



Iowa Department of Corrections Response 2015 BUDGET SUBCOMMITTEE QUESTIONS

February 2, 2015

PROGRAM PERFORMANCE

- a. Do you have defined outcomes or measurements for your program(s)? What are they and are these measures listed somewhere so the public can see them?

Response. Program closure information – whether offenders completed the program successfully, unsuccessfully, etc., is readily available for all community-based corrections and institution programs via the Iowa Justice Data Warehouse. The Iowa Department of Corrections also regularly collects and reviews performance measures, and reports on a number of these in our annual reports here: <http://www.doc.state.ia.us/PublicationReports> (see Annual Performance Reports). The ultimate measure of performance is the recidivism rate, which we update annually; our latest such report is here: <http://www.doc.state.ia.us/UploadedDocument/480>.

The Iowa Corrections Offender Network (ICON) database is one of the most robust corrections databases in the nation. The seamless tracking of offenders between community corrections and prison placements greatly facilitates research into offender outcomes. Data sharing between community corrections and institutions, and with other state, county and local entities.

Longer-term outcomes and assessment of program success takes more resources and research capacity to determine. DOC prefers to obtain independent evaluations by outside research agencies for its programs. The Division of Criminal and Juvenile Justice Planning in the Iowa Department of Human Rights is an important research partner, whose evaluations of drug courts and other corrections programs over the years have been informative and high quality. Other research on corrections programs in Iowa have been conducted by nationally recognized researchers (most notably Abt Associates), and academic institutions in Iowa and elsewhere, including Iowa State University, the University of Iowa, the University of Northern Iowa, the University of Nebraska-Omaha, the University of Central Florida, and the University of Cincinnati.

- b. What data is available to show Iowans that your program(s) are an effective investment of taxpayer dollars? Where can Iowans find this data?

Response. The Iowa Department of Corrections has implemented the Pew-MacArthur Results First cost benefit model, which demonstrates the return on investment of corrections programs; the report is here: <http://www.doc.state.ia.us/UploadedDocument/446>. Also, in addition to the links top our annual report and recidivism report, the general research page of our public website <http://www.doc.state.ia.us/ResearchReports> contains briefs highlighting the major findings of the independent evaluations and studies mentioned above.

- c. Can you provide the committee with performance data for your programs over the last 5 or 10 years?

Response. Yes. We would be able provide the contents of the research website page in any form desired. We also have the full research reports upon which the briefs are based that we can make available.

PROGRAM EFFICIENCY

- a. Have you examined what other states are doing to improve performance and reduce costs?

Response. Yes. Iowa has recently received a \$3 million statewide reentry implementation grant from Bureau of Justice Assistance. A total of five states have received these awards, and are actively sharing the specifics of their initiatives, and will be learning from each other as we go. The other states are Georgia, Illinois, Minnesota and Vermont.

Iowa also participates in the Performance-Based Measurement System developed by the Association of State Correctional Administrators, and has adopted the full set of standardized measures to track in Iowa. As part of this system, it is possible to compare Iowa's measures with the national average as well as specific states. Iowa has been one of the leaders in development of this system.

Annually, several staff attend conferences, workshops and small meetings on various topics that include representation from other states, the Federal level and Canada, as well as nationally recognized experts and researchers. Often the subject matter is directly relevant to improving performance and reducing costs. Additionally, staff have the opportunity to interact informally with their colleagues at these functions and discuss these topics independently. Iowa is one of the leaders in this area.

- b. Can you share with the committee what other states are doing?

Response Yes. See attached Statewide Recidivism Reduction document. We will be happy to share more upon request.

- c. Which of these ideas are you considering for implementation here in Iowa?

Response Please see the Iowa Focus Areas on the attached Statewide Recidivism Reduction document. We will be happy to share more upon request.

- d. Are there websites or organizations we could go to obtain more information on what other states' programs are doing to provide more efficient services?

Response. Council of State Governments, National Reentry Clearinghouse: <http://whatworks.csgjusticecenter.org/>. National Institute of Corrections: <http://nicic.gov/> (see especially the library). The Campbell Collaboration systematic reviews: <http://www.campbellcollaboration.org/lib/?go=monograph>. The Washington State Institute for Public Policy: <http://www.wsipp.wa.gov/Reports>. Division of Criminal & Juvenile Justice Planning, Iowa Department of Human Rights, publication

pages: <http://www.humanrights.iowa.gov/cijp/publications/index.html>. There are others.

- e. Do you have an email address or a comment section on your website where Iowans can suggest improvements to your program or agency?

Response. Yes, there is an E-Mail link prominent in the top bar of our website pages: doc.information@iowa.gov.

PROGRAM DUPLICATION

- a. Are there any other programs that are providing the same or similar services?

Response. The Iowa Department of Corrections and district departments of correctional services are the primary entities responsible for custody and supervision of state-sentenced offenders in Iowa.

- b. Is there a reason why we need more than one program providing the same or similar service? **NOT APPLICABLE.**

- c. Have you had any discussions with the other agencies or programs to find ways to maximize the use of the taxpayer's dollars?

Response. Responsible use of taxpayer dollars is one of the key desired outcomes of our strategic plan. We have collaborated with community colleges and Iowa Workforce Development to provide programs within the state prison system. We have collaborated with the Iowa Department of Human Services to enroll eligible offenders in Medicaid as part of reentry assistance. We participate in electronic sharing of documents (CJIS, EDMS), which has saved taxpayer dollars and streamlined victim notification, information to troopers, sex offender registration, submittal of presentence investigations, etc. One of the latest projects was to implement programming on ICON to support all major Board of Parole processes, which has saved taxpayer dollars and streamlined parole case review and revocation processes, among other functions. Our current statewide reentry implementation grant is overseen by a multi-agency Reentry Task Force, and this process over the next three years will facilitate more productive discussions and activities in this area.

- d. Are there any laws or administrative rules that would limit your ability to work with the other programs or departments? **NO**
- e. Are there any laws or administrative rules that could be changed to make your program or agency work better? **See Board of Corrections 2015 Legislative Proposal, which is part of our annual review and approval process for these issues.**

OTHER

- f. Would it be a burden to your agency to ask that your presentations be delivered to the Legislative Services Agency 48 hours in advance of your appearance before the committee? **NO**

- g. If you are required to reduce your budget by 1%, 5%, or 10%, where would you suggest we focus our attention?

Response. As noted from previous responses, the Department of Corrections has a proven track record of performance based results, service efficiencies and responsible use of tax payer dollars, which efforts continue to move forward in support of successful offender reentry to protect the public, employees and offender from victimization. The proposed FY 2016 & FY 2017 Governor's budget provide critical investments to pharmacy market impacts, drug court evidence based outcomes and critical operational costs for Clarinda, Mount Pleasant and Mitchellville. A decrease from the proposed budget results in a direct negative impact on the Department's ability to refill previously funded vacant positions and causes a reduction in existing paid staff.

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Statewide Recidivism Reduction: FY14 Grantee Cheat Sheet

Georgia

Focus areas

- Review and update policies on supervision standards and utilization of graduated sanctions based on risk-needs assessment
- Review and updated case management policies and provide training for staff on core correctional practices, MI, etc.
- Augment evidence based programming within facilities by creating an "evidence based learning" facility
- Implement program quality assurance measures and create more incentives for community-based partners to use EBPs in contracts
- Improve information sharing capacity among agencies and community stakeholders.

Contact

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Illinois

Focus areas

- Integrate risk assessment into decision making on program and treatment participation, adult transition centers utilization and electronic detention utilization.
- Build program quality assurance capacity.
- Staff training in CCP, MI, and other RNR-educational trainings.
- Revise eligibility criteria policies for high-risk offenders stepping down from institutional custody to adult transition centers.
- Conduct a program assessment of community based services
- Research and evaluate outcomes of risk assessment and case planning

Contact

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Statewide Recidivism Reduction: FY14 Grantee Cheat Sheet

Iowa

Focus areas

- Develop Quality Assurance Plan and policy/procedures based on evidence-based practices.
- Develop and implement statewide Training Plan, include T4T for core competencies, new risk/need assessment tool, use of sanctions and incentives.
- Develop and implement statewide policy/procedures about pre-release case plan to address RNR, include partnership with NAMI to improve continuity of care for individuals with mental disorders.
- Complete review of current job classifications. Revise descriptions and hiring and evaluation criteria based on research.

Contact

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Minnesota

Focus areas

- Review and update supervision policies to ensure intensive supervision is reserved for higher-risk clients and low-risk clients are not over-supervised.
- Train field agents using J-SAT's rapid involuntary engagement model to improve quality contact standards. Strengthening case management interventions through the use of the Carey Guides for facilities and field.
- Review and update contract language with community-based treatment partners to promote EBPs, and establish a preferred network of providers. Pilot a specialty rate for treatment providers of high-risk clients to increase access to care and improve treatment outcomes.
- Quality assurance and training opportunities for community-based treatment partners. Set new standards for contractual partners to be at 55% compliance after 3 CPCs.
- Implement cognitive program "aftercare" curriculum to reinforce classroom based learning in a community-setting.
- Increasing opportunities for pro-social supports including facility visitation and mentoring.

Contact

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Statewide Recidivism Reduction: FY14 Grantee Cheat Sheet

Vermont

Focus areas

- Review and update policy/procedures around risk tools, case planning, sanctions and incentives, classification, and supervision.
- Develop Core Correctional Practices training for state agencies and community providers working with offenders.
- Develop comprehensive and sustainable EPICS program with DOC.
- Create a data sharing process to support integrated case management.
- Increase the quality assurance/implementation fidelity of risk reduction programs (focus on CPC).
- Validate and Norm the ORAS for VT.
- Invest in targeted programming, including Domestic Violence Evidence-based Programming Continuum. Partner with U of Cincinnati to develop and pilot a web-based cognitive-behavioral curriculum for rural communities.

Contact

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Department of Corrections 2015 Legislative Proposal

A. Staff sexual misconduct with offenders – (see HF 614)

Amend Iowa law to increase the penalty for staff sexual misconduct with an offender from an aggravated misdemeanor to a class D felony.

RATIONALE: The proposal is needed to align Iowa with other states that have made the penalty a felony. Iowa is one of the two remaining states that have not made the penalty a felony. The proposed language would raise the penalty from an aggravated misdemeanor to a class D felony.

B. Sex Offender Modification

692A.128. Modification

1. A sex offender who is on probation, parole, work release, special sentence, or any other type of conditional release may file an application in district court seeking to modify the registration requirements under this chapter.
2. An application shall not be granted unless all of the following apply:
 - a. The date of the commencement of the requirement to register occurred at least two years prior to the filing of the application for a tier I offender and five years prior to the filing of the application for a tier II or III offender.
 - b. The sex offender has successfully completed all sex offender treatment programs that have been required.
 - c. A risk assessment has been completed and the sex offender was classified as a low risk to reoffend. The risk assessment used to assess an offender as a low risk to reoffend shall be a validated risk assessment approved by the department of corrections.
 - d. The sex offender is not incarcerated when the application is filed.

The mission of the Iowa Department of Corrections is:
To advance successful offender reentry to protect the public, staff and offenders from victimization.

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e. The director of the judicial district department of correctional services supervising the sex offender, or the director's designee, stipulates to the modification, and a certified copy of the stipulation is attached to the application.

3. The application shall be filed in the sex offender's county of principal residence.

4. Notice of any application shall be provided to the county attorney of the county of the sex offender's principal residence, the county attorney of any county in this state where a conviction requiring the sex offender's registration occurred, and the department. The county attorney where the conviction occurred shall notify the victim of an application if the victim's address is known.

5. The court may, but is not required to, conduct a hearing on the application to hear any evidence deemed appropriate by the court. The court may modify the registration requirements under this chapter.

6. A sex offender may be granted a modification if the offender is required to be on the sex offender registry as a result of an adjudication for a sex offense, the offender is not under the supervision of the juvenile court or a judicial district judicial department of correctional services, and the department of corrections agrees to perform a risk assessment on the sex offender. However, all other provisions of this section not in conflict with this subsection shall apply to the application prior to an application being granted except that the sex offender is not required to obtain a stipulation from the director of a judicial district department of correctional services, or the director's designee.

7. If the court modifies the registration requirements under this chapter, the court shall send a copy of the order to the department, the sheriff of the county of the sex offender's principal residence, any county attorney notified in subsection 4, and the victim, if the victim's address is known.

8. A fee may be assessed to a sex offender, to offset the costs of performing a risk assessment, as part of the modification process.

RATIONALE: As discussed with the AG's Office, current Iowa Code language does not provide for the DOC to charge a fee for staff time and resources in conducting a risk assessment on a sex offender.

With the new Iowa Supreme Court ruling in *State of Iowa v. Iowa District Court for Story County (February 14, 2014)*, which essentially allows everyone (5,828 offenders) on the sex offender registry (except juveniles still on supervision) to request a modification evaluation, DOC/CBC has been inundated with calls for evaluations.

For example, in the 5th District, they had about 250 or so adult offenders who were eligible per the old law. With the Court ruling, the 5th District has about 900 offenders who can qualify, with 579 in Polk County alone.

This Court ruling will have a statewide impact on all CBC's.

C. Inmate savings fund

904.508. Property of inmate

1. The superintendent of each institution shall receive and care for any property an inmate may possess on the inmate's person upon entering the institution, and on the discharge of the inmate, return the property to the inmate or the inmate's legal representatives, unless the property has been previously disposed of according to the inmate's written designation or policies prescribed by the board. The superintendent may place an inmate's money at interest, keeping an account of the money and returning the remaining money upon discharge.

2. Pursuant to section 904.702, the director shall establish and maintain an inmate savings fund in an interest-bearing account for the deposit of all or part of an inmate's allowances and amounts, except amounts directed to be deposited in the inmate telephone fund established in section 904.508A, sent to the inmate from a source other than the department. All or part of an inmate's allowances and amounts, excluding lifers whose sentence has not been commuted to a term of years, offenders serving sentences under 902.12, 901A whose maximum term of incarceration is 50 years or more and are age 35 or older at the time of prison admission, and offenders serving sentences under 902.12 or 901A whose maximum term of incarceration is between 25 and 50 years and are age 50 or older at the time of prison admission, except amounts directed to be deposited in the inmate telephone fund established in section 904.508A, from a source other than the department shall be deposited into the savings fund, until the inmate's deposit is equal to one hundred dollars as provided in section 906.9. If an inmate's deposits are equal to or in excess of one hundred dollars, the inmate may voluntarily withdraw from the savings fund. The director shall notify the inmate of this right to withdraw and shall provide the inmate with a written request form to facilitate the withdrawal. If the inmate withdraws and the inmate's deposits exceed the amount due as provided in section 906.9, the director shall disburse the excess amount as provided for allowances under section 904.702, except the director shall not deposit the excess amount in the inmate savings fund. If the inmate chooses to continue to participate in the savings fund, the inmate's deposits shall be returned to the inmate upon discharge, parole, or placement on work release. Otherwise, the inmate's deposits shall be disposed of as provided in subsection 3. An inmate's deposits into the savings fund may be used to provide the money due the inmate upon discharge, parole, or placement on work release, as required under section 906.9. Interest earned from the savings fund shall be placed in a separate account, and may be used for purchases approved by the director to directly and collectively benefit inmates.

3. Upon the death of an inmate, the superintendent of the institution shall immediately take possession of the decedent's property left at the institution, including the inmate's deposits into the inmate savings fund, and shall deliver the property to the person designated by the inmate to be contacted in case of an emergency. However, if the property left by the decedent cannot be delivered to the designated person, delivery may be made to the surviving spouse or an heir of the decedent. If the decedent's property cannot be delivered to the designated person and no surviving spouse or heir is known, the superintendent shall deliver the property to the treasurer of

state for disposition as unclaimed property pursuant to chapter 556, after deducting expenses incurred in disposing of the decedent's body or property.

RATIONALE: Amend Iowa law so that mandatory savings is not required for those offenders who may not be released from prison.

The proposal is needed to allow long-term offenders, with no chance of released, from having to participate in mandatory savings account of \$100.

The language will relieve long-term offenders from having to accumulate \$100 in savings for use when they are released. Please note, these are long-term offenders with no or little chance of release.

D. Female Admissions

904.201. Iowa medical and classification center

1. The Iowa medical and classification center at Oakdale shall be utilized as a forensic psychiatric hospital for persons displaying evidence of mental illness or psychosocial disorders and requiring diagnostic services or treatment in a security setting, as a security unit for persons requiring confinement in a security setting, and as a classification unit for the reception, orientation, and classification of inmates before placement in the most appropriate correctional institutions according to necessary security and custody arrangements and the assessed service needs of the inmates.
2. The medical director of the department or the medical director's designee shall secure the professional care and treatment of each person confined at the center and maintain a complete record on the condition of each person confined at the center.
3. a. The forensic psychiatric hospital may admit the following persons:
 - (1) Residents transferred from an institution under the jurisdiction of the department of human services or the Iowa department of corrections.
 - (2) Persons committed by the courts as mentally incompetent to stand trial pursuant to section 812.6.

(3) Persons referred by the courts for psychosocial diagnosis and recommendations as part of the pretrial or presentence procedure or determination of mental competency to stand trial.

(4) Prisoners transferred from county and city jails for diagnosis, evaluation, or treatment for mental illness.

b. Other persons may be admitted providing the admissions are not inconsistent with law and are within the capacity of the facilities and staff to accommodate the persons.

4. The classification unit, or other institution designated by the Director, shall admit inmates for purposes of orientation and classification before placement in the most appropriate correctional institutions.

5. The director may house inmates from any correctional institution at the center in order to provide the inmates with suitable security or medical treatment, or both. Unless an inmate is determined to be mentally ill, the inmate shall not be subjected involuntarily to psychiatric treatment.

6. All admissions to the forensic psychiatric hospital shall be by written application only. Application shall be made by the head of the state institution, agency, governmental body, or court requesting admission to the medical director of the department or the medical director's designee. An application may be denied by the medical director of the department or the medical director's designee, with the approval of the director, if the admission will result in an overcrowded condition or if adequate staff or facilities are not available. The decision regarding admission and discharge of persons shall be made by the medical director of the department or the medical director's designee, subject to approval of the director.

7. When a person transferred to the center from any other state institution or admitted by request or order of any agency, governmental body, or court no longer requires special treatment in the security setting, the person may be returned to the source from which received. The state institution, agency, governmental body, or court that referred the person for hospitalization shall retain constructive jurisdiction over the person. Persons without legal encumbrances may be discharged directly from the center upon concurrence of the medical director of the department or the medical director's designee and the head of the referring institution, agency, governmental body, or court. The support, commitment, and

release statutes applicable to a person at the state institution from which transferred shall remain applicable while the person is at the center.

8. Chapter 230 governs the determination of costs and charges for the care and treatment of persons with mental illness admitted to the forensic psychiatric hospital, except that charges for the care and treatment of any person transferred to the forensic psychiatric hospital from an adult correctional institution or from a state training school shall be paid entirely from state funds. Charges for all other persons at the forensic psychiatric hospital shall be billed to the respective counties at the same ratio as for patients at state mental health institutes under section 230.20.

RATIONALE: This statutory change would allow newly sentenced female offenders to be admitted at the Iowa Correctional Institution for Women, which is consistent with its new design and functionality. Male offenders would still be admitted at the Iowa Medical & Classification Center.

E. Second Opinions

229.10. Physicians' examination--report

1. a. An examination of the respondent shall be conducted by one or more licensed physicians, as required by the court's order, within a reasonable time. If the respondent is detained pursuant to section 229.11, subsection 1, paragraph "b", the examination shall be conducted within twenty-four hours. If the respondent is detained pursuant to section 229.11, subsection 1, paragraph "a" or "c", the examination shall be conducted within forty-eight hours. If the respondent so desires, the respondent, other than an inmate committed to the custody of the director of the iowa department of corrections, shall be entitled to a separate examination by a licensed physician of the respondent's own choice. The reasonable cost of the examinations shall, if the respondent lacks sufficient funds to pay the cost, be paid from county funds upon order of the court.

b. Any licensed physician conducting an examination pursuant to this section may consult with or request the participation in the examination of any mental health professional, and may include with or attach to the written report of the examination any findings or observations by any mental health professional who has been so consulted or has so participated in the examination.

c. If the respondent is not taken into custody under section 229.11, but the court is subsequently informed that the respondent has declined to be examined by the licensed physician or physicians pursuant to the court order, the court may order such limited detention of the respondent as is necessary to facilitate the examination of the respondent by the licensed physician or physicians.

2. A written report of the examination by the court-designated physician or physicians shall be filed with the clerk prior to the time set for hearing. A written report of any examination by a physician chosen by the respondent may be similarly filed. The clerk shall immediately:

- a. Cause the report or reports to be shown to the judge who issued the order; and
- b. Cause the respondent's attorney to receive a copy of the report of the court-designated physician or physicians.

3. If the report of the court-designated physician or physicians is to the effect that the individual is not seriously mentally impaired, the court may without taking further action terminate the proceeding and dismiss the application on its own motion and without notice.

4. If the report of the court-designated physician or physicians is to the effect that the respondent is seriously mentally impaired, the court shall schedule a hearing on the application as soon as possible. The hearing shall be held not more than forty-eight hours after the report is filed, excluding Saturdays, Sundays and holidays, unless an extension for good cause is requested by the respondent, or as soon thereafter as possible if the court considers that sufficient grounds exist for delaying the hearing.

RATIONALE: Amend Iowa law so that inmates are not receiving a second opinion, from a doctor of their choice, for involuntary hospitalization hearings that DOC is paying for.

The proposal is needed because current practice is that inmates are requesting a second opinion, from a doctor of their choosing, and the DOC is forced to pay because the inmate has no funds.

The DOC is not legally required to provide, and pay for, second opinions for non-psychiatric medical evaluations and should not be allowed for involuntary hospitalizations.

This will assist with reducing unfunded expenditure of state general fund moneys.
