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RECTIONAL

PERFORMANCE MEASUREMENT IN CORRECTIONS NEEDED MORE NOW THAN EVER

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While headlines are trumpeting decreased crime rates across America, a different and troubling story lies just beneath them. The number of people in prison has continued to rise. Overall, the nation's correctional population is swelling by 1.9% per year (2000 to 2005) with the latest U.S. Bureau of Justice Statistics figures topping out at 2.8% (2005 to 2006). In some states, the growth rate among those behind bars is significantly more than the national average, led by New Hampshire, up 10.9%, Nevada , up 9.5%, and Georgia, up 8.3% (Sabol, Couture, & Harrison, 2007).

Those responsible for state and federal corrections face grim challenges when attempting to manage constantly growing populations. Public safety demands noescape facilities, and public sympathy correctly lies with the corrections staff, whose safety is critical. But public interest also favors lower taxes, which means fewer and fewer resources available to meet the needs for each person incarcerated.

Communities across the nation are quietly feeling their own pinch. County jails are overcrowded, demanding more staff, more support, more overtime, and more money. Of those incarcerated in state and federal facilities, fully 95% will return to the community (most in about 2 years) triggering new public safety concerns (Hughes & Wilson, 2003). Worse, those who have been imprisoned are statistically destined (68%) to be rearrested for new offenses (Hughes & Wilson, 2003). Even if we ignore the fact that so many offenders are returning to prison, the social cost to families and neighborhoods is enormous. The National Conference of State Legislatures related that fiscal year 2008 state expenditures for corrections are estimated at \$39.8 billion, a growth of 6.8% in general fund spending (National Conference of State Legislatures, 2008). Policing, criminal justice and court systems, public aid, public defense, and family interventions and support all drive costs constantly higher, prompting many elected officials and public policy makers to demand change in the system. Overall, there is growing concern that the system is ineffective in ensuring that the punishment and desired behavior change occur.

Three realities have emerged from research across the nation (Management

& Training Corporation, 2006). First, the lock them up and leave them approach, in which corrections means little more than warehousing people, is a political agenda that has failed. It installs a revolving door on correctional facilities, taking in and sending out people who are more likely to return to prison than to succeed in their communities. This method has left correctional professionals with short funding and inadequate tools to do a task that they know can be done successfully.

Second, the cost of a non-responsive corrections system is staggering. For a comparatively few dollars each day, funding

•The lock them up and leave them approach, in which corrections means little more than warehousing people, is a political agenda that has failed. •

can be provided for treatment of alcohol and drug dependence (which impacts a majority of those in prison) and learning which yields new skills, a mentality of self-respect once they have success, new trades, and new opportunities for employment after release. These services cost mere pennies when compared to the dollars wasted on a system that refuses to fund the tools that will provide the appropriate corrective measures to reduce recidivism.

Third, with current metrics not working, both the public and the professionals are demanding accountability for outcomebased management. Corrections facilities are increasingly being held to outcomes measured by post-release factors including not just recidivism, but continued education, employment, and the payment of taxes. Taxpayers and corrections leaders agree that a revolving door wastes both lives and dollars. The savings realized by cutting treatment and education are, in fact, the most expensive strategies imaginable in the world of corrections.

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INTERNATIONAL ASSOCIATION FOR CORRECTIONAL & FORENSIC PSYCHOLOGY

The Correctional Psychologist (TCP) is published every January, April, July, and October, and is mailed to all International Association for Correctional & Forensic Psychology (IACFP) members. Comments and information from individual members concerning professional activities and related matters of general interest to correctional psychologists are solicited. The IACFP endorses equal opportunity practices and accepts for inclusion in TCP only advertisements, announcements, or notices that are not discriminatory on the basis of race, color, sex, age, religion, national origin, or sexual orientation. All materials accepted for inclusion in TCP are subject to routine editing prior to publication. Please send material for publication or comments to Dr. Robert R. Smith: smithr@marshall. edu. New deadlines for submission of all material are: January issue— October 15 April issue— January 15 July issue— April 15 October issue—

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Correctional leaders across the U.S. are moving away from the punishment model approach to a prison management approach which is turning prisons into places that provide opportunities for behavioral change, where inmates can learn academics and lifeskills. be treated for substance abuse problems, and better prepare for their reentry into society. This prison management approach includes an increasing demand for accountability for funds provided to corrections. Performance measurement provides the foundation for such accountability and movement toward what could be considered a successful correctional facility.

To arrive at some determination of success, all correctional facilities need to be accountable to standard performance criteria that can be measured across facilities and jurisdictions nationwide. Only then can the public identify successful correctional facilities as well as systems that are effective in reducing the number of offenders that return to the correctional system.

In response to the need and, because of concern about how jurisdictions were being judged concerning performance and being compared unfairly with sister iurisdictions, the Association of State Correctional Administrators (ASCA), which includes the directors of state correctional agencies, created a national Performance-Based Measurement System (PBMS). However, not all correctional systems have started to use the system yet, but the number of states attending training continues to grow. Currently, 39 states have received training on how the system works (M. Clayton, personal communication, June 17, 2008), including how they can enter

data into a national Internet-based central repository for data, which is being piloted. The PBMS, which has uniform definitions, counting rules, standards and outcomebased measurable standards, is needed to clarify misunderstandings, allow cross-agency evaluations, encourage management to be future oriented, and provide motivation for using performance as a basis for management and the decisionmaking process (Association of State Correctional Administrators, 2007).

There are compelling reasons for continued implementation of the PBMS until all correctional agencies, including contracted correctional facilities, are using the indicators and data collection methods. Use of the system will promote accountability. improved decision-making, and access to data, which will promote more accurate and fair comparisons between jurisdictions and facilities, ultimately leading to the ability to study trends and attain better outcomes (Association of State Correctional Administrators, 2008). With full implementation of the PBMS, the potential of being responsive to the citizens' right to public safety, inmate success upon release, and governmental accountability, stands a much better chance of being reached.

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CRANIAL ELECTROTHERAPY STIMULATION: A CASE STUDY

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In 46 AD, a Roman physician, Scribonius Largus used an electric eel in the treatment of medical disorders like headaches and gout, by having the patient stand on a beach in proximity to the eel (Kirsch, 2002). In Europe, the use of electricity in medical treatments goes back to the 18th Century. For example, the forerunner of the defibrillator was developed in Europe near the end of the 1700s. In the mid-1850s, precursors to transcutaneous electric nerve stimulators (TENS) were being marketed to control pain (Kirsch, 2002). Over the years, the importance of electrotherapy in the treatment of medical diseases has not diminished, although it has been overshadowed today by pharmacological approaches. Medicine's high costs and frequent serious side-effects, however, have prompted an increased focus on alternative approaches to medical treatments that are based solely on a chemical approach to healing.

Cranial Electrotherapy Stimulation (CES) has been used successfully to treat numerous disorders. including depression (Marshall & Izard, 1974; Cox & Heath, 1975), alcoholism (Krupitsky, Burakov, & Karandashova, 1991), cocaine detoxification (Brovar, 1894), marijuana withdrawal (Overcash & Sieventhall, 1989), acute anxiety (Overcash, 1999), and stress, related to cognitive dysfunctions (Smith, 1999). Of particular relevance to the present study, were demonstrations of CES's utility with incarcerated, violent, and mentally retarded inmates (Childs, 2005) and the treatment of pedophiles and

parolees with impulse control issues (Voris, 1995).

The type of CES unit described in this article is an Alpha-Stim SCS (Stress Control System). The system is FDA cleared for the therapeutic treatment of anxiety, depression, and insomnia. It is cost-effective, with only mild side-effects, which occur infrequently and are generally easily remedied. Several studies (with an accumulation of over 5.000 subjects) have been published examining the effectiveness of the Alpha-Stim SCS as a treatment for mental disorders. and pain management. For example, a post-marketing analysis of 349 patients using the Alpha-Stim SCS to reduce anxiety found 91% of patients reported reductions in symptoms where symptom relief was equal to or greater than 25% (Kirsch, 2002).

The minimally effective treatment appears to be 100 micro-amps (uA), although the unit is adjustable up to 500 uA. The uA dosage is determined by the patient, using a control dial on the side of the Alpha-Stim SCS unit. The waveform is bipolar asymmetrical rectangular, with a duty cycle of 50% and a zero net current delivered by a nine volt battery. The unit is portable, 10cm by 7.5 cm, and weighs in at only 106 gm, nine volt battery included.

The unit uses ear clips to deliver the amperage. Felt pads are attached to each ear clip prior to using the unit, to avoid subject discomfort. Alcohol wipes are used to clean the ear lobes prior to treatment and, in post-treatment, to cleanse the ear clips of adhesive residue from the felt pads.

Side-effects are minimal and easily

corrected. These include dizziness, mild headaches, nausea, and rashes on ear lobes. Neutralization of these side-effects is generally managed by reducing the uA.

The Alpha-Stim SCS seems to change the electrical and chemical activity of certain nerve cells in the brainstem (and) amplify activity in some neurological systems, and diminish activity in others. This neurological fine tuning is called modulation (Electromedical Products International, 2006). The end result of amplifying activity is an increase in the production of the neurotransmitter serotonin.

Kennerly's research also provided important insights into changes in cortical functioning secondary to an Alpha-Stim SCS treatment. Using qEEG brainmaps, he studied variations in five bandwidths, Gamma, Beta, Alpha, Theta, and Delta during and after treatment. The treatment was one 20-minute Alpha-Stim SCS session. The brainmaps of his 30 subjects uniformly showed elevations in Delta and Gamma bandwidths across the entire cortex. Post-treatment changes included noticeable reductions in the Delta and Theta bandwidths and a significant increase in Alpha activity (Kennerly, 2004). Elevated Alpha is associated with a relaxed, yet focused state of mind, an important therapeutic effect of the Alpha-Stim SCS.

The 19-year-old Caucasian subject was of average weight and height with no physical disabilities. He was asked to volunteer due to his history of aggression and violence, including a physical (Continued on page 5)

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attack on a detention center security officer. In addition, he had failed at two prior attempts to complete the center's substance abuse treatment program. His physical attack on the officer and threat to do harm to the officer's wife led to the second expulsion. During the past 24 months the subject spent all but 3 months in the county detention center. The next step for the chief of the detention center was to have the subject sent to prison to complete his sentence.

The subject had just enrolled in the drug treatment program for the third time when he volunteered for the study. Despite spending the previous 40 days in administrative segregation, his prognosis by treatment staff was mixed to very poor.

The subject's family was composed of biological parents, two step-parents, two sisters and two step-sisters. His ordinal position was third. During his childhood years, he had lived with his mother and his step-father. His mother was an intermittent recovering alcoholic and his stepfather had a history of chronic marijuana abuse. The subject's biological father had a history of methamphetamine abuse, including at least one conviction. The subject reported going to Chicago, Illinois, at age 13 years, where he was initiated into a gang. In that same year, he was sentenced to boot camp for gang activity but was kicked out after fighting with other juveniles and going absent without leave (AWOL).

The subject had an extensive history of fighting and head trauma. As a pre-teen and during his teen years, he reported repeated physical fights with his biological

father. He also fought on the streets, especially when drugs were involved. His nose had been broken twice and he stated that he's had more black-eyes than he can count. The subject reported two serious instances of head trauma. The first was at the age of 4 years when a horse kicked him in the head. The injury required 48 stitches to the left eye-brow area. The injured area was near the orbitofrontal cortex, which is involved with controlling emotions. The second injury, also requiring many stitches, occurred at age of 17 years when he was a passenger in a serious automobile accident.

His history of drug use included marijuana, cocaine, pills, opiates, and barbiturates. He began using crack cocaine and methamphetamine at age 17 years. More recently he started taking meth intravenously.

The subject described his childhood as unhappy, painful, and hard to remember, and that he was active, aggressive, irresponsible, rebellious, and stubborn. Problem areas included difficulties getting along with others, including peers and teachers. He experienced frequent nightmares and he had an intense fear of failure. He also reported a long-standing fear of falling with a childhood onset.

His mother, a nurse by profession, was remembered as generally distant and unpleasant but at times affectionate. He described her discipline as fair, lenient, and inconsistent.

His step-father, who raised him, was a union supervisor at a steel plant. The subject viewed him also as distant and unpleasant, as well as rejecting and abusive. His biological father's discipline was seen as strict and the relationship was punctuated, as noted above, with frequent violent physical fights. Despite difficulties in their relationship, his mother and step-father were remembered as close, happy, and loving toward one another, but reserved toward him. The subject was never married but did have a 14-month-old daughter, who lived in Europe.

Much of the data suggests a diagnosis of Antisocial Personality Disorder. These include early childhood difficulties, gang membership, inability to adapt to school structure and rules, disruption of the nuclear family, polysubstance use on a daily basis, sex seen as neutral, and an extensive history of violent behavior. His current self-assessment included the following descriptors: forgetful, fearful, angry, confused, calm, hyperactive, and happy. Mitigating indictors included expressions of concern for his mother's addiction and a 3-year work history as a plumber, where he reported working over 40 hours a week.

The treatment program was well designed and included 33 modules. The following is a sampling of those modules: alcohol and drug education, cravings and triggers, spirituality, planning for sobriety, sex/drugs and alcohol, reducing stress, negative emotions, the 12 step program, physical wellness, problem solving skills, attitudes and beliefs, family matters, child development and parenting, money management, sexual abuse, and relapse prevention.

Inmates lived in family pods with 8 to 10 other inmates while attending the treatment program. Each pod had an inmate assigned by the chief of the detention center as pod leader. Pod leader responsibilities included leading by example, leading a group three times daily, (Continued on page 6)

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helping pod members achieve at their highest level, ensuring pod rules were followed, and writing weekly reports. Information from pod leaders was considered when staff members made their weekly and monthly evaluations.

As noted above, the treatment was CES and the instrument used was the Alpha-Stim SCS. The specific brain mechanisms by which symptom reductions are achieved are not fully understood. However, it is clear that the waveform, described above, does activate neurons at the top of the brainstem which produce serotonin (5-HT) and, at the same time, inhibits the cholinergic (Ach) and noradrenergic (NE) systems (Electromedical Products International, 2006). Given the above information, it is a fair assumption that CES provides a modulating effect on general brain activity. Modulation of cortical and sub-cortical brain functions can allow a subject to better utilize the training and counseling received during treatment.

The subject received 15 treatment sessions. Each session lasted a minimum of 20 minutes, with most lasting 40 minutes. All sessions were completed within a 45-day treatment period. The co-author, a master's level graduate student and trained in the use of the Alpha-Stim SCS, supervised each session. The sessions were carried out in the detention center's recreation room which was cleared of inmates and all but one security staff member. The daily uA treatment utilized was between 300 and 400 uA. The uA level was chosen by the subject.

As noted above, the measures of change were pre- and postassessments on the 16PF, the subject's anecdotal observations and structured self-ratings, and weekly/monthly assessments by the treatment staff. The pre- and post-16PF scores are the only measures highlighted here. Contact the authors for additional pre- and post-measure changes.

Pre-and post-treatment 16PF scores are shown in Table 1. Since the Alpha-Stim SCS has a successful research record for reducing anxiety, it was not surprising that positive changes were found in the categories of Tension and Apprehension. However, improvements with other factors were also found.

Taken together, it appears that a strong positive change was found in 7 of 16 factors (**) while positive changes but smaller in magnitude (*), were found in three additional factors. The subject's scores suggested reductions in tension and apprehension and important increases in warmth, spontaneity, liveliness, sensitivity to others, and affiliativiness with others, as well as, an increased openness to change. While scores on four variables began near the scale's means and reflected small changes, the noted changes were in the desired direction. These scores suggested that the subject moved toward being more self-disciplined, less threatsensitive, less emotionally labile, and less non-conforming.

Five factors seemed to reflect changes in a negative direction, Dominance, Vigilance, Privateness, Reasoning, and Abstractness. The increase in Dominance and Vigilance may have been influenced by his promotion to pod leader. The Dominance score was initially in a centrist position and moved toward the forceful and assertive side of the scale. The move in his Vigilance score was less dramatic but it did move even further away from the mean toward high Vigilance. Privateness, a measure of the degree to which a person is willing

TABLE 1: 16PF Scores

Factors	Pre-	Post-	
	Assess	Assess	Increase/Decrease
Warmth**	02	10	+8 greater warmth
Reasoning	05	08	+3 more abstract
Emotional Stability	/* 04	05	+1 greater emotional stability
Dominance	06	09	+3 from high to very high
Liveliness**	05	08	+3 more spontaneous than restraint
Rule-Conscious*	05	06	+1 less non-conforming
Social Boldness*	05	06	+1 less threat sensitive
Sensitivity**	03	06	+3 greater sensitivity to others
Vigilance	08	09	+1 high to very high
Abstractness-0	09	09	00 very high
Privateness	08	09	+1 very non-disclosing
Apprehension**	07	05	-2 less apprehensive
Open to Change**	07	10	+3 very open to change
Self-Reliance**	10	08	-2 more affiliative
Perfectionism*	05	06	+1 more self-disciplined
Tension**	09	05	-4 less tense
			$(\mathbf{O} \circ \mathbf{r})^{\mathbf{i}}$

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to disclose, went from negative to very negative. Finally the subject's Abstraction and Reasoning scores showed a person who was imaginative and idea-oriented rather than practical and solutionoriented. These two factors moved from centrist positions to strongly abstract. Normally, abstract thinking is associated with intelligence and that may be the case here. However, the polarity on the Abstraction scale is "grounded and practical," two traits that would, seemingly, benefit the subject.

During the treatment period, the subject received no disciplinaries and his mean weekly pull-up averaged only 1.8 per week. Disciplinaries were given for major infractions like stealing and physical violence and pull-ups were given for minor infractions like being late for group or talking in the shower zone.

Five moderator variables seemed of particular interest to the researchers: gender, being the only subject of a research project, belief in treatment, substance abuse treatment program, and time in administrative segregation. Any and all could have contributed to the positive changes found in the subject's behavior.

Gender: Time with the coauthor, who was female, could have provided a strong motivation to the subject.

Subject of research: The inmate was the only subject singled out in the entire detention center for participation in the research project.

Belief in the treatment: The subject may have experienced a motivation to change due to his belief in the CES treatment rather than being changed by the actual uA current.

Substance abuse treatment program: The subject was participating in a drug treatment program which offered him new methods for improving himself.

Time in administrative segregation: The subject had completed 40 days in isolation just before reentering the drug treatment program for the third time. Time in isolation frequently brings about changes in an inmate's attitudes and behaviors upon release, sometimes for the better.

By almost all measures, there were positive changes in the subject's behavior beginning with the introduction of the Alpha-Stim SCS treatment. The daily means of his personal self-assessments showed dramatic improvement, including a recovery from two gaps in treatment delivery. The positive changes were noted in both the subject's anecdotal statements and structured assessments.

Results from the 16PF demonstrated notable improvements in 7 of 16 factors. These reflected an individual who was more relaxed, interested in others, and open to change. Weekly staff assessments also supported the above findings, as did the monthly assessments. While disciplinary comparisons could not be made, it was noteworthy that he received no disciplinaries during the treatment period and only 1.8 pullups per week.

Shortly after his promotion, the subject resigned as pod leader. The down-side of this decision was his failure to accept the challenges of being a responsible leader. On the up-side, the subject realized that he lacked the necessary leadership skills for the position, noted in four 16PF scales that showed negative changes. Given his lack of leadership skills, the subject's decision could be seen as positive and proactive. Specifically, his leadership style was based on a dictatorial approach, the only one he was familiar with, and it was preventing him from becoming successful in the new position.

In all probability, some of the moderator variables made a contribution to the subject's success. The two variables most likely to have had an influence, were gender of the co-author who supervised the daily treatment and the subject's belief in the treatment's effectiveness.

The substance abuse treatment program had not brought about positive change in two previous enrollments and the prognosis was unfavorable. However, once there was a brain modulation effect, the subject seemed to benefit from the treatment program's structure, new information, and opportunities to succeed.

Time in administrative segregation seemed to have the positive effect of getting the subject's attention regarding his behavior. That is, he had tested the institutions limits and experienced the result. Following his release from administrative segregation, weekly and monthly evaluations offered support, on one hand, for the belief that the subject was more interested in making changes, but also raised questions about the subject's motivation for change. His commitment to change seemed driven by a strong desire to avoid another 40 days in administrative segregation.

The Alpha-Stim SCS's influence on cortical and sub-cortical function would suggest that increasing the Alpha bandwidth did have (Continued on page 8)

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the anticipated modulating effect which resulted in the subject being more relaxed and able to use the training that he received via the drug treatment program and counseling. It is noteworthy that the subject did graduate from the treatment program at the completion of the third attempt. These results, along with low cost, minimal training for mental health staff, and only minor side-effects, suggest CES as a treatment for non-predatorial aggressive and violent behavior warrant further study.

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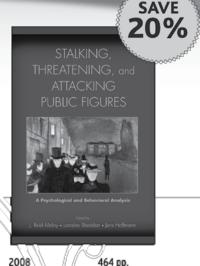
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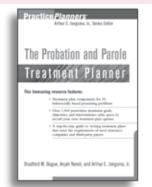
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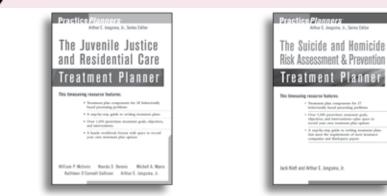
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ASSOCIATION UPDATES

LETTER TO THE EDITOR

As an active member of the International Corrections and Prisons Association (ICPA) and contibuting writer to our membership newsletter titled, *Advancing Corrections*, I thought that I would share some thoughts with regard to a wellresearched and well-written article in the July 2008, edition of *The Correctional Psychologist* by Dr. Thomas White.

In my 29 years with the Province of Ontario, Canadian correctional system and my life-long learning, I have personally been involved in research and forensic mental health work, as a correctional officer, as well as in risk management assessment, as a rehabilitation officer and Temporary Absence Coordinator. The assessment activity was with sentenced male offenders for 3 years, and during those 3 years, I spent 6 months as Temporary Absence Coordinator.

I have observed that there are problems with the psychological autopsy in other settings, but not so much in corrections. Having been to court several times myself in a variety of legal and tribunal settings, one is tested on knowledge of subject matter by the Crown Authority and defense attorneys. In my court experiences, I have observed mental health experts from other settings also having to explain their findings and opinions relating to psychological issues and here is where I have the most agreement with Dr. White, when he asserts that correctional settings offer the best environment for conducting such psychological inquiries because we have the maximum amount of control of every aspect of the psychological autopsy process.

Robert (Bob) Russell, Retired Ontario Ministry of Community Safety and Correctional Services

ITEMS OF INTEREST

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COST OF PRISON IN THE U.S. SOARS*

The steadily-growing inmate population in the U.S. is saddling cash-strapped states with soaring costs that they can ill afford, and this is coupled with an unsettling fact that prison is failing to have a clear impact on recidivism or overall crime. Budget woes are pressuring many states to consider new, cost-saving corrections policies that might have been shunned in the recent past for fear of appearing soft on crime.

According to a Pew Center on the States February 2008, report, the inmate population increased last year in 36 states and the federal prison system. It was also pointed out in the report that the average annual cost per prisoner in the U.S. was \$23,876, with Rhode Island spending the most (\$44,860) and Louisiana the least (\$13,009). California, which faces a \$16 billion shortfall, spent \$8.8 billion on corrections last year, while Texas, which has slightly more inmates, was a distant second with spending up \$3.3 billion.

The report went on to note that the U.S. incarcerates more people than any other nation (2.36 million), far ahead of more populous China, with 1.5 million people behind bars there. The report noted, too, that the U.S. also is the leader in inmate per capita (750 per 100,000), ahead of Russia (628 per 100,000) and the former Soviet blok nations, which round out the top 10.

*This excerpt was taken, with permission, from a larger report, published in February 2008, by the Pew Center on the States. For the complete report, visit pewcenter onthestates.org.

10 STEPS CORRECTIONS DIRECTORS CAN TAKE TO STRENGTHEN PERFORMANCE^{*}

As part of its assessment of overall state government performance, the Pew Center on the States conducted hundreds of hours of interviews with a wide cross section of officials from 45 state corrections departments in an effort to spotlight the most effective management practices. Across the country, innovative policy makers and corrections managers are joining forces to improve correctional systems' performance, transparency, and accountability. Here are 10 management practices currently under way in U.S. state corrections that can strengthen prison operations and, ultimately, cut crime and tame spiraling prison costs.

1. Reevaluate agency mission to include focus on reducing recidivism. Leading states have completely reevaluated the missions of their corrections departments to include recidivism reduction alongside other crucial objectives, such as keeping dangerous offenders off the streets and maintaining safe and secure institutions. 2. Develop performance measures that matter. A number of states have begun implementing the uniform performance measures developed by the Association of State Correctional Administrators, which has standardized the definitions of key performance measures. More innovative states are now using outcome measures that judge the effect of policies on inmates in order to inform funding decisions.

3. Make better use of technology systems. Cutting-edge states are using modern web-based applications that feature readily accessible key dashboard indicators to track performance and adjust management practices. As a lowercost stopgap measure, other states have boosted information access by grafting a web-based interface onto their mainframe servers.

4. Build smarter. Some states are targeting new construction for certain populations that need more intensive services, whether by building a new stand-alone facility or an addition to an existing institution. Adding to existing facilities can often be more cost-effective than building expensive new facilities—and can

help achieve other goals as well.

5. Seek alternative forms of funding. Some states are forgoing new prison construction by allocating resources to substance abuse programs, mental health treatments, and community-based services that ultimately pay for themselves in cost-avoidance. Creative collaborations with other state agencies and other jurisdictions also are streamlining services and saving scarce dollars.

6. Develop partners to cut down on medical costs. State corrections systems are using a variety of new partnerships—including contracting with public university hospitals and other entities—to provide cost-effective services, quality control oversight, and group purchasing arrangements.

7. Hold facility managers accountable. The leading correctional systems are reviewing detailed data at the facility level to monitor trends and hold key managers accountable for progress toward targeted goals. Some states are going so far as to provide financial incentives for facility performance, (Continued on page 14)

10 STEPS (Continued from page 13)

based in some cases on facilitylevel inmate recidivism rates.

8. Pay for security staff on the front end. Leading states are addressing correctional officers' compensation inequities and developing career path strategies that can save money in the long run.

9. Find nonfinancial ways to improve employee morale. Cash-strapped states are carefully examining and following up on employee morale and quality of life issues to boost performance and reduce turnover. Some states have addressed matters ranging from the immediate work environment to housing and child care.

10. Develop new leaders. Even in states with interagency leadership academies, it's important that corrections agencies develop their own programs to tackle the unique challenges of managing and motivating employees in the high-stress prison environment.

A portion of the Pew Center of the States May 2008, report on corrections, and from which the 10 steps above were extracted, follows. The complete report may be retreived by visiting pewcenter onthestates.org.

These are challenging times for state departments of corrections. Truth-in-sentencing initiatives, tougher laws for violent offenders and increased rates of incarceration for drug crimes and female lawbreakers have sent prison populations soaring. The number of prisoners nationwide has more than tripled over the past 2 decades-from 585,000 to 2.36 million – and many states are still facing projections of doubledigit percentage growth rates well into the future. North Carolina is planning for an additional 1,000 prisoners a year. Pennsylvania is projecting 1.500. Arizona is expecting 2,000, and Florida is looking at an eye-popping 3,000 extra prisoners or more annually. Overall, corrections costs have grown even faster, spiking 315% in nominal dollars since 1987.

Many states have been hardpressed to keep up with those increases. Legislatures have been right to complain that budgets for corrections have been soaring; at the same time, corrections agency directors often have even less money per prisoner to manage their growing populations. With state budgets stretched especially thin in today's volatile economic climate, the prospect of spending millions for new prisons, or, as some see it, money for programs to educate and rehabilitate bad guys, can be a tough sell. As a result, many systems are pushed to the bursting point, with institutions at 125% or 150% of capacity (Alabama is the highest at 200%) and less money than ever for corrections officers, who arguably have one of the toughest jobs in the country.

Fortunately, the stories from the cellblock aren't all gloom and doom. In fact, precisely because of these challenges, corrections directors have a rare opportunity to bring about substantial change. Prison budgets have reached a point where they can't be ignored. Many governors, and an increasing number of state legislators, are beginning to take a leadership role in addressing the problem. The tired old debate about coddling prisoners with programs versus locking them up and throwing away the key is finally taking a backseat. In its place are discussions of more pragmatic approaches for dealing with the problem underlying behind both overcrowding and soaring budgets: the increase in the number of prisoners.

By investing in forward-looking programming, training and motivating effective staff, and seeking out community and private partners for

help, many states are starting to make a determined effort at cutting recidivism. The overall size of the prison population is more under the control of the legislature. judges, and parole boards (those who make sentencing and release laws and decisions) than those who manage prisons. But by reducing the chances that a prisoner will commit another crime after release, corrections agencies are not only improving public safety, they are also helping drive down their prison populations and, with them, the bill that taxpayers must pay for prison construction and operation.

In the past 8 months, as part of its assessment of overall state government performance, the Pew Center on the States conducted hundreds of hours of interviews with a wide cross section of officials from 45 state corrections departments in an effort to spotlight the most effective management practices. What the Pew Center found is that success is not simply a product of money or other resources. Rather, it depends upon adoption of innovative solutions by corrections management, transparency, and accountability to determine what works, and a willingness to transcend fingerpointing politics to invest in those policies and practices.

In all of these areas, corrections department directors are uniquely positioned to have a real impact through management of the people, money, information, and infrastructure that comprise their agencies. They may also provide invaluable feedback to their governors and legislators to determine the states' broader law-and-order policies. Through our interviews and analysis of department documents, we identified 10 practical steps, shown above, that creative corrections executives are tak-

(Continued on page 15)

10 STEPS (Continued from page 14)

ing to improve their effectiveness. If emulated by their colleagues, these practices could go a long way toward cutting crime and the spiraling cost of prisons.

This report focused on state departments of corrections, agencies that play an extremely important role in providing public safety. 10 Steps Corrections Directors Can Take to Strengthen Performance is the result of a collaboration between two initiatives of the Pew Center on the States. In 2008, as part of its 50-state report card on state government, Grading the States, the Government Performance Project partnered with the Public Safety Performance Project to conduct an in-depth examination of the management systems undergirding corrections departments. The result is a compelling picture of how leading states are redefining the missions of their correctional systems and using performance information to make smarter policy, budget, human resource, and facilities decisions. This report also suggests ways that governors and legislatures can be better stewards of public safety, supporting their corrections executives with the tools that they need to create safer institutions and communities.

Defining a public organization's mission is one of the most important and challenging foundations to improving performance. Understandably, employees can lose focus when they are caught in a web of sometimes conflicting organizational purposes that have accumulated over years or even decades.

Nowhere is this more true than in the corrections policy field. A growing body of evidence and practice suggests that the states that are reexamining the balance between reducing recidivism, protecting the public, maintaining safe and secure institutions and other crucial objectives are getting it right.

Reentry has fast become the hottest buzzword in prison management, with nearly every state corrections department now placing some focus on the concept. However, agencies vary widely in the comprehensiveness and effectiveness of implementation. The best states in this regard have completely reevaluated the missions of departments to include recidivism reduction alongside other crucial objectives such as protecting the public and maintaining safe and secure institutions.

Michigan, for example, rolled out its Michigan Prisoner Reentry Initiative (MPRI) as a pilot project in 2003 at eight sites; the initiative is now active at 18, and will be implemented departmentwide by 2010. "In terms of significant budget savings, we can fool around with a lot of little things, but the only big savings we have left is reducing the population appropriately and closing prisons," says Michigan Department of Corrections (MDOC) Director Patricia Caruso. To that end, the initiative has funded reentry centers that collaborate with community organizations to help prisoners find job and program placement to better transition them to the outside world. It has also completely changed the way corrections officers are trained. with an increased focus on preparing prisoners for life beyond bars. The department continues to work hard at implementation with participating countries but, as a result of MPRI and other efforts, the prison population trend was a flat line last vear.

Kansas, too, has led the way in this new trend with a recent shift in its strategic plan to emphasize proactively managing inmates to reduce the likelihood of recidivism upon release. Using a comprehensive riskassessment instrument, inmates are given individualized case plans upon entering prison to ensure that they get adequate and appropriate programming. Then, a year prior to release, the department begins working with case managers, parole officers, and family members to ensure a smooth transition. Both Kansas and Michigan have received substantial assistance in their reentry efforts from the JEHT Foundation and the National Institute of Corrections.

Similarly, Georgia has developed a forward-looking 20-year "Transformational Campaign" that includes a strong emphasis on reentry. For nonviolent offenders, the Georgia Department of Corrections incorporates the use of minimum security detention centers, diversion centers (in which inmates work in the community and report back at night), and transition centers. All of these options are less expensive than traditional prisons and have additional programming to prepare offenders to rejoin the community. Eventually, Commissioner Jim Donald hopes to house 50% of offenders in these kinds of lower-cost arrangements. "We need to differentiate between those offenders we are afraid of and those we are just mad at," he savs. For that second group, he continues, "We need to see what we can do to manage that population without putting them in prison beds."

*This excerpt was taken, with permission, from a larger report, published in May 2008, by the Pew Center on the States. For the complete report, visit pewcenter onthestates.org. Robert R. Smith, Ed.D. The Correctional Psychologist Executive Editor 625 Richardson Road Fortson, GA 31808

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