

PART ONE: Narrative

Introduction

1. Agency Resources, Priority Needs, and Strategies for Determining Success

Sedgwick County Department of Corrections operates the Community Corrections Act programs in Judicial District 18. Over 2,600 clients are served annually, with an average daily census of about 1,597. The program provides the District Court with intermediate level sanctioning and supervision options in sentencing felony offenders to probation vs. prison sentences. Supervision options include intensive supervised probation with the client providing the living arrangement or residential placement in a structured program as a “last chance” option to being sentenced to prison.

Mid-way through SFY14, KDOC granted an additional funding allocation through the Justice Reinvestment Initiative (JRI). The funds provided new and expanded behavioral interventions to address mental health and substance abuse in high risk clients. The department has implemented risk-based supervision and intervention strategies to target two client groups that are at high to moderate risk to reoffend and/or fail to succeed on probation. These enhanced strategies combined with technical assistance from the Council of State Governments (CSG) and KDOC have been fully implemented and should help to increase the effectiveness of our services in the years ahead.

Our focus for improvement of outcomes and public safety is on the high risk felony offender clients assigned to the most intensive supervision level, Intensive Supervision Level (ISL) I. In the past, we had adopted a ‘containment,’ model for the Level I population, that allowed for increased supervision but limited access to resources. In light of a recent program evaluation completed by Dr. Shelley Listwan, it is recommended that we make changes in strategy to impact this population. Those changes will include referrals to cognitive skills groups, gender responsive programming, gang intervention groups as well as the Substance Abuse Program (SAP) and behavioral health programming. Through these new and expanded strategies, our goals are to reduce the number of revocations for arrests for new crimes as well as increase success of high risk clients. If we are successful, this will help us continue to meet state-mandated outcomes and move us closer to the statewide average.

In SFY14, Sedgwick County Community Corrections (SCDOC) improved successful client completions of probation by 4% over the previous year. This rate of improvement exceeded the state minimum threshold requiring at least a 3% gain to meet the annual performance standard. While this is a noteworthy accomplishment, the success rate in Sedgwick County is significantly lower than the average of the other CC agencies (53% compared to 67%). In this section, SFY14 data is provided to help identify factors impacting local outcomes for use in targeting interventions to promote public safety, increase accountability and reduce recidivism.

The following table compares local to statewide agency case closures by termination reason and supervision level from highest to lowest intensity (I to IV, respectively). Sedgwick County community corrections supervises 19.1% of the state caseload. The local probation revocation rate was 46% (448 out of 965). It is the highest in the state and represents 31% of the statewide revocation total. We experienced a 5% reduction in revocations for new felony crimes and a slight increase in revocations for new misdemeanors.

| Termination Reason By Supervision Level SFY14 | | | | | | | |
|---|---------------|---------------|-------------------|----------------|---------------|---------------|----------------|
| Risk Level | County/ State | Successful | Revoked-Condition | Revoked-Felony | Revoked-Misd. | Revoked-Total | Totals |
| ISL Level I | SG | 19 (12%)↑ | 109 (27%)↓ | 63 (32%)↓ | 27 (47%)↓ | 199 (30%)↓ | 218 (27%)↑ |
| | KS | 161 | 399 | 198 | 57 | 655 | 815 |
| II | SG | 58 (14%)↑ | 105 (30%)↑ | 41 (29%)↓ | 26 (53%)↑ | 172 (32%)↑ | 230 (24%)↑ |
| | KS | 423 | 347 | 144 | 49 | 540 | 963 |
| III | SG | 180 (19%)↑ | 36 (32%)↑ | 20 (29%)↑ | 11 (52%)↑ | 67 (33%)↑ | 247 (21%)↑ |
| | KS | 953 | 112 | 68 | 21 | 201 | 1,154 |
| IV | SG | 260 (20%)↑ | 3 (16%) - | 4 (27%) - | 3 (33%) - | 10 (21%) - | 270 (16%) - |
| | KS | 1,326 | 24 | 13 | 5 | 42 | 1,368 |
| SG Totals* | | 517 (18%)↑ | 253 (29%)↑ | 128 (30%)↓ | 67 (51%)↑ | 448 (31%)↑ | 965 (22%)↑ |
| State Totals* | | 2,863 | 882 | 423 | 132 | 1,438 | 4,300 |

*Does not include 'unsuccessful,' 'unsuccessful closed by the court,' and 'unsuccessful-remanded by the court.
(↑/-) Reflects an increase or decrease compared to SFY13.

2. Significant Differences Between Successful/Unsuccessful Probation Populations

Offenders committing new crimes while on probation adversely impact our community by creating new crime victims, increased criminal justice system costs and adverse outcomes for the agency. Sedgwick County has the highest caseload of felony offenders assigned to Community Corrections in Kansas with an average daily population (ADP) in SFY14 of 1,597. This ADP represents 19.1% of the state-wide population.

Digging deeper into the local revocation data in the following table we find encouraging data related to our population. The revocation rates for supervision levels I and II clients is 91% and 75%, respectively. These percentages reflect an overall decrease in new felony and new misdemeanor revocations compared to last year. However, we've experienced an increase in technical violations from the level I and II populations in SY14.

The 'Totals' column in the table demonstrates a fairly even distribution of client closures in each of the four supervision levels, but a huge difference in the success rates. Level IV clients have a success rate of 96%, IIIs 73%, IIs 25% and Is 9%. This data demonstrates the validity of the LSI-R risk assessment as a management tool in making risk-based assignments for supervision and service intensity for staff working with clients.

| SFY14 Termination Reason By Supervision Level | | | | | | |
|---|-----------------------------|-----------------------------|-----------------------------|---------------------------|-----------------------------|--------------|
| ISL Levels | Successful | Revoked-Condition | Revoked-Felony | Revoked-Misd. | Revoked-Total | Totals |
| I | 19 (9%) | 109 (50%) | 63 (29%) | 27 (12%) | 199 (91%) | 218 (22%) |
| II | 58 (25%) | 105 (46%) | 41 (18%) | 26 (11%) | 172 (75%) | 230 (24%) |
| III | 180 (73%) | 36 (15%) | 20 (8%) | 11 (4%) | 67 (27%) | 247 (25%) |
| IV | 260 (96%) | 3 (1%) | 4 (2%) | 3 (1%) | 10 (4%) | 270 (28%) |
| Sedgwick County Totals | 517 (54%)↑ | 253 (26%)↓ | 128 (13%)↓ | 67 (7%)↑ | 448 (46%)↓ | 965 |

Based upon these findings, supervision levels I and II clients are the target groups for additional management attention and increased interventions in SFY16.

3. Impacts of Significant Changes

The new JRI funding provided expanded behavioral health services, collaboration and co-location of staff from treatment agencies including mental health therapists and case managers, recovery specialists and program providers who conduct the Substance Abuse Program (SAP) and the *Getting it Right* curriculum.

Many of the clients assigned to the program qualify for prison sentences under Kansas sentencing guidelines. They receive probation sentences as a dispositional departure from the presumptive prison sentence in the guidelines. Ninety percent or above of the sentences are by plea agreements in the court process. This high risk population presents a variety of challenges in terms of supervision, public safety, revocations and recidivism.

4. Population Targeted for Risk Reduction

Last year, our plan included utilizing the LSI-R S/V to provide the judiciary with information intended to be helpful during the pre-sentence stage. Information contained in the documentation provided to the judiciary identified the potential risk they presented to public safety. In theory, this would have reduced the number of presumptive prison cases assigned to our program. Unfortunately, there was not complete buy-in to the process and the number of presumptive prison cases assigned to our program did not decrease as expected. As a result, we have discontinued use of the LSI-R S/V during the pre-sentence phase.

Although we will continue to target the Level II/III populations for services, moving forward, we will be focusing additional resources to more effectively target the high risk Level I population with assistance from Dr. Listwan.

Integrated Model

1. Organizational Development

Our agency is addressing Organizational Development by focusing on three components to determine how effective we are in this area of the Integrated Model. The three components for self-evaluation include: Assessment, Intervention and Measuring Performance. Evaluation of these areas is critical to ensure that we are delivering successful change to our organization.

Assessment

In 2014, the Kansas Department of Corrections (KDOC), in coordination with the Council of State Governments, applied for a Bureau of Justice Assistance (BJA) grant to provide Sedgwick County with quality assurance assistance in the area of evidence-based practices.

The Council of State Governments completed an on-site review of our practices and made recommendations related to our program. Those recommendations included gender-responsive programming, additional training for staff on EPICS, and more skill-building opportunities for clients in groups. In addition, the University of Cincinnati solicited assistance from Dr. Shelley Listwan, to provide additional program assessment and technical assistance. *(This is a gap we intend to focus on in SFY16. Currently, we only offer one gender responsive group. We plan to offer multiple offerings for gender responsive programs in SFY16.)*

Progress toward goals is monitored and shared regularly with policy makers and stakeholders to facilitate an understanding of the plan, issues and outcomes. The Community Corrections Advisory Board (CAB) receives updates at monthly meetings, and input is solicited from members and incorporated as appropriate. We continue to follow recommendations by WSU to ensure best practice and assist us in reducing revocation rates.

Intervention

Intensive Supervision Officer IIIs supervise a team of ISO Is in AISP and Residential. They are responsible for coaching their respective teams on effective case management and communication practices. They are responsible for completing case plan, motivational interviewing and LSI-R audits for the ISO Is that they supervise. In addition, they provide training on a variety of motivational interviewing topics throughout the year for their ISO team. This process allows for skill building and competency development.

Measuring Performance

In a variety of areas, our agency measures and reports performance at the macro-level for KDOC and Sedgwick County DOC. However, LSI-R data and how it relates to our success and revocation rates is of the most value to our agency. Annually, we review the LSI-R domain data, along with our partners at Wichita State University (WSU), to determine what areas we should target for the next fiscal year.

At the micro-level, we collect data for the overall organization, each specialized team and individual ISOs on that team. Specifically, we are collecting data on the three revocation types and the number of successful completions for each team and individual on that team. This data is shared with each individual and team within the agency every month. It is important for us to track this information because there must be accountability at the individual and team levels in order for us to meet the larger organizational goals.

The performance evaluation process which is completed on every employee is tied to effective case management and quality assurance. On a quarterly basis, ISOs are presented with quality assurance feedback from their respective supervisors on audio recordings of their MI skills and of LSI-R interviews as well as their case plans. This allows ISOs to make corrections and grow in overall case management skills. In addition, the supervisory team provides their ISOs with individual monthly revocation/successful completion percentages that are targeted for each specialized team. The targets for successful completion are:

Level I – 25% Level II/III – 55% Level IV – 85% SB* – 65% Re-entry** – 30%

*SB refers to Senate Bill 123 programming

** Re-entry refers to clients transitioning from Residential to ISP.

2. Collaboration

Our agency works collaboratively with a number of stakeholders in our local criminal justice system as illustrated in Attachment E. Overall, the relationships we have developed over time are mutually beneficial and allow for the sharing of resources for the clients we serve in our community.

The JRI has afforded us the opportunity to develop a relationship with staff from the Council of State Governments (CSG). As a result, CSG has received Bureau of Justice Assistance (BJA) funds to provide us with technical assistance in the area of quality assurance. We subsequently received funding to sustain a variety of positions. Our mental health team has expanded and now includes two mental health therapists, and two case managers from COMCARE, Sedgwick County's Community Mental Health Center. These specialized staff provide mental health services and case management for our offenders that suffer from mental illness. These positions are co-located in our field services and residential facilities. The team partners with ISOs to provide a variety of mental health services for our clients. The services include mental health assessments, referral for psychological evaluations, individual therapy, and case management support. This process ensures that swift referrals are being made utilizing a broad range of services. In addition, these positions play a vital role to ensure that there is a continuity of services in place to assist clients in maintaining stability throughout the duration of their probation. Finally, voucher funds have been approved to support the behavioral needs of our offenders. This money is specifically targeted to support mental health medication and mental health assessments.

Recovery specialists from Higher Ground provide recovery services and intensive support. These two specialists assist in developing a pro-social support system and provide 1-on-1 mentoring for the high risk clients as determined by the LSI-R. These individuals are also co-located at our field services and residential programs. They provide case management, facilitation of cognitive skills groups as well as SAP. They work collaboratively with ISOs to supervise this population.

Finally, a team of program providers lead cognitive skills groups to address pro-criminal attitudes and beliefs with our moderate to high-risk offenders. We have documented success with delivery of cognitive skills groups during the past year. In SFY14, 308 clients attended our groups and 71.8% were still in the program or had successfully completed probation.

As the result of the JRI collaboration with the CSG, Dr. Shelley Listwan has completed an evaluation of AISP and Residential and is in the process of providing technical assistance that will assist us in making enhancements to our programs.

We continue to foster a positive relationship with leadership in the Social Work Department at Wichita State University (WSU) and Newman University (NU). WSU and NU continue to provide us with quality interns who assist with the delivery of our cognitive skills groups. Currently, we have two Masters of Social Work interns who assist in the facilitation of our cognitive skills groups and provide other types of groups as well. In addition, interns have assisted administration in a number of specialized projects. We look forward to continuing this partnership into the future.

We continue to collaborate with the Workforce Center (WFC) to provide structured employment programming for our clients. This allows our Offender Workforce Development Specialist (OWDS) certified staff to partner with WFC specialists in providing weekly orientation for all of our unemployed intake clients. This provides an opportunity for clients to become familiar with our employment expectations and partners them with a resource to begin actively searching for employment. Once clients become registered at the WFC, it opens the door to job placement, education and the training programs that they offer within their organization.

In an effort to decrease transportation barriers for our clients, we collaborated with the administration at Ellsworth and Norton Correctional Facilities in developing our bicycle program for our clients. The inmates at Norton refurbish used bicycles that we transport back to Sedgwick County for our clients who need one. This has worked incredibly well as transportation is a barrier for a number of our clients. In addition, we collaborate with a number of our community partners in maintaining a clothes closet for indigent clients to utilize for employment interview opportunities.

3. Evidence-Based Principles

a) Assessing Actuarial Risk/Need

Currently we administer the LSI-R S/V to clients at intake to quickly assess actuarial risk in order to place clients on the appropriate supervision team as soon as they begin CC probation. We have studied the tool and its accuracy in placing clients on the right level of supervision. For the first 45 days, clients are all supervised as high risk (orientation status) to ensure public safety and account for any error made in the initial assignment. We continue to administer the full LSI-R assessment within the first 45 days of client assignment. If a client scores differently on the full LSI-R than the LSI-R S/V, the client is reassigned accordingly. We continue to do the reassessment and discharge LSI-R assessments in accordance with KDOC standards.

We utilize an audit tool that focuses on evaluating the evidence-based work ISOs are doing with their clients. This audit allows the supervisor to evaluate how the ISO's assessments are conducted and scored with fidelity. They also review the appropriate use of the LSI-R along with their ability to incorporate the high risk domains into an effective supervision plan. The supervisors meet monthly to discuss a variety of supervisory topics that include ensuring inter-rater reliability in our quality assurance work. In addition to the regular audits conducted on case plans, supervisors conduct quarterly audits to ensure that all offenders scoring very high/high in Attitudes/Orientation, Companions and Employment/Education have case plans in place that specifically address those issues.

b) Enhancing Intrinsic Motivation

Our department continues to strive to place an emphasis on ISOs and supervisors refining their Motivational Interviewing (MI) skills. ISOs and supervisors receive annual MI refresher training in order to continue to enhance their skills. In addition, quality assurance is a regular practice for all teams at AISP. Supervisors complete audiotape audits of MI interactions and LSI-R interviews between ISOs and their clients. These audits provide an opportunity for supervisors to evaluate and provide comments on the use of MI techniques and MI non-adherence. In addition, supervisors attempt to determine how the ISO is addressing target behaviors and increasing motivation in clients.

Another quality assurance task has the supervisors completing comprehensive file audits to examine the use of MI strategies and core correctional practices, as evidenced by chronological documentation describing collaboration in their day-to-day interactions with clients. Audits of LSI-R interviews assist supervisors in determining if assessments are being completed and scored with fidelity. Supervisors lead a variety of relevant trainings that provide opportunities to increase motivation in staff. *(Gap: Up to this point, we have not implemented a measurement process for determining a change in client motivation.)*

c) Targeting Interventions (risk, need, responsivity, dosage and treatment)

As previously mentioned, when a client is originally assigned to AISP, they are supervised as a Level I. This means they report to their ISO at least once per week for the first 45-60 days. During this time, the ISO is working to establish rapport and to determine the needs and risks that will be addressed in a case plan. Upon completion of the LSI-R, the results are reviewed with the client. The ISO and client collaborate on the development of a comprehensive case plan that focuses on the domains indicating the highest risk. Depending on the domains that are identified to address certain behavior, referrals for targeted services are made. These may include alcohol and drug treatment, sex offender treatment, anger management, employment/educational services, mental health services and in-house cognitive skills programming. Efforts are made to ensure that assigned tasks and referrals are established for services with the intention to occupy 40-70% of a client's time. Audits completed by supervisory staff ensure interventions are tailored to meet the client's needs and risk based on the LSI-R. Attention is focused on individual client responsivity concerns in matching up clients with appropriate services. ISOs have been trained in the EPICS model on how to conduct and structure routine office visits. *(Gap: A quality assurance tool has not been implemented to ensure the model is being consistently utilized in our case management practices.)*

In CY14, 349 clients with presumptive prison cases were assigned to our agency. This is in addition to the others that were already under supervision. This practice presents significant challenges for the program in meeting state outcomes. The clients are difficult to manage and it is very difficult to effect long lasting behavior change due to their pro-criminal attitudes, beliefs and lifestyle. We will be addressing this as a gap in our plan moving forward.

The statistics in the table below identify the challenges we are experiencing with this population. We had only **five** presumptive prison intensive supervision level (ISL) I clients successfully complete probation in SFY14. In contrast, **fifty-nine** were revoked for one of the three revocation types (i.e., condition violation, new felony and misdemeanor).

| Termination Reason by Supervision Level for Clients with a Presumptive Prison Departure* | | | | | |
|---|---------------|---------------|----------------|---------------|--------------|
| SFY14 | ISL I | ISL II | ISL III | ISL IV | TOTAL |
| Revoked - All | 59 (92.2%) | 48 (71.6%) | 17 (24.3%) | 4 (7.1%) | 128 |
| Successful - All | 5 (7.8%) | 19 (28.4%) | 53 (75.7%) | 52 (92.9%) | 129 |
| TOTAL | 64 | 67 | 70 | 56 | 257 |

*This does not include border box cases.

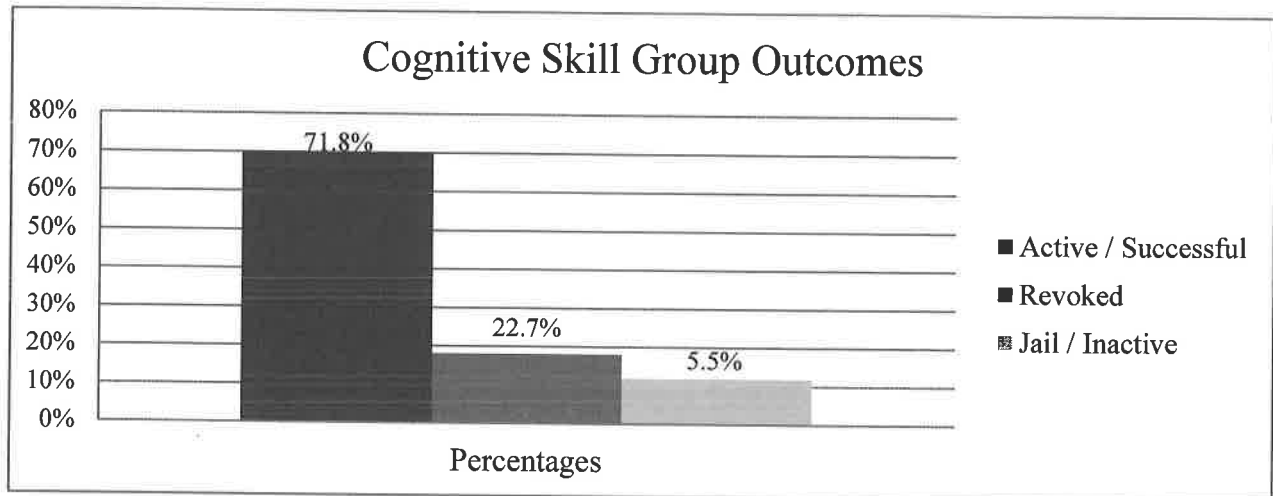
Though we have improved in identifying high risk domains and the subsequent targeting of interventions in case planning, the lack of a dedicated skills developer to focus on this area has limited our ability to fully develop and enhance ISOs' proficiency. Although staff have been trained in EPICS, EPICS tools such as CHART and RACE have not been fully integrated into our case management practices. Staff are familiar with how to structure an office visit, however, we plan to work closely with Dr. Listwan to develop a method to evaluate ISO progress in these areas.

d) Skill Training with Directed Practice

In-house program providers utilize KDOC approved curricula which are aligned with social learning theory. Recently, Dr. Listwan evaluated our programs and determined that it appears to be effective with this population. The *Getting It Right*, 5-journal cognitive skills curriculum is a core component of our programming, and multiple groups and individual sessions are held weekly for clients in the target population. During groups and individual sessions, clients are provided with opportunities to identify risky thoughts and behaviors and to learn and practice new skills through role plays, homework, and modeling pro-social behaviors. Positive behaviors and change efforts are reinforced, and goals are set to increase pro-social thinking. Upon completion of each journal, clients are presented with a certificate and asked to complete an evaluation regarding the curriculum and facilitators for quality assurance purposes. In addition, the SAP program is a resource for clients with underlying drug and alcohol issues that impact offender success. Recently, a quality assurance tool was developed and implemented to evaluate group facilitator performance. Feedback is provided to assist facilitators in becoming more effective in groups. Social learning techniques are regularly incorporated into staff meetings. Recently, Dr. Listwan evaluated and observed the facilitators that lead our cognitive skills programming and reinforced that they are delivering services that align with the social learning theory. *(Gap: Clients not attending cognitive skills programming have had limited exposure to opportunities to be exposed to role-play and skill practice. We will focus on this gap by working with Dr. Listwan in developing a plan to address this area by utilizing EPICS tools.)*

The table below illustrates how successful our clients are that have been exposed to the *Getting It Right* curriculum.

| Cognitive Skills Numbers Based on the Number of Books Completed - SFY14 | | | | | | |
|--|---------------------------|-------------------|-------------------|-------------------|-------------------|------------------|
| Status | # of Offenders per Status | 5 Books Completed | 4 Books Completed | 3 Books Completed | 2 Books Completed | 1 Book Completed |
| Active | 104 | 35 | 9 | 18 | 19 | 23 |
| Condition Violation | 37 | 1 | 3 | 4 | 8 | 21 |
| New Crime | 33 | 11 | 0 | 4 | 5 | 13 |
| Jail/Inactive | 17 | 4 | 4 | 2 | 3 | 4 |
| Successful | 117 | 59 | 13 | 8 | 12 | 25 |
| Total | 308 | 110 | 29 | 36 | 47 | 86 |



Employment programming continues to be a focus in AISP and Residential. Offender workforce development specialists provide both individual and group services to our targeted population who are chronically unemployed. Workshops are held in job preparation and employment retention, and we have partnered with the Workforce Center for increased client services.

AISP and Residential ISOs refer clients to in-house and community based interventions to address the risk and needs of their clients. For example, SCDOC's Drug Court is utilized by AISP ISOs as a cognitively based intervention for clients that have alcohol and drug related problems. Recently, a one-day snap shot of the number AISP/Residential clients involved in cognitive-based programming was completed in the department. As a result, 660 clients were receiving cognitive-based programming in either Drug Court, SB123 treatment or from our in-house cognitive skills groups.

Although staff received an EPICS (Effective Practices in Community Supervision) refresher training at our annual staff retreat, we will be working closely with Dr. Listwan to incorporate aspects of the training into case management practice.

e) Increasing Positive Reinforcement

Supervisory staff have made an effort to increase modeling of positive coworker interaction by consistently using MI techniques and the M.E.E.T. model (an interactive conflict resolution model). Additionally, we are using MI techniques on all risk level teams and utilizing our supervisory team to enhance and improve these skills through training and specific feedback during the audit process. ISOs are much more aware of the impacts of positive reinforcement and have made significant progress in recognizing and acknowledging clients' achievements. They understand and strive to use the "four positives-to-one negative" theory in their interactions with clients.

M.E.E.T. model usage is discussed during every individual monthly meeting between the supervisor and ISO. Staff are given the chance to discuss interactions and supervisors can provide feedback. At residential, staff also encourage and facilitate the model between clients who are having a conflict.

Clients successfully completing cognitive skills groups, receive a gift card or a voucher for credit toward program fees as an incentive. This is given to them along with a certificate of completion at the conclusion of the *Getting It Right* and SAP programs.

The principle of targeting interventions includes discussion of how intermediate sanctions are incorporated in response to technical violations. Our sanction grid gives ISOs a menu of targeted sanction options based on the Intensive Supervision Level of the client for use in response to violations. The violation response table contains four sanction levels that range from least to most severe. Utilization of intermediate sanctions was expanded to include recommendations for use of jail sanctions, short-term residential center beds, house arrest, electronic monitoring, curfew, increased substance use testing, and increased reporting and/or community service. Increased treatment activities to include cognitive skills groups and support group meetings will also be considered in making recommendations to the court to address technical violations. When court orders or our sanction grid requires judiciary notification, the client's progress and strengths, and any possible community-based alternative plan, is provided in each report to the Court.

f) Engaging Ongoing Support in Natural Communities

ISOs have regular contacts with employers and treatment/service providers. Frequently, information is exchanged in these interactions that help shape the direction of a case plan. Part of case planning includes identifying and developing a plan and a safety net of people who will be a support for the client in the process of changing their criminal attitudes, beliefs and behaviors. We have made a concerted effort to increase our level of interaction with family members by inviting them to accompany clients at office visits, informational letters sent to their residence and face-to-face interactions during field visits. Curfew checks for the gang, sex offender and DUI populations have provided an opportunity for law enforcement and ISOs to identify and build rapport with clients' natural support systems.

In our residential program, we work with a variety of faith-based organizations that support our drive to provide pro-social activities for our clients. These include weekly Bible study sessions and regular, in-house worship services. Additionally, a comprehensive Client Resource Manual is maintained to aid ISOs in providing appropriate referrals for services. This manual is updated annually. Up-to-date resource information on social services is also accessed through the use of the United Way resource line, 2-1-1.

We have contracted with a gang intervention specialist to provide groups to our high-risk gang population. He provides weekly groups and 1:1 mentoring to a cross section of this population who have traditionally been underserved in our program.

Employment has been identified as a major factor in the success of the offender population. In response, we have partnered with the Workforce Center to assist offenders in accessing all of the available employment resources in the community. Unemployed offenders are identified when they are assigned to our program and are required to attend an employment orientation. This employment orientation is facilitated by staff from our program and the Workforce Center. Offenders are set up with a Workforce Center account and are shown how to access various employment resources in the community. Offenders are also able to meet with Workforce Center staff on an individual basis to address specific needs and barriers to gain employment. *(Gap: Up to this point, we have not implemented a measurement process for determining the impact resources have on the goals established in the case plan.)*

g) Measuring Relevant Processes/Practices

We conduct client assessments by way of the LSI-R, case plans, intervention assessments, and collateral contacts. We have statistics and standards that are evaluated monthly to monitor performance of ISOs and progress of clients. We are able to measure change through file audits, reviewing chronological entries and progress on case plans, discussions with ISOs during individual supervision meetings and LSI-R reassessments. Outcome measures are evaluated through discharge LSI-Rs and case closure type analysis. Monthly closed cases reports have been developed which provide up-to-date revocation percentages and successful completion percentages by fiscal and calendar year. This information is distributed monthly to all staff and reported to our Advisory Board. Additionally, this information has been valuable in identifying and addressing trends.

Through risk assessment, clients assigned to Community Corrections can be reliably differentiated across 10 domains proven to predict their risk to commit further crimes. Clients successfully closed have been compared with those that were revoked to identify the differences. The analysis indicates that this does not occur by chance and that specific domains can be identified to target with interventions to increase success and reduce recidivism.

The following table shows the 10 domains and comparisons of successful and unsuccessful closures by risk levels using LSI-R assessment data. The results show that clients scored as very low and low risk in every domain are successfully completing probation more often than clients who score moderate to high risk in the same domains. The data also provides some interesting and important differences.

The greatest differences involve the following domains: Attitudes/Orientation, Education/Employment and Alcohol/Drug. For example, the data shows 82% of clients scoring very low or low in the Attitudes/Orientation domain were successful, while 78% of clients scoring moderate, high or very high were unsuccessful.

The three domains with the greatest differences identify common barriers to clients on probation in Sedgwick County and are indicated in bold in the table below. Simply stated, the clients most likely to fail on probation are those who think like criminals, use drugs and alcohol and are not employed or in school. The Attitudes/Orientation domain identifies pro-criminal attitudes. The Education/Employment domain identifies activity and skill building for self-sufficiency. The Alcohol/Drug domain identifies substance use and the impairment it represents in the life of the client. Clients with elevated risk in multiple domains including criminal history fail at the highest rates and commit new crimes while on probation.

| SFY14 | Percent Successful by LSI-R Domain and Risk Level | | | Percent Unsuccessful by LSI-R Domain and Risk Level | | |
|------------------------------------|--|---------------------------------|--------------------------------|--|---------------------------------|--------------------------------|
| LSI-R Domain | Risk Level | | Percent Point Difference | Risk Level | | Percent Point Difference |
| | Very Low and Low | Moderate, High, Very High | | Very Low and Low | Moderate, High, Very High | |
| Criminal History | 82% (116 / 142) | 48% (401 / 839) | 34 | 16% (23 / 142) | 51% (425 / 839) | 35 |
| Education / Employment | 80% (340 / 423) | 32% (177 / 558) | 48 | 19% (79 / 423) | 66% (369 / 558) | 47 |
| Financial | 78% (237 / 306) | 42% (280 / 675) | 36 | 22% (66 / 306) | 57% (382 / 675) | 35 |
| Family / Marital | 71% (326 / 458) | 37% (191 / 523) | 34 | 28% (127 / 458) | 61% (321 / 523) | 33 |
| Accommodati on | 62% (449 / 730) | 27% (68 / 251) | 35 | 37% (271 / 730) | 71% (177 / 251) | 34 |
| Leisure / Recreation | 88% (126 / 143) | 47% (391 / 838) | 41 | 12% (17 / 143) | 51% (431 / 838) | 39 |
| Companions | 82% (294 / 358) | 36% (223 / 623) | 46 | 17% (59 / 358) | 62% (389 / 623) | 45 |
| Alcohol / Drug | 69% (461 / 672) | 18% (56 / 309) | 51 | 30% (201 / 672) | 79% (247 / 309) | 49 |
| Emotional / Personal | 65% 336 / 519 | 39% 181/462 | 26 | 17% 174 / 519 | 59% 274 / 462 | 42 |
| Attitudes / Orientation | 82% (431 / 523) | 19% (86 / 458) | 63 | 16% (86 / 523) | 78% (358 / 458) | 62 |

With the advent of JRI implementation, additional services were introduced for individuals needing additional support in the areas of alcohol/drug and mental health. For both the alcohol/drug and emotional/personal domains, AISP and Residential are experiencing an increase in successful completions over the course of the last three years. The following table illustrates that these services are beginning to have a positive impact on those populations.

| SFY and LSI-R Domain | Percent Successful by LSI-R Domain and Risk Level | | | Percent Unsuccessful by LSI-R Domain and Risk Level | | |
|--------------------------|---|---------------------------|--------------------|---|---------------------------|--------------------|
| | Risk Level | | Percent Point Diff | Risk Level | | Percent Point Diff |
| | Very Low and Low | Moderate, High, Very High | | Very Low and Low | Moderate, High, Very High | |
| SFY12 Alcohol / Drug | 66% 398 / 608 | 14% 42 / 308 | 52 | 34% 210 / 608 | 86% 266 / 308 | 52 |
| SFY13 Alcohol / Drug | 65% 412 / 637 | 14% 62 / 438 | 51 | 35% 222 / 637 | 84% 368 / 438 | 49 |
| SFY14 Alcohol / Drug | 69% 461 / 672 | 18% 56 / 309 | 51 | 30% 201 / 672 | 79% 247 / 309 | 49 |
| | | | | | | |
| SFY12 Emotional/Personal | 61% 289 / 475 | 34% 151 / 441 | 27 | 39% 186 / 475 | 66% 290 / 441 | 27 |
| SFY13 Emotional/Personal | 56% 300 / 535 | 32% 174 / 540 | 24 | 43% 232 / 535 | 66% 358 / 540 | 23 |
| SFY14 Emotional/Personal | 65% 336 / 519 | 39% 181 / 462 | 26 | 17% 174 / 519 | 59% 274 / 462 | 42 |

We measure staff performance based on monthly statistics, KDOC standards, file audits and supervisory observations. Goals have been established in annual performance evaluations to emphasize the importance of evidence-based practices in relation to client success. These goals and outcome measures are reviewed with staff each quarter and supervisors provide feedback to staff on their performance. While our recidivism rate has remained constant for clients who successfully complete our program, work is ongoing in meeting the expectation outlined in K.S.A 75-52,112 that requires those agencies to increase their successful completion rate by at least 3% from the previous year. *(Gap: Although we met our annual state outcome target of 3% or more improvement in successful program completions, there remains room for improvement. Specifically, additional focus will be placed on our Level I population. Our collaboration with CSG and Dr. Shelley Listwan will provide us an opportunity to evaluate our effectiveness in the delivery of evidence-based practices with this population.)*

h) Providing Measurement Feedback

AISP collects a variety of data on a monthly and quarterly basis to review, evaluate and provide feedback to staff and community stakeholders. ISOs are provided with regular feedback on compliance with KDOC/SCDOC standards and the quality of their completed LSI-Rs, case plans and use of evidence-based practices. In addition, trends in court recommendations and discharge outcomes are analyzed and discussed. Feedback and coaching is provided to ISOs by the supervisory team during monthly supervision meetings, staffings, audits, statistical informational memos, and through the quarterly and annual performance evaluation process. Structured corrective action plans are used to address staff performance issues.

Monthly meetings are conducted with both the behavioral health and recovery specialists' teams to discuss client and program progress and to identify and troubleshoot barriers. The cognitive skills facilitators are provided with feedback by their supervisor in the areas of effective communication, teaching skills, group behavior management and interpersonal characteristics.

Data on outcomes of discharged cases by specialized team is collected by a member of the supervisory staff. This information is provided monthly to the community corrections administrator and director. The administrator then shares revocation and success rates with team supervisors who then provide information and feedback to their individual teams. Data is also provided to WSU throughout the year for analysis. Evaluations from WSU provide periodic updates on the analyses to staff and the Community Corrections Advisory Board (CAB).

As a result of the JRI funding, we are collecting data on the interventions provided by our mental health and recovery teams, as well as the program providers conducting cognitive skills and the SAP curriculum. *(Gap: We would benefit from the ability to quickly access real-time data from TOADS. Limited analysis of data in specific areas include reduction in risk level upon client discharge, successful targeting and outcomes of case plans, and the impact of cognitive skills programming.)*

PART TWO: Current and New Resources

Please see Attachment C.

PART THREE: Agency Programs

Management and Organizational Capabilities

The Community Corrections Advisory Board (CAB) convenes once a month to discuss agenda and action items developed by the director that are related to the Comprehensive Plan. The CAB is the team that has helped to develop and support this initiative for our agency. The director leads discussion on agenda items, answers questions and solicits input about the direction of our agency.

The CAB monitors the Comprehensive Plan throughout the year when the director shares quarterly Risk Reduction Initiative information regarding outcomes. This encompasses progress on all the goals contained in the Comprehensive Plan. However, the most important focus is data related to the legislative target of reducing our number of revocations by 3% compared to the previous fiscal year. In addition, information is also shared about how our specialized teams are performing in relation to our agency goal. Our progress is shared with other community stakeholders to help facilitate their understanding of our program and goals as they relate to other areas of our local criminal justice system.

Typically, any type of corrective action to be considered is placed on the CAB agenda for discussion and feedback. We are fortunate to have a skilled, engaged and seasoned advisory board. When members want additional information or have concerns they drive corrective action. The departmental leadership responds quickly to any CAB concern and attempts to resolve it.

Sedgwick County Department of Corrections (SCDOC) maintains and annually updates a Strategic Plan to guide management and inform the public of the value of our services. The Strategic Plan includes key initiatives, goals, objectives performance measures and costs for services. The document is available for the public on the county website.

Recently, SCDOC centralized business processes and expanded staff training opportunities. The new process streamlines business functions and provides more time for program staff to focus on services and quality assurance.

The SCDOC Training Division is committed to providing quality evidence-based training in a variety of areas for all employees. A training catalogue is created annually for employees to enroll in classes that focus on professional development. For example, an ISO Academy was created to train new staff in a variety of areas to assist them in being successful in the position. The Training Division's role is to meet the training needs for those working with offenders to enhance knowledge and effectiveness in the delivery of evidence-based techniques and practices. Recently, training has been expanded to focus on developing supervisor skills in measuring quality assurance and guiding staff development.

Monitoring and Evaluation

The Community Corrections Advisory Board (CAB) plays a critical role in the discussion of the plan and the areas that need to be addressed to promote public safety in our community. Every month, the Department of Corrections Director, Community Corrections administrator and Residential Center manager provide the CAB with updates regarding programming and progress on the goals contained in the Comprehensive Plan. This data is collected monthly and documented in the quarterly reports that are shared with KDOC, CAB and the employees in our agency.

Typically, any type of corrective action to be considered is placed on the agenda for discussion and feedback. We have an active and diverse advisory board that provides us with direction on all Comprehensive Plan corrective action issues. The outcome of these reviews is documented in the minutes of our meeting and the information is disseminated to staff at AISP, residential and KDOC.

Goals for Risk Reduction Sustainability for AISP and Residential

Goal #1: To improve the rate of successful program completions in SFY16 by at least 3% from the previous year.

Objective #1: In SFY16, to increase by 3% the successful completion rate of probation sentences as compared to SFY15. Target Date: 6/30/2016

Objective #2: In SFY16, to reduce the number of new felony and misdemeanor revocations by 15%. Target Date: 6/30/2016

Goal #2: To increase utilization of specialized interventions in an effort to improve offender success on probation.

Objective #1: In SFY16, the cognitive skills program will achieve a 70% successful completion rate for all clients who begin the program. Target Date: 06/30/2016

Objective #2: In SFY16, 70% of the unemployed clients identified at intake will successfully complete our employment workshop. Target Date: 6/30/2016

Objective #3: To develop a method for tracking referrals made for Level I clients to in-house interventions to ensure that appropriate programs are being fully utilized for this high risk population. Target Date: 9/30/2015

Objective #4: To ensure that all groups are gender-specific in an effort to be responsive to the needs of each population. Target Date: 09/30/2015

Objective #5: To document statistical data related to referrals and outcomes associated with offenders who receive services from the behavioral intervention teams and gang intervention specialist. Target Date: 6/30/2016

Goal #3: To fully implement EPICS training tools into case management practices in an effort to improve client outcomes.

Objective #1: All staff will receive EPICS training from Dr. Listwan. Target Date: 11/30/2015

Objective #2: All supervisory staff will be trained on providing feedback to each ISO related to the use of the EPICS tools and case management practices. Target Date: 11/30/2015

Agency Identification (Main Office)

Name: Sedgwick County Department of Corrections

Address: 700 S. Hydraulic

City: Wichita, KS

Zip Code: 67211

Telephone: (316) 660-9750

Fax: (316) 660-1670

E-Mail: mmasters@sedgwick.gov

Host County:

Agency Director

Name: Mark Masterson

Title:
Director

Telephone: (316) 660-7014

Ext.:

Address

(If Different From Agency)

Cell Phone: (316) 644-6437

E-Mail: mmasters@sedgwick.gov

Satellite Offices (Please Attach Additional Sheets As Necessary To List All Offices)

| S-1 | S-2 | S-3 |
|---|---|--|
| <input type="checkbox"/> Residential <input checked="" type="checkbox"/> AISP | <input checked="" type="checkbox"/> Residential <input type="checkbox"/> AISP | <input type="checkbox"/> Residential <input type="checkbox"/> AISP |
| Address: 905 N. Main Wichita, KS 67203 Phone: (316) 660-7003 Fax: (316) 383-7380 No. Of Staff: | Address: 622 E. Central / 623 E. Elm Wichita, KS 67202 Phone: (316) 660-9500 Fax: (316) 383-7955 No. Of Staff: | Address: Phone: Fax: No. Of Staff: |

Grant Period: July 1, 2015 Through June 30, 2016

Projected Funding From Other Sources (all including county funds).

NOTE: County Funding for CY15

Source: Sedgwick County Drug Court Amount: \$648,157

Source: Sedgwick County AISP Amount: \$405,000

Source: Sedgwick County Adult Residential Amount: \$224,873

Source: _____ Amount: \$ _____

Source: _____ Amount: \$ _____

Source: _____ Amount: \$ _____

Source: _____ Amount: \$ _____

Source: _____ Amount: \$ _____

ADVISORY/GOVERNING BOARD MEMBERSHIP

Instructions: Provide all of the requested information for each advisory/governing board member who will serve during the fiscal year(s). KSA 75-5297 governs advisory board membership, qualifications, and appointment provisions. Please use an asterisk (*) to identify the Chairperson of the Advisory/Governing Board. In the "Ethnicity" column, enter the most accurate, e.g., American Indian or Alaskan Native (I), Asian or Pacific Islander (A), Black (B), Hispanic (H), White (W).

| Appointed By | REPRESENTING | NAME | TITLE PROFESSION | GENDER (M/F) | ETHNICITY | RECENT APPT. DATE | APPT. EXPIRATION DATE |
|----------------------|-----------------|-----------------------------|-----------------------|-----------------|-----------|-------------------------|-----------------------------|
| County Commission | General | Kerrie Platt (Secretary) | Citizen | F | W | 01/08/14 | 01/08/16 |
| County Commission | General | Kenya Cox | Citizen | F | B | 12/04/13 | 12/03/15 |
| County Commission | General | Ignacio Ayala | Citizen | M | H | 09/04/13 | 09/03/15 |
| County Commission | General | Kelli Grant | Citizen | F | W | 03/11/15 | 03/12/17 |
| City Council | General | Deanna Carrithers | Citizen | F | B | 08/06/13 | 06/30/15 |
| City Council | General | Seth Rundle | Citizen | M | W | 09/17/13 | 06/30/15 |
| City Council | General | Mary San Martin | Treatment Program Mgr | F | W | 07/09/13 | 06/30/15 |
| Chief of Police | Law Enforcement | Nelson Mosley | Chief of Police | M | B | 07/01/13 | 06/30/15 |
| Administrative Judge | Judiciary | Ben Burgess | Honorable Judge | M | W | 07/01/13 | 06/30/15 |
| Sheriff | Law Enforcement | Jeffrey Easter | Sheriff | M | W | 05/21/13 | 05/31/15 |
| Education | Education | Jodie Beeson | University Professor | F | W | 05/15/13 | 08/30/15 |
| Probation* | Judiciary | Peter Shay (Chair) | Court Services | M | W | 07/01/13 | 06/30/15 |
| District Attorney | Prosecution | Ann Swegle (Vice Chair) | Deputy DA | F | W | 01/01/15 | 12/31/17 |

**Current and New Resources
Adult Intensive Supervision**

| Services | Enter 'yes', 'no' or 'more needed' if Currently Available | Enter 'yes', 'no' or 'more needed' if New In FY2014 | Comments |
|---|--|--|--|
| Agency Supervision Fee | | | \$200 first 24 months, \$100 each year thereafter |
| Child Care Assistance | No | | |
| Clothing (work related or other) | Yes | | |
| Cognitive Behavioral Interventions | Yes | | |
| Community Service Work | More needed | | |
| Courtesy Transfer Fee | | | |
| DNA Cost | Yes | | |
| Drug Confirmation Tests | Yes | | \$30 fee charged to client |
| Drug Screens | Yes | | \$7.50 per sample |
| Educational Services | Yes | | |
| Electronic Monitoring | Yes | | \$7.50 per day |
| Employment Services | Yes | | |
| Food | No | | |
| Housing Assistance | No | | |
| Medication | Yes | | Utilize JRI voucher funds for this service. |
| Mental Health Counseling | Yes | | |
| Mental Health Evaluations | Yes | | |
| Mentoring | Yes | | Our Recovery Specialists provide this service. |
| Sex Offender Evaluations | No | | |
| Sex Offender Treatment | No | | |
| Substance Abuse Counseling | No | | |
| Substance Abuse Evaluations | No | | |
| Transportation Assistance | Yes | Limited bikes available | \$1.25 per bus pass |
| Utilities (heat, electric, phone, water) | No | | |
| | | | |
| OTHER : | | | |
| Substance Abuse Treatment for offenders sentenced under SB123 and funded by the Kansas Sentencing Commission | Yes | Yes | |

**Current and New Resources
Adult Residential**

| Services | Enter 'yes', 'no' or 'more needed' if Currently Available | Enter 'yes', 'no' or 'more needed' if New In FY2014 | Comments |
|--|--|--|--|
| Agency Supervision Fee | | | |
| Child Care Assistance | No | | |
| Clothing (work related or other) | No | | |
| Cognitive Behavioral Interventions | Yes | | |
| Community Service Work | Yes | | |
| Courtesy Transfer Fee | | | |
| DNA Cost | Yes | | |
| Drug Confirmation Tests | Yes | | |
| Drug Screens | Yes | | \$1.50/day |
| Educational Services | Yes | | |
| Electronic Monitoring | No | | |
| Employment Services | Yes | | |
| Food | No | | |
| Housing Assistance | No | | |
| Medication | Yes | | Utilize JRI voucher funds for this service. |
| Mental Health Counseling | Yes | | |
| Mental Health Evaluations | Yes | | |
| Mentoring | Yes | | Our Recovery Specialists provide this service. |
| Room and Board | Yes | | 150% of hourly wage per day |
| Sex Offender Evaluations | No | | |
| Sex Offender Treatment | No | | |
| Substance Abuse Counseling | No | | |
| Substance Abuse Evaluations | No | | |
| Transportation Assistance | Yes | Limited bikes available | \$1.25 per bus pass |
| Utilities (heat, electric, phone, water) | No | | |
| OTHER : | | | |
| Substance Abuse Treatment for offenders sentenced under SB123 and funded by the Kansas Sentencing Commission | Yes | | |

Curriculum Review Form

NAME OF CURRICULUM: _____

Date Reviewed _____ Approved _____ Disapproved _____

How does the curriculum assist adult probationers in developing and using internal controls to address dynamic risk and need areas so that the probationer is less likely to engage in criminal behavior?

KDOC Comments:

Select the LSI-R[®] domains being targeted by delivering this training to staff in risk reduction and intervention.

- | | |
|---|--|
| <input type="checkbox"/> Criminal History <input type="checkbox"/> Emotional / Personal <input type="checkbox"/> Financial <input type="checkbox"/> Accommodation <input type="checkbox"/> Companions | <input type="checkbox"/> Education / Employment <input type="checkbox"/> Attitudes / Orientation <input type="checkbox"/> Family / Marital <input type="checkbox"/> Leisure / Recreation <input type="checkbox"/> Alcohol / Drug |
|---|--|

KDOC Comments:

What research led the applicant to implement this training as a component of their Comprehensive Plan?

KDOC Comments:

How will the applicant measure the impact of the training on the agency and/or adult probationers?

KDOC Comments:

How will this training initiative be utilized within the Comprehensive Plan?

KDOC Comments:

Is this curriculum appropriate for correctional personnel to deliver? Please include a discussion of appropriateness for use with probationers, trainer credentials, and duties that this training will allow officers to perform.

KDOC Comments:

**Collaborative Partnerships
Adult Intensive Supervision**

| Agency Partnerships | Gap: YES | Gap: NO | Comment |
|---|---------------------|--------------------|---|
| ADAPT | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Addiction Counseling Services | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Addiction Specialist | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Alternative Programs | | X | GPS services provided to clients and regular contact to verify compliance. |
| American Red Cross | X | | Provide financial assistance to clients. They have a limited amount of funds in which to assist clients. |
| Anthony Family Shelter | X | | Provide shelter for clients. They have a limited capacity. |
| Arrow | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Behavioral Health Center/Center for Change/Road to Recovery | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Breakthrough Club | | X | Case management for mentally ill clients. |
| Catholic Charities Counseling | | X | Provide counseling services using cognitive thinking and behavior skills with clients. |
| Catholic Charities Harbor House | | X | Good working relationship. Utilize services when clients are identified as victims of domestic violence and need resources. |
| Child Care Association | | X | Provides services and cognitive thinking and behavior skills counseling to clients. |
| Christian Counseling Center of Wichita | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| COMCARE | | X | Offers in-house behavioral health services for our clients. |
| Correctional Counseling of Kansas | | X | DV and Theft classes, no longer offering BIP |
| Correctional Facilities: Ellsworth and Norton | | X | They provide us with bicycles that support our clients with transportation. |
| Counseling Inc. | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Court Services | X | | They are represented on our Advisory Board, but we need their collaborative support in fully implementing the LSI-R S/V. |

| | | | |
|--|---|---|--|
| Criminal Court Judges | X | | We have a solid rapport with the judiciary, but need their support to fully support the LSI-R S/V pre-sentence-presumptive prison cases. |
| Department for Children and Families (DCF) | | X | Provide financial, food stamps and medical cards to clients. |
| Derby Learning Center | | X | Education services provided to clients. |
| Dress for Success | X | | Provide clothing for clients. Limited participation. |
| Dr. Brodsky | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Dr. Nystrom | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Family Consultation Services | | X | Provide counseling services using cognitive thinking and behavior skills with clients. |
| Good Shepherd | | X | Inpatient mental health assessments for clients. |
| Guadalupe Health Clinic | | X | Health care services for clients. |
| Haysville Mental Health Center | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Higher Ground | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Holistic Psychiatric Services | | X | Provides counseling services. |
| Insight Counseling Center | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Integrity Assessments | | X | Regular contact with treatment provider. |
| Inter-Faith Inn | X | | Provide shelter for clients. Limited capacity. |
| Investigation LLC | X | | Polygraph services for clients. Not all sex offender clients are able to afford this service. |
| Kansas Children's Service League | | X | Provide counseling services using cognitive thinking and behavior skills with clients. |
| Ketch | | X | Job coaching, life skills for disabled clients. |
| Knox Center | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Mental Health Association | | X | Offers case management. |
| Mills Family Counseling | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Miracles House | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Mirror Inc. | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| National Toxicology Laboratories | X | | Drug testing for clients. They are unable to test for K-2. |
| Options | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |

| | | | |
|--|---|---|---|
| Prairie View | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Preferred Family Healthcare | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Premier Monitoring | | X | GPS services provided to clients and regular contact to verify compliance. |
| Recovery Concepts | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Recovery Services Council | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Recovery Unlimited | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Salvation Army | | X | Ongoing working relationship. Provides monetary assistance for clients to secure identification. |
| Salvation Army Homeless Shelter | X | | Provide shelter for clients. Limited capacity. |
| Sedgwick County Offender Registration Office | | X | Work collaboratively to keep most up to date information on all offenders required to register. Have partnered to verify sex offenders residence in the field (sex offender compliance checks). |
| Sedgwick County Sheriff's Department | | X | Partnership to make contact with DUI and sex offenders in their homes to assure compliance with court orders and promote public safety. |
| Stop Program | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| The Doan Center for Counseling | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| The Lords Diner | X | | Provide evening meal to clients. Only one location in the downtown area. |
| Towne East & West Learning Center | | X | Education services provided to clients. |
| Union Rescue Mission | X | | Provide shelter to clients. Limited capacity |
| Urban League | | X | Provides Gang Intervention class. |
| VA | | X | Provides assistance to veterans. |
| Valley Hope | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Wichita Area Oxford Houses | | X | Good working relationship. Supportive placement for clients living a drug free lifestyle. |
| Wichita Area Sexual Assault Center (WASAC) | | X | Good working relationship. Referrals are made when clients report being victims of sexual assault currently or in the past. WASAC provides educational group to clients entering Adult Residential. |
| Wichita Area Technical College | | X | Education services provided to clients. |

| | | | |
|--|--|---|---|
| Wichita Parole/Re-entry | | X | Collaboration in cases requiring dual supervision. Also partner to obtain identification for clients. |
| Wichita Police Dept. Gang Unit | | X | Good working relationship with updated information on gangs and activity. Partner for monthly curfew checks to monitor compliance. |
| Word of Life | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Wichita/Sedgwick County Domestic Violence/Sexual Assault Coalition | | X | Sedgwick County Department of Corrections staff member serves on the Coalition, meeting monthly to discuss issues related to DV, SA and services available to offenders and victims. |
| Wichita State University | | X | Masters level students conduct cognitive skills groups with clients. |
| Wichita State University – Consultation | | X | Good partnership with Dr. Craig-Moreland at WSU who provides analysis and consultation services and periodic reports including our annual program evaluation. |
| Wichita State University Department of Social Work | | X | Sedgwick County Department of Corrections serves as a field practicum site for graduate students, allowing for increased services to clients, while providing a learning experience for students. A SCDOC staff member serves on the practicum advisory board, which meets quarterly. |
| Wichita Technical Institute | | X | Education services provided for clients. |
| Wichita Treatment Center | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| Women's Recovery Center | | X | Regular contact with treatment provider that uses cognitive thinking and behavior skills. |
| YWCA Women's Crisis Center/Safehouse | | X | Ongoing working relationship. Utilize services to assist clients who are identified as victims of domestic violence and need resources. Also provides information to staff on domestic violence resources. |

**Collaborative Partnerships
Adult Residential**

| Agency Partnerships | Gap: YES | Gap: NO | Comment |
|---|---------------------|--------------------|--|
| 7 th Direction | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| A Clear Direction | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| ARROW | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Center for Health and Wellness | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Center for Health and Wellness | | X | Clients access for health care. |
| ComCare | | X | Clients can access mental health groups and medications. |
| ComCare ATS | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Consumer Credit Counseling Services | | X | Although no EBP are used, they provide education in financial matters. |
| Correctional Counseling of Kansas | | X | Anger management or domestic violence counseling. ISOs have regular contact. |
| Derby Recovery Center | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Episcopal Social Services | | X | Clients access for assistance with birth certificates. |
| Goodwill | | X | Educational services. |
| Grace Med | | X | Clients access for health care. |
| Health Department | | X | Clients attend class to get a food handlers card. |
| Higher Ground | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Hunter Health | | X | Clients access for health care. |
| Indian Addiction Treatment Services/Recovery concepts | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| KANSEL | | X | Educational services. |
| Medical Service Bureau | | X | Clients access for assistance with medications. |
| Mental Health Association | | X | Clients can access mental health groups and medications. |
| Mother Mary Anne Clinic | | X | Clients access for health care. |
| New Dimension | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Options | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Parole Office | | X | Clients access for documentation for IDs. |

**Collaborative Partnerships
Adult Residential**

| Agency Partnerships | Gap: YES | Gap: NO | Comment |
|---|---------------------|--------------------|--|
| Preferred Family Health Care | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Recovery Unlimited | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| SACK | | X | Treatment Center – ISOs have regular contact to verify how their client is doing in treatment. |
| Salvation Army | | X | Clients access for assistance with IDs or birth certificates or clothing. |
| Urban League | | X | Educational services. |
| Veterans Affairs Medical and Regional Office Center | | X | If eligible, clients can access medical assistance and mental health treatment. |
| Voc Rehab | X | | If eligible, clients can access assistance in employment. |
| Workforce Center (Wichita) | | X | Although no EBP are used, they provide a lot of assistance and education in job services. |

2015 Community Corrections Comprehensive Plan Signatory Approval Forms

Agency Name: Sedgwick County Department of Corrections

Agency Director: Mark Masterson

My signature certifies that I did assist in the development, completion and review of the agency's Comprehensive Plan, attached hereto. I further certify that:

- The plan complies with the written directions sent to me by the Kansas Department of Corrections (KDOC).
- The plan complies with applicable Kansas Statutes (KSA), and Kansas Administrative Regulations (KAR).
- The agency is willing to actively plan for implementing the consistent set of statewide policies to help guide the supervision and revocation process of probationers on Community Corrections Supervision.
- The agency will provide complete and accurate data to the KDOC regarding agency operations and outcomes.

Furthermore, my signature certifies that acceptance of state grant funds awarded by the KDOC for the grant period July 1, 2015 through June 30, 2016 indicates that as the "Grantee" I acknowledge and agree to comply with all the conditions outlined below:

1. Utilize grant funds for the development, implementation, operation and improvement of community correctional services pursuant to K.S.A. 75-5291 through 75-52,113 and amendments thereto, as submitted in the attached comprehensive plan funding application.
2. Assume the authority and responsibility of funds received through KDOC and ensure compliance with all applicable Federal and State laws, Regulations and KDOC Financial Rules, Guidelines and Reporting Instructions. Any and all costs associated with non-compliance under this section shall be the responsibility of the Host County.
3. Acknowledge that the use of state grants funds is prohibited for out-of-state travel and training. Any and all costs associated with non-compliance under this section shall be the responsibility of the Host County.
4. Acknowledge that if, in the judgment of the Secretary of the Department of Corrections, sufficient funds are not appropriated to fully continue the terms of this agreement, KDOC may reduce the amount of the grant award.
5. Comply with KDOC Community Corrections standards, policies and procedures.
6. Follow all applicable state and federal laws related to confidentiality of client information. This provision is not intended to hinder the sharing of information where necessary to effect delivery of services when undertaken in compliance with applicable laws.

7. Neither assume nor accept any liability for the actions or failures to act, either professionally or otherwise, of KDOC, its employees and/or its contractual agents.
8. Not consider employees or agents of the Grantee as employees or agents of KDOC. Grantee accepts full responsibility for payment of unemployment insurance, workers compensation and social security, as well as all income tax deductions and any other taxes or payroll deductions required by law for its employees or agents in work authorized by the comprehensive plan.
9. Submit problems or issues regarding the terms of this grant in writing to the KDOC Deputy Secretary of Community and Field Services for final review and resolution.
10. If any provision of this grant violates any statute or rule of law of the State of Kansas, it is considered modified to conform to that statute or rule of law.


Mark Masterson, Director

4-2-15
Date


Peter Shay, Advisory/Governing Board Chairperson

4-9-15
Date

Address: 525 N. Main, Wichita, KS 67203

Phone: (316) 660-5524

Fax: N/A

Email: pshay@dc18.org

Richard Ranzau, Board of County Commissioners Chairperson

Date


Address: 525 N. Main, 3rd Floor, Wichita, KS 67203

Phone: (316) 660-9300

Fax: (316) 383-8275

Email: rranzau@sedgwick.gov

Approved As To For


Jennifer Magaña
Deputy County Counsel

Multi-county agencies shall obtain the signature of the County Commission Chairperson of EACH county, unless either of the following is true:

- ✓ The counties have entered into an **Inter-local Agreement** that specifically states that the host county commission chairperson can sign for all counties. If so, only the signature of the host county commission chairperson is necessary.
- ✓ The counties have entered into an Inter-local Agreement that bestows the counties' governing authority onto the community corrections advisory board. If so, no county commission chairperson signature is required.

Please use the following page if additional County Commission Chairperson signatures are required for your agency

Board of County Commissioners Chairperson

Date

County: _____

Board of County Commissioners Chairperson

Date

County: _____

Board of County Commissioners Chairperson

Date

County: _____

Board of County Commissioners Chairperson

Date

County: _____

Board of County Commissioners Chairperson

Date

County: _____

Board of County Commissioners Chairperson

Date

County: _____

Board of County Commissioners Chairperson

Date

Approved Curricula

The Capabilities Awareness Profile (CAP); Prairie View, Inc.

Clinical Guidelines for Implementing Relapse Prevention Therapy; G. Alan Marlatt, PhD., George A. Parks, PhD., and Katie Witkiewitz, PhC., Addictive Behaviors Research Center, Department of Psychology, University of Washington, Seattle, WA.

Creating a Process of Change for Men Who Batter: The Duluth Curriculum

Cross Roads; National Curriculum & Training Institute, Inc (NCTI)

Eight Stages of Learning Motivational Interviewing; William R. Miller, PhD. and Theresa Moyers, PhD.

Evidence-Based Practices in Corrections and Motivational Interviewing; The Carey Group

Financial Peace University; Dave Ramsey

Getting It Right: Contributing to the Community; The Change Companies

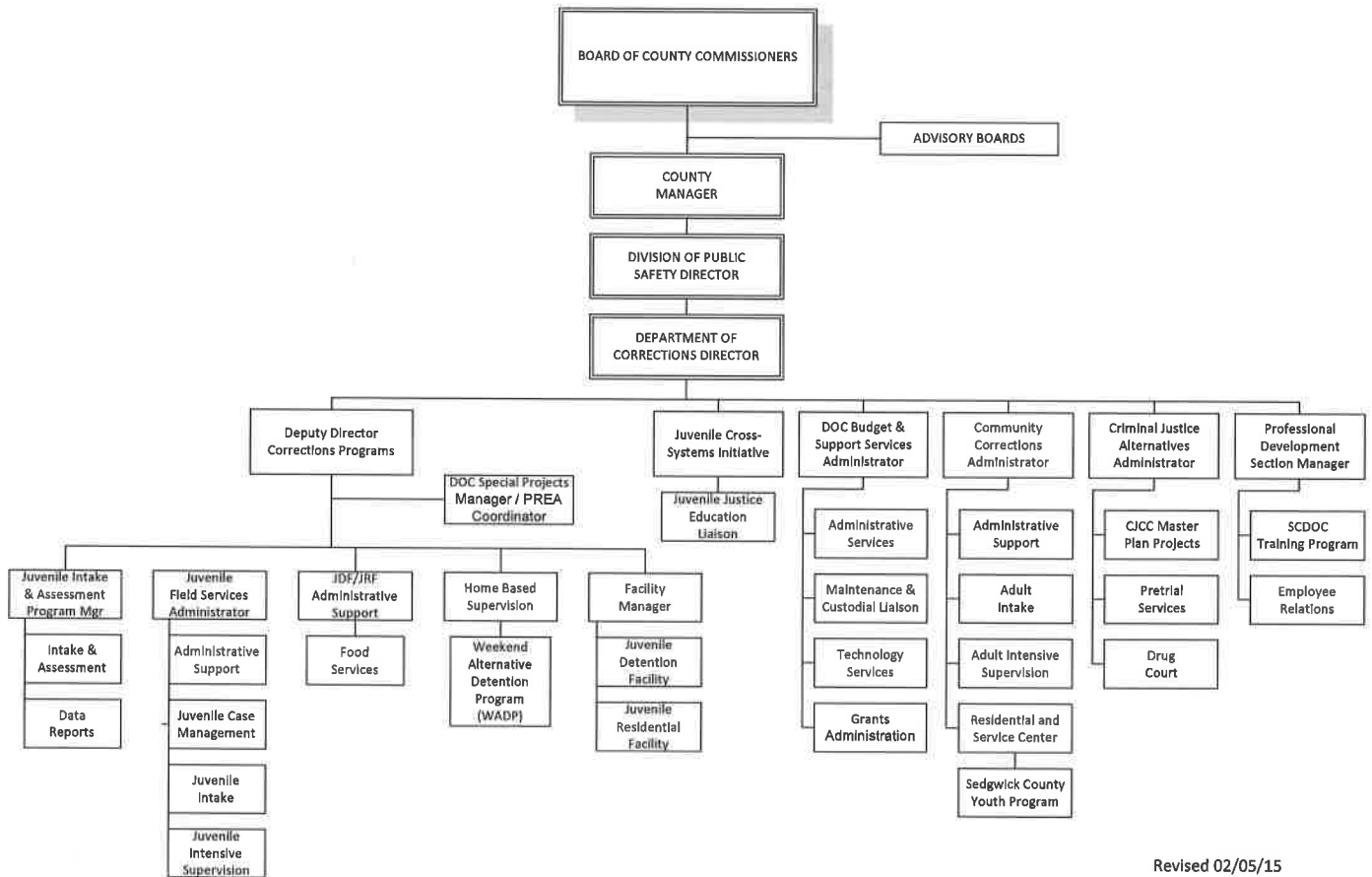
Good Days Ahead: The Multimedia Program for Cognitive Therapy; Jessie H. Wright, M.D., PhD., Andrew S. Wright, M.D. and Aaron T. Beck, M.D.

Thinking for a Change, National Institute of Corrections

TruThought; Truthought™, LLC

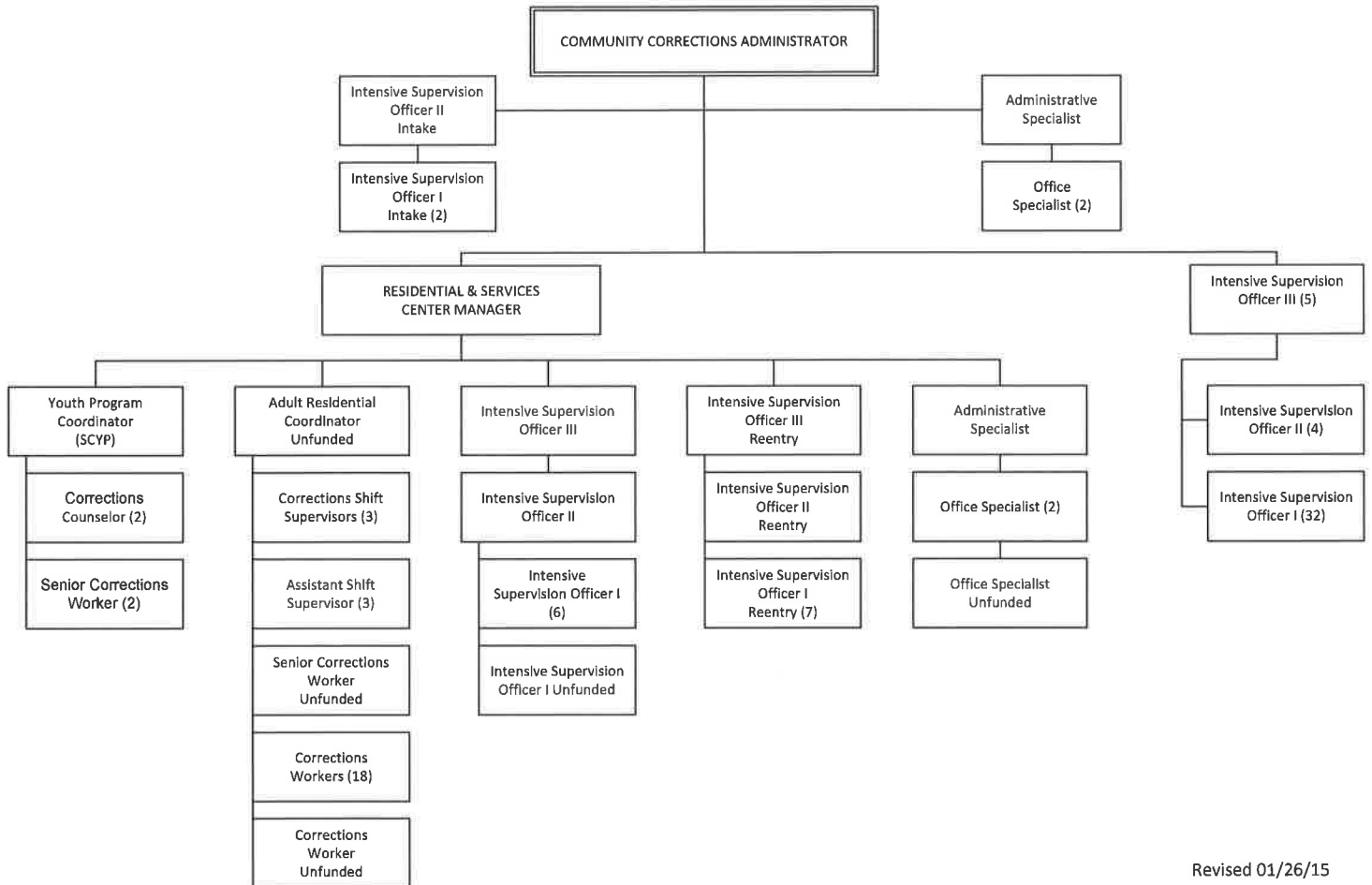
Courage to Change; The Change Companies

SEDGWICK COUNTY DEPARTMENT OF CORRECTIONS ORGANIZATIONAL CHART 2015



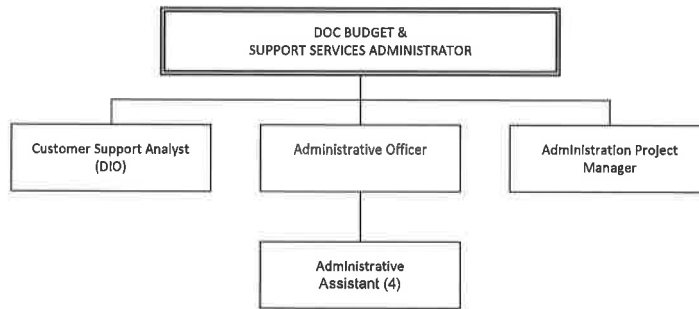
Revised 02/05/15

**SEDGWICK COUNTY DEPARTMENT OF CORRECTIONS
COMMUNITY CORRECTIONS DIVISION
ORGANIZATIONAL CHART
2015**



Revised 01/26/15

**SEDGWICK COUNTY DEPARTMENT OF CORRECTIONS
DOC ADMINISTRATION & OPERATIONS
ORGANIZATIONAL CHART
2015**



Revised 01/26/15