appropriate vacancy rates for facilities
- ▶ Meet new PREA standards



On-going projects – treatment

- ▶ Implement Phase II of sex offender treatment programming plan
- ▶ Improvements to special needs unit/update and revise psychology codes
- ▶ In-reach program for continuity of care (pilot program in Denver area, completed)
- ▶ Assess master program schedule; evaluate consistency in programs; have comparable programs at various levels or institutions



On-going projects –release and reentry

- ▶ Establish inter-departmental reentry steering team
- ▶ Community Corrections EBP progression process (Lean)
- ▶ Community Corrections utilization (Lean)
- ▶ Community treatment and housing (Lean)
- ▶ Release plans and conditions of parole (Lean)
- ▶ Reentry/transition planning (Johns Hopkins)



VI. Implementation plan and next steps

- ▶ GOAL: Develop an integrated, prioritized plan for future work
- ▶ Many of the projects noted are near completion – some others have started
- ▶ There is a need to harmonize and prioritize all of these efforts – plus those additional ones that may be created – so that staff can successfully meet your expectations.



Opportunities exist to:

- ▶ Harmonize, integrate, and prioritize any new projects or efforts with existing work
- ▶ Clarify duties and responsibilities of key staff
- ▶ Provide more guidance/direction to individuals making critical discretionary decisions
 - So that they can act in ways consistent with Departmental expectations
- ▶ Develop a meaningful case plan that follows the offender through the system and uses objective risk/needs information
- ▶ Eliminate non-critical tasks to make room for the work you want/need staff to perform

