

Virginia Department of Corrections



Statewide Community-Based Corrections System

Status Report FY2017

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In the past year we have continued to transform the agency towards the goal of creating a healing, rewarding and motivating high performance learning organization. The Department of Corrections (DOC) has achieved significant accomplishments over the past year:

- DOC's recidivism rate is 23.4% ranking it the lowest in the country among the 45 other states that measure recidivism similarly.
- DOC continues to improve the consistency of its probation and parole districts through the implementation of Operational Assessment Reviews conducted by teams of staff from other probation and parole districts. The Review looks at compliance with policies, contacts with offenders, case-plan driven supervision and use of evidence based practices to reduce recidivism.
- DOC continues to focus major efforts on reducing the number of homeless releases from prison. DOC continues to collaborate on community housing placements for offenders with health care needs through regular contact with local social services agencies, the Department of Aging and Rehabilitative Services, Department of Medical Assistance, local community services boards, local non-profit organizations, nursing homes and housing providers.
- DOC's sex offender containment model of probation supervision has operated effectively and provided intensive GPS supervision, polygraph examinations and treatment services to sex offenders, including supervision of Sexually Violent Predator conditional release cases from the Virginia Center for Behavioral Rehabilitation on behalf of the Department of Behavioral Health and Disability Services.
- DOC has expanded the use of evidence based interventions with medium to high risk probation cases by training and coaching staff on the effective use of core correctional practices using the EPICS II research based model, with 94% of staff trained thus far.
- DOC has partnered with George Mason University's Center for Advancing Correctional Excellence and implemented the SOARING project that expanded from 3 pilot locations to 9 additional probation and parole districts. SOARING uses eLearning and supervisor observation and coaching to increase probation officer effectiveness in using risk and needs assessment, case planning and interactions with offenders to motivate and support change.
- DOC continues to operate "Learning Teams" in all community corrections units whereby staff meet together in small groups twice per month and utilize dialogue practices to resolve issues, advance team work, create improved operations and improve their intervention skills with offenders.
- The DOC transformed its detention and diversion centers to bring them in line with evidence based practices. The Community Corrections Alternative Program (CCAP) provides improved services for offenders and better meets the needs of sentencing courts. The new program is driven by the risks and needs for the offender and is performance based, with programs based on research that produces recidivism reductions. These changes were effective May 1, 2017.

- Offenders discharging prison are provided with brief cognitive-behavioral peer support groups to follow up prison treatment and provide guidance immediately upon reentry.
- DOC continues to operate the Federal Fidelity Bonding Program for all criminal justice offenders in Virginia to assist with employability.
- DOC probation and parole chiefs actively participated as co-conveners of Local Reentry Councils in most localities in Virginia in partnership with the Virginia Department of Social Services.
- The DOC has a leading role in the Secretary of Public Safety's Evidence Based Decision Making (EBDM) initiative and focuses on building collaborations with key stakeholders such as the courts, prosecutor, local jail, and victim witness, local and state corrections. The planning is directed at using data to make system changes and improve criminal justice outcomes.
- In July 2017 the General Assembly fully funded 20 mental health specialists and 6 cognitive counselors for the probation and parole districts. The positions are needed to prevent deterioration of behavior by persons with mental illness and to pilot cognitive interventions at the districts.

In addition to sizable accomplishments many challenges remain. Probation and parole districts continue to be confronted with large workloads, limiting the time and services that can be provided to offenders on supervision. Too many offenders still enter the community from prison without housing, particularly sex offenders and violent offenders. There is a critical need for housing for a small but impactful number of releasing offenders who need nursing home or geriatric care. Many offenders are released to state probation supervision from local jails without receiving any reentry preparation, medication or housing planning. Many community service boards do not provide mental health treatment to certain types of offenders, such as those convicted of sex offenses or murders, contributing to a higher public risk and recidivism rate for offenders with mental health needs. Although criminal thinking is identified as the primary driver to recidivism and research strongly supports cognitive-behavioral programs as an effective intervention, DOC is not funded to provide programming for the over 30,000 probation offenders with this need. The rising number of cases placed on G.P.S. and the rising number of gang members are also challenges.

A major issue has been the rise of offenders who use opiates. Evidence based practices point to the use of medically assisted treatment in these cases, yet costs are prohibitive. The DOC is participating in an interagency team to develop policy around the opiate problem. The team is led by the office of The Secretary of Public Safety and Homeland Security with membership of The Department of Behavioral Health Developmental Services.

Despite these challenges we are steadfast in our overall mission to create lasting public safety by preparing offenders to reintegrate into law abiding lives after the course of community correctional supervision is completed. We continue to see significant benefits from our organizational development initiatives to create a learning organization with the culture to sustain both staff and offender growth and positive change. We will continue to:

- Identify offenders risks and needs and give priority to those offenders who pose the greatest risk to public safety
- Develop and update case plans that address identified risks and needs
- Utilize evidence based services to respond to individual needs and reduce the risk of recidivism as resources allow
- Quickly and appropriately respond to compliance and non-compliance with proportionate incentives and sanction

As we move forward, DOC will continue to evaluate our supervision practices and services and seek ways to continually improve our operations to achieve our goal of creating lasting public safety.

VADOC COMMUNITY CORRECTIONS REFERRAL GUIDE

RESIDENTIAL OPTIONS

Behavioral Correction Program	Youthful Offender Program
<ul style="list-style-type: none"> ▪ Available to all Courts ▪ Enacted by the 2009 General Assembly ▪ Targets participants with substance abuse needs ▪ Request for evaluation made through probation officer prior to sentencing ▪ Non-violent (no charges as defined by 17.1-805) ▪ No prior felony convictions under 18.2-248 or 18.2-248.1 ▪ Mentally and physically able to participate ▪ Judge imposes full sentence (minimum of 3 years to serve) ▪ Upon receipt of a Court Order, DOC processes offender directly to a Therapeutic Community Program for a minimum of 24 months ▪ Locations of the Therapeutic Communities: <ul style="list-style-type: none"> ➤ Indian Creek Correctional Center (men) ➤ Virginia Correctional Center for Women ▪ At program completion, Judge has the option of suspending the balance of the sentence and releasing to probation; no court review or hearing is required ▪ If individual refuses to participate or is removed for behavior, DOC will notify the Court and probation district; participant will be reassigned to another prison to serve remainder of sentence with no further review, hearing or evaluation required 	<ul style="list-style-type: none"> ▪ Available to all Courts ▪ Code of Virginia 19.2-311 ▪ Targets participants who committed offense prior to age 21 ▪ No Class 1 Felony or assaultive misdemeanors ▪ Request for evaluation made through probation officer prior to sentencing ▪ Mentally and physically able to participate ▪ Indeterminate commitment to DOC for 4 years plus a suspended sentence ▪ Locations: <ul style="list-style-type: none"> ➤ Indian Creek Correctional Center (men) ➤ Virginia Correctional Center for Women ▪ If individual refuses to participate or is removed from the program, participant must be brought before the Court for a hearing; Judge may sentence as originally imposed, pronounce a reduced sentence, or impose such other terms and conditions of probation as appropriate ▪ Parole supervision for at least 1.5 years upon release ▪ Services Available: individualized reentry plans, education, Therapeutic Community, substance abuse education, cognitive and life skills, AA/NA, vocational training, anger management programs, parenting and family reintegration, resource/job fairs, discharge planning
Community Corrections Alternative Program (CCAP) through Detention & Diversion	Community Residential Programs (CRP)
<ul style="list-style-type: none"> ▪ Code of Virginia 19.2-316.3 ▪ Effective May 1, 2017 ▪ Targets non-violent, medium and high risk participants ▪ Expanded Eligibility to include technical probation violators and mild mental health needs ▪ Request for evaluation made through probation officer prior to sentencing; referrals screened by the CCAP Referral Unit (CRU) ▪ Individualized case plans utilized to recommend dosage hours ▪ Program duration is 22-48 weeks ▪ Locations: <ul style="list-style-type: none"> ➤ Appalachian (men) ➤ Harrisonburg (men) ➤ Stafford (men) ➤ Chesterfield (women) ➤ Cold Springs (men) ▪ Services Available: Intensive and moderate substance abuse treatment, individualized dosage plans, treatment motivation programs, education, cognitive restructuring, vocational training, anger management programs, parenting and family reintegration, resource/job fairs, discharge planning 	<ul style="list-style-type: none"> ▪ Code of Virginia 53.1-179 ▪ Available statewide ▪ Non-violent participants who lack a stable residence or need transition from incarceration ▪ Must meet the facility criteria ▪ 90 day length of stay ▪ Services Available: food and shelter, basic life skills, substance abuse education, individual/group counseling, job placement, discharge planning

VADOC COMMUNITY CORRECTIONS REFERRAL GUIDE

NON-RESIDENTIAL OPTIONS

State Probation & Parole	Post Release Supervision
<ul style="list-style-type: none"> ▪ Code of Virginia 53.1-145 ▪ Available statewide ▪ Individuals convicted of a felony with suspended sentences ▪ Court ordered to participate in probation, parole, post release supervision or conditional pardon ▪ Level of supervision based upon assessed risk and needs ▪ Capacity to transfer supervision to other localities and states ▪ Monitors special conditions ordered by the Court ▪ Services: risk/needs assessment (COMPAS), referrals for treatment and services as needed, drug testing, home and field visits, various group program options, substance abuse screening and assessment, reentry services, resource directories in each jurisdiction, partnerships with community stakeholders 	<ul style="list-style-type: none"> ▪ Code of Virginia 18.2-10, 19.2-295.2 ▪ Effective January 1, 1995, post-release supervision can be ordered by the Court for a period of 6 months to 3 years for which they are ineligible for parole ▪ Supervision provided by probation and parole officers upon release ▪ Court must also impose a suspended term of confinement of at least 6 months in addition to post-release supervision of not less than 6 months and not more than 3 years ▪ Violations of the post release supervision are under jurisdiction of the Virginia Parole Board
Drug Treatment Courts	Monitoring Through Technology
<ul style="list-style-type: none"> ▪ Code of Virginia 18.2-254.1 ▪ Targets non-violent participants with substance abuse addiction ▪ Specialized dockets within the existing structure of Virginia's court system offering judicial monitoring of intensive treatment and strict supervision ▪ Length of stay ranges from 12-24 months ▪ Immediate sanctions and incentives as a result of behavior ▪ Conducted in partnership with local community stakeholders, CSB, Commonwealth's Attorney, Judge & Probation and Parole Office ▪ Services: intensive supervision, drug testing, substance abuse education and treatment, sanctions and incentives 	<ul style="list-style-type: none"> ▪ Code of Virginia 53.1-131.2, 19.2-303, 19.2-295 ▪ Shadowtrack voice recognition monitoring for low risk offenders ▪ Global Positioning Satellite (GPS) Monitoring for high risk offenders ▪ Code of Virginia 19.2-295 requires any person convicted of Failure to Register as a Sex Offender on or after July 1, 2006 shall be subject to electronic monitoring ▪ Participants are referred by the supervising officer for appropriate technology programs based upon risk and need
Reentry Programs	
<ul style="list-style-type: none"> ▪ Code of Virginia 2.2-221.1, 53.1-32.2 ▪ Targets participants committed to the DOC for supervision and monitoring ▪ Reentry Senior Probation and Parole Officers implemented statewide ▪ Staff visit various institutions and jails to educate and prepare participants for reentry ▪ Services: cognitive programs/groups, assistance with obtaining identification and other documentation, classes regarding successful supervision in the community, discharge planning 	

Division of Community Corrections—FY 2017

Program/Services	Probationers	Post Releases'/Parolees	Total	Allocation
Community Corrections Workload (June 2017 CORIS)	62,507	2,172	64,679	\$76,800,874
GPS/GPS Staff	Districts	Districts	Districts	\$4,190,967
555 GPS Units	Districts	Districts	Districts	See EM Total
16,996 Voice Recognition	Districts	Districts	Districts	See EM Total
10 Community Residential Programs (Bed Capacity)	N/A	N/A	195	\$4,862,623 * ₁
4 Detention & Diversion Centers (Men)	404	3	407	\$9,001,406
1 Detention & Diversion Center (Women)	106	0	106	\$5,129,534 * ₂

Out –of-State Interstate Compact	6,398	450	6,848	See Districts Total
Field Officers (Filled FTE-June 2017 PMIS)	Senior Officers: 147	Officers: 580	Surveillance Officers: 50	Total: 777

*1 Actual spend of \$4,862,623 is shown instead of Budget Allocation of \$3,923,556 because spending far exceeds allocation.

*2 Reflects Change in location from Southampton Detention to Cold Springs Detention.

Program	FY2017		Position Info: June 2017 PMIS	
	Year End Budget		Includes General Fund and Fund 0953 positions	351006
Probation and Parole	76,800,874			
GPS/GPS Staff	4,190,967		Filled Sr. PO	147
Urinalysis	1,568,000		Filled PO	580
Parole Board Support		Separate state agency now.	Filled SO	50
Day Reporting Centers		Eliminated		777
Diversions Centers	9,001,406			
Detention Centers	5,129,534	Reflects relocation of Southampton Detention to Cold Springs Detention but for the chart show actual spending of \$4,862,623		
Community Residential Programs	3,923,556			
Grants	-			
Total	100,614,337			
Amounts buried within Probation and Parole Total:			Voice Recog (June 2017 invoice)	
Sex Offender Treatment/ Staff	4,369,337			16996
Substance Abuse Treatment	2,942,374			
VASAVOR	754,222			

Notes:

1. Figures above do not include Administrative expenditures for the regional offices or Atmore.
2. Diversions Centers also had fund 0200 expenditures.

Treatment Services

The Division of Community Corrections privatizes many specialized services. This effort makes evidence-based services and licensed service providers more readily available across the state. Further, it supports the Governor's initiatives of increased privatization and use of women and minority vendors.

In FY2016, the Division of Community Corrections allocated the amounts (state funds) below for alcohol and other drug abuse services, sex offender assessment, treatment, polygraph, and a variety of non-residential and residential treatment services.

Services	Allocation
Alcohol and Other Drug Abuse	
<input type="checkbox"/> Residential / Non-Residential General Funds	\$2,920,200
<input type="checkbox"/> Urinalysis / Oral Fluid Testing (Institutions and Community)	\$1,786,173
Sex Offender	
<input type="checkbox"/> Assessment / Treatment	\$1,367,000
<input type="checkbox"/> Polygraph	\$ 299,900
Community Residential Programs	\$4,862,623*
Virginia Serious / Violent Offender Reentry Initiative	\$ 754,222

**The Department has prioritized this program in order to address the ongoing issue of Limited Transitional Housing options for the offenders. This amount in spending far exceeds the allocation amount of \$3.2 million.*

Community Corrections Facilities

Community Correction Alternative Programs (CCAP) at Diversion and Detention Centers Incarceration Programs are designed to offer Circuit Court judges an alternative incarceration option for non-violent felony offenders, at both initial sentencing and revocation proceedings. The Parole Board was later authorized to refer parole and post-release violators.

Upon conviction, either by plea or finding by the court, if the judge desires that the defendant be evaluated for participation in CCAP, operated at the Detention and Diversion Centers, upon order of the court, the Probation and Parole Officer will initiate the assessment. The Officer will complete the initial screening to determine whether the defendant is non-violent, has serious medical issues, pending charges and other stipulations of the Code of Virginia. Once the initial screening is completed, the Officer will then complete the offender risk and needs assessment instrument (COMPAS) and forward that along with the initial screening document to the DOC Central Referral Unit. The Central Referral Unit will determine suitability for program participation and forward the results back to the Officer who will include the information along with the Presentence Report. If the court desired to place a defendant in the program, the court would impose a sentence, suspend the sentence on the condition of successful completion of the CCAP program.

The determination of each offender's risks and treatment needs is central to participation in the CCAP program. The program accepts offenders who are moderate to high criminal recidivism risks with moderate to high treatment needs. On a case by case basis, offenders who have low risks but higher treatment needs will be accepted if treatment resources are not available in the local community. An example is an offender who may need intensive drug treatment when there are no local resources.

The programming dosage is determined by the needs of each defendant. Defendants who have lower treatment needs, (22-28 weeks) will participate in our Stafford and Harrisonburg Units and women will participate at our Chesterfield Unit. The participants will receive Cognitive Behavioral Treatment, Substance Abuse, Vocational and Educational services as well as engaging in a Work Component.

Defendants who have higher treatment needs, (42-48 weeks) will participate in our Appalachian and Cold Springs Unit and women will participate in Chesterfield. Participants will receive intensive Cognitive Behavioral Treatment, Intensive Substance Abuse Vocational Training, Educations, Community Service Projects, Welding, Masonry as well as the core programming listed above for the lower needs defendants.

If a lower needs defendant is determined to need more services, they will be transferred to a facility to better meet their needs which will extend program duration.

One unit, Cold Springs is dedicated to address intensive substance abuse issues as this need has significantly increased over the past several years, particularly with opiate users.

Facility Eligibility Criteria

5-2.7 Eligibility Determination

The CCAP Referral Unit shall receive and evaluate all referrals to the Detention and Diversion Centers. The CCAP Referral Unit should provide each District Probation and Parole Office with a copy of any specific facility criterion to ensure appropriate assignments are made. CCAP Referral Unit staff shall make notification of acceptance/rejection and tentative facility admission date to the referring District.

See sections 19.2-316.2, 19.2 316.3, 53.1-67.7, and 53.1-67.8, 19.2-297.1, of the *Code of Virginia* Community Corrections Facility Eligibility Criteria.

In general, eligibility criteria for evaluation and intake are governed by the items below:

- Must be sentenced by Circuit Courts and/or the Virginia Parole Board.
- Cannot be in addition to felony incarceration greater than 12 months.
- Must not be a violent felon offender as defined by §19.2-316.1, of the Code of Virginia.
- Must have no self-injury or suicidal attempts within the past 12 months.
- Potential program participants currently taking or who have been medically approved to stop taking prescribed mental health medications within 60 days of referral or intake will be assessed on a case-by-case basis.

General Medical and Mental Health Questions

- Must be physically stable, not require daily nursing care, and be able to perform the activities of daily living and program requirements.
- Does Offender have any medical or psychological conditions that would prevent or impede program participation?
- What is the diagnosed condition?
- What is the commonly accepted or prescribed treatment regimen?
- Can a person with this condition who follows the treatment regimen successfully participate in required Program activities?
- What follow up care is likely to be required?

Sex Offender Supervision

Sex offender supervision continues to employ an enhanced supervision model for all sex offenders in the Commonwealth. A team approach is used and the team is most often comprised of a Senior Probation and Parole Officer, a Sex Offender Supervision Probation and Parole Officer, and a Surveillance Officer. The Sex Offender Supervision Practices Manual has been updated and is now Policy 735.3 Supervision of Sex Offenders in the Community in the Department of Corrections Directives and Procedures.

Experts in the field recommend a sex offender specialist staffing ratio of 40 to 1 in order to appropriately address public safety needs. There were no additional positions allocated for FY2018 for sex offender supervision.

The Code of Virginia mandates that any offender convicted of Failure To Register on or after July 1, 2006 be placed on GPS. The department has experienced steady growth in this area and at the end of July had averaged 555 on-leg units. This marks a 3% increase from on-leg units in June of 2016.

In February 2013 the Department contracted with Dr. Robin Wilson to train specialists on the scoring and use of the STABLE-2007 and the ACUTE-2007. These two instruments are sex offender risk assessments designed to be used and scored by community supervision officers. Approximately 200 officers were trained and 4 Department staff were trained as trainers, thus ensuring sustainability. Specialists began using these risk assessment tools in May, 2013. Training of new specialists has continued and practice sessions have been conducted to ensure fidelity.

There are 11 contracts statewide providing sex offender assessment and treatment and 8 vendors providing polygraph services. A total of \$1,666,600.00 was allocated for assessment, treatment, and polygraph in all Districts. This figure does not incorporate the co-payment that was implemented for these services in FY2008.

The Sexually Violent Predator (SVP) civil commitment process continues to grow. The impact of this growth is felt by Community Corrections when these SVP's are granted conditional release. In FY2017 Probation and Parole Officers investigated 173 home plans for offenders being considered for conditional release. This is a 10% increase from the FY2016. The number currently being supervised under conditional release is 197, which is an increase of approximately 9% from FY2017. Of that number, 96 are "pure" conditional release, meaning that they have no criminal obligation. Also notable for FY2017 is the number of Emergency Custody Orders that were executed by Probation and Parole Officers. There were 54 Emergency Custody Orders obtained by Probation and Parole Officers. With the exception of one case, all of those taken into custody were for technical violations, meaning that these offenders were returned to custody before any re-offense. This continues to be a high risk and high demand type of case. By statute, these cases are monitored by global positioning systems (GPS) and have demanding conditional release plans that involve collaboration with the Office of the Attorney General and the Department of Behavioral Health and Developmental Services.

An emerging issue is the clustering of sexually violent predators in certain jurisdictions. These offenders have a very difficult time securing housing. In some areas of the Commonwealth there are landlords who are willing to rent to these offenders. A few of these cities are Petersburg, Richmond, the Tidewater area and Roanoke. As stated above, these offenders require a higher level of supervision and the increasing numbers in the aforementioned jurisdictions impact resources in those districts.

Sex offenders are among the most demanding cases under supervision. The sex offender specialist staff must monitor offender behavior, verify and modify living arrangements as needed, work closely with sex offender treatment providers and polygraph examiners, and cope with victim trauma. There have been a number of legislative and procedural changes over the years that have resulted in increased demands on an Officer's case

management duties. These would include such things as GPS, SVP cases, and the Sex Offender Verification System (SOV). Training efforts are geared toward keeping the Officer up-to-date on legislative changes, technology and evidence based supervision and treatment practices. The supervision of sexual offenders is constantly evolving and Officers need to be exposed to the most current research and training.

Currently, there are about 3,909 adult probation and parole offenders who are required to register on the Sex Offender and Crimes Against Minors Registry. The Department of Corrections continues to be proactive in their supervision and monitoring of this difficult population. Probation and Parole Officers and the Virginia State Police frequently collaborate in their efforts to ensure these offenders are properly registered with the Sex Offender and Crimes Against Minors Registry.

Supervising Sex Offenders

LARGE POPULATION

- About 22,976 persons on Sex Offender and Crimes Against Minors Registry
- About 3,909 are under Probation and Parole supervision
- About 65,081 other felons are under Probation and Parole supervision

SUPERVISION AND MONITORING ARE LABOR INTENSIVE

- All eligible sex offenders are registered at intake and prior to release from DOC institutions.
- Victims who request notification about sex offenders leaving prison are notified.
- Eligible sex offender registrants are monitored to determine if they have registered.
- Registry requirements are posted in District public areas.
- Department of State Police is assisted in their investigations of alleged non-registrants.
- Global Positioning by Satellite (GPS) is underway. GPS requires active staff follow-up to alerts. Voice recognition monitoring (Shadowtrack) is used for selected cases.
- All active sex offenders are initially assigned to Intensive Supervision with special instructions imposed to address specific behaviors.

TREATMENT CAN REDUCE RISKS

Regional Peer Supervision groups including Community Corrections staff, qualified Sex Offender Treatment providers, and polygraph examiners meet periodically to discuss effective treatment, supervision, and monitoring practices.

Mental Health Services

In 2004, the DOC piloted three Mental Health Specialist (MHS) positions in the three largest probation Districts in each region—Richmond, Norfolk, and Roanoke—to assist with the transitioning and supervision of offenders with mental illness. The MHSs proved to be a highly beneficial and cost-effective means of facilitating effective supervision, ensuring continuity of mental health services, and reducing recidivism for probationers with mental disorders. The success of these positions laid the groundwork for the recent and substantial increase in staffing of Community Mental Health Services in the DOC. As previously noted, in the Spring session of 2016, the Legislature approved twenty additional Qualified Mental Health Professionals (QMHP's) to be deployed around the state to augment the current quantity and quality of mental health services for Community Corrections. All 20 of these positions, classified as District Mental Health Clinicians, were filled between December 2016 and August 2017. The Mental Health Services staff in Community Corrections is now comprised of the following positions: One Mental Health Clinical Supervisor (MHCS); three Regional Mental Health Clinicians (Central, Eastern, Western); a Psychology Associate Senior at Chesterfield Women's Detention and Diversion Center (currently vacant); and twenty District Mental Health Clinicians distributed among the 43 Probation & Parole Districts and four Men's Detention and Diversion Centers (CCAP facilities). With regard to the original three MHS positions, currently there is still a full time MHS in Richmond, and Roanoke is in the process of filling its recently vacated MHS position. Norfolk's MHS position also was recently vacated, but rather than fill the same position, this District is in the process of replacing the MHS position with a DMHC position that will be under the Mental Health Services chain of command.

The addition of the new positions has expanded the role of the Regional Mental Health Clinicians (RMHCs) to being full time supervisors of their respective DMHCs in each region. The Community Mental Health staff is also now enhanced with the ability to provide a much more intensive focus on each of the Districts and CCAP facilities than was possible with only one mental health clinician serving each region. The DMHCs will serve as an essential resource for Probation Officers who supervise mental health offenders. Their range of professional activities include, but are not limited to, the duties listed below:

Core Responsibilities:

- Consultation with POs supervising mental health offenders, including screening cases to determine mental health needs and making supervision recommendations
- Connecting offenders with CSBs and other community resources to ensure continuity of mental health services
- Providing mental health support and interventions to offenders (e.g., short-term individual therapy or brief counseling sessions) to ensure maintenance of mental stability until longer-term treatment interventions are in place
- Facilitating re-entry planning and continuity of mental health services for State Responsible offenders in regional and local jails

Supplementary Duties:

- Providing training for District staff
- Participating in home/field visits with District staff
- Facilitating the process for securing intensive treatment (e.g., voluntary or involuntary commitment) as needed
- Facilitating mental health groups when there is an identified need for the District

As these positions are still very new to the DOC, it is expected that the roles of the DMHCs will continue to be defined and evolve over time as the Community Mental Health staff refines its mission to meet the needs of the P&P Districts and CCAP facilities and continues to strengthen relationships with community stakeholders. The current assignments for the DMHC positions are listed below. The underlined District/facility listed first for each position is the location of the DMHC's primary office.

Central Region:

1. Fredericksburg, Culpeper, Stafford Diversion Center
2. Winchester, Leesburg (Leesburg office only)
3. Manassas, Leesburg sub office in Warrenton
4. Fairfax, Arlington, Alexandria
5. Chesterfield, Farmville, South Boston
6. Henrico, Charlottesville, Ashland

Eastern Region:

1. Newport News, Hampton
2. Virginia Beach, Accomack
3. Suffolk, Franklin
4. Williamsburg, Gloucester, Warsaw
5. Chesapeake
6. Portsmouth
7. Petersburg, Emporia

Western Region:

1. Norton, Appalachian Detention Center
2. Abingdon, Tazewell
3. Lynchburg, Bedford, Fincastle
4. Danville, Rocky Mount, Martinsville
5. Harrisonburg, Harrisonburg Diversion Center
6. Cold Springs Men's Detention Center, Staunton
7. Wytheville, Radford

The following is a summary of services provided by the Community Corrections Mental Health Services staff from July 1, 2016 through June 30, 2017. All data reported represents the number of contacts unless otherwise specified.

Direct Mental Health Contacts	
• One-time Meetings with Offenders (including NIJ Screening referrals, requests for mental health screenings/diagnostic evaluations/treatment recommendations, case management)	1294
• Ongoing/Extended Therapy or Case Management Contacts	476
• Intensive Treatment Intervention (Emergent Cases)	124
• MH-9 Reviews/Release planning	1565

Case Consultations/Meetings	
• Probation Officers	1775
• Institutional/Other VADOC Staff	677
• CSBs	529
• Other, Including State Hospitals, Jails, Private Providers, CRPs, DJJ	485
• Mental Health Trainings Provided	41
• Mental Health Trainings Received	57
• Professional Meetings/Committees	336
• Clinical Supervision	151
• Other Trainings Received	129

Mental Health Trainings and Clinical Supervision

Additional services included representation on DOC committees, assisting with sex offender treatment and supervision, attending court hearings, attending multiagency meetings, and continuing to build relationships with community stakeholders.

A significant improvement occurred in the spring of 2016 with the signing of the DBHDS, VADOC, and CSB Memorandum of Understanding for the first time since 2004. All CSB's with the exception of the Virginia Beach are participating. It is noteworthy that this version removed the clause which previously allowed Mental Health services to be withheld from sex offenders

Interstate Compact for Adult Offender Supervision

On June 30, 2017, there were **6,805** Virginia offenders under supervision in other states via the Interstate Compact for Adult Offender Supervision and **2,375** out-of-state cases under supervision in Virginia. Virginia currently ranks among the top four states in volume of transfers.

Since 1937, the Interstate Compact for the Supervision of Parolees and Probationers provided the sole statutory authority for regulating the transfer of adult parole and probation supervision across state boundaries. All 50 states are members of this interstate agreement, as are the District of Columbia, Puerto Rico, and the U.S. Virgin Islands.

In 1998, the National Institute of Corrections (NIC) Advisory Board directed its staff to begin pursuing a revision of the compact. Through a partnership with The Council of State Governments (CSG), NIC and CSG developed and facilitated a Drafting Team of state officials to design a revised interstate compact – one that would include a modern administrative structure, that provided for rule-making and rule-changing over time, that required the development of a modern data collection and information sharing system among the states, and one that was adequately funded to carry out its tasks.

The new Compact was enacted in June 2002 with 35 member states. In 2004, Virginia joined the Compact when Governor Mark Warner signed the Interstate Compact for Adult Offender Supervision (ICAOS) into law as approved by General Assembly.

The rules of the Compact have the force and effect of federal law and are enforceable in the federal courts. Accordingly, the demands and liability for non-compliance are significant. The “Interstate Compact Bench Book for Judges and Court Personnel” is available on the ICAOS website at www.interstatecompact.org.

The Compact established a Commission comprised of representatives from each state and a national office comprised of full-time staff. The Interstate Commission oversees the day-to-day oversight of the compact between the states. It promulgates rules to achieve the goals of the compact, ensures an opportunity for input and timely notice to victims and to jurisdictions where defined offenders are authorized to travel or to relocate across state lines and established a system of uniform data collection, provides access to information on active cases by authorized criminal justice officials, and coordinates regular reporting of Compact activities to heads of state councils, state executive, judicial, and legislative branches and criminal justice administrators. The Commission monitors compliance with the rules governing interstate movement of offenders, initiates interventions to address and correct noncompliance, and coordinates training and education regarding regulations of interstate movement of offenders.

The Compact also required the establishment of a state council that includes members of the executive, legislative and judicial branches of government, a representative of crime victims, and the Compact Administrator. Virginia’s Council members are James Parks, Director of Offender

Management Services at Virginia Department of Corrections who serves as the Compact Administrator/Commissioner, Mark Vucci, Director, Division of Legislative Services, The Honorable Lee A. Harris, Jr., Judge, Henrico Circuit Court; and Shelly Shuman-Johnson, Director, Henrico Victim/Witness Program.

A web-based Interstate Compact Offender Tracking System (ICOTS) was introduced for use by all the member jurisdictions in 2008. This has enabled the computerized transfer of cases and supporting documentation. Substantial oversight, field training, and technical assistance continues to be provided by the Virginia Interstate Compact Office of the Virginia Department of Corrections.

Operations Extradition/Fugitive Services Unit

The Operations Extradition/Fugitive Services Unit is comprised of a Unit Manager (Major), a Captain and five (5) Lieutenants. This unit is responsible for locating and apprehending offenders who have absconded or wanted by the Department of Corrections.

FY2017 accomplishments for this unit include:

- 557 persons wanted by this agency were arrested clearing 1169 warrants.
- Assisted local, state, and federal law enforcement agencies in the arrest of 368 fugitives clearing 961 outstanding warrants in the process.
- This unit was contacted by local, state and federal law enforcement agencies asking for informational assistance 2,598 times.
- For FY2017 this unit successfully completed 144 out of state extraditions without incident.
- For FY2017 this unit completed over 2,238 case transfers in Virginia CORIS.
- As one unit responsible for the entire state, this unit assigned staff the responsibility of overseeing each district ensuring that the needs of the Probation and Parole Districts are met. During FY2017 each Probation and Parole District was contacted and/or visited by a member of this unit.
- Maintained the number of our staff assigned to the United States Marshal Service Violent Fugitive Task Force in order to locate and apprehend additional dangerous fugitives. In FY 2017 these Task Force Members affected 352 Arrests of Violent Fugitives.
- During FY2017, this unit targeted fugitives wanted by this agency that had a history of violence against persons and considered dangerous. Fugitives meeting these criteria were added to the Department of Corrections Most Wanted website. As a result of this revised initiative this unit was responsible for the capture of (43) Most Wanted Fugitives.
- This unit has received several letters of commendations from sheriffs and police chiefs throughout Virginia for providing their agencies assistance searching for persons wanted by their departments.

Education Services

Education programs operate within the Division of Programs, Education, and Reentry of the Virginia Department of Corrections. Currently 311 positions are funded which include support staff, academic teachers, career and technical education teachers, librarians, librarian assistants, principals, and program and administrative staff at headquarters. In addition, a number of part-time employees provide teaching and other services needed at a variety of locations.

As cited previously, research on recidivism has found that education and employability are two major determinants in successful reentry and lowered recidivism. Educational services in both Adult Basic Education (ABE) and Career and Technical Education (CTE) programs help to prepare individuals for successful reentry into their communities. Academic programs are designed to prepare students to earn their High School Equivalency (HSE) credential, currently the General Educational Development (GED). CTE programs provide marketable skills and industry-based credentials in a wide variety of areas that are offered based on employment market data. There are post-secondary offerings in a number of major institutions, most funded through The Sunshine Lady Foundation, The Laughing Gull Foundation, and Pell Grant pilots.

Educational programs are offered statewide in:

- Diversion Centers
- Detention Centers
- Reception Centers
- Adult Correctional Centers
- Adult Correctional Field Units

Education programs are geared toward preparing returning citizens to successfully rejoin their respective communities. Both individuals served and communities benefit.

Adult Programs/Services:

- Adult Basic Education (ABE)/General Educational Development (GED)
- Special Education
- Apprenticeship Programs
- Library Services
- Career and Technical Education
- Career Readiness Certificates
- Job/Employability Skills Training

In fiscal year 2017 the academic programs in major institutions averaged 1,359 hours of instruction and the CTE programs in the major institutions averaged 1,371 hours of instruction. The Academic programs in the Correctional Field Units averaged 705 hours of instruction and the CTE programs averaged 420 hours of instruction for fiscal year 2017. In fiscal year 2017 the three Detention and Diversion Centers had hours of Academic instruction that averaged 658 hours of Academic Instruction, The one Detention Center that offered Vocational Programs had 703 hours of Instruction.

The Community education programs had the following overall enrollments and completions:

Program	Enrollments	Completions
Academic ABE/GED	1223	30 (Obtained GED)
Career & Technical Ed.	616	220

Currently, part-time ABE instructors serve Harrisonburg Men's Diversion Center, Stafford's Men's Diversion Center, Haynesville Work Center, James River Work, Center and Richmond Probation and Parole. A full-time ABE program and three Career and Technical programs are offered at Appalachian Detention Center. In Fiscal Year 2017 the ABE instructor position at Cold Springs was made a full-time position; recently vacated, it will be re-advertised for a full-time instructor. The total number of classroom hours at Chesterfield Detention and Diversion were increased from two (2) to six (6) per week. Caroline is currently without a part-time teacher.

We continue to build community relationships to identify and link returning citizens to resources that can assist them in completing their GED while under supervision. This is one of the tasks identified in the Recidivism Reduction Plan. We also continue to expand educational software programs that are focused on enhancing student learning experiences, reinforcing teacher led instruction, and adapting lessons according to the student's individual capability. Utilizing more technology in the classroom has promoted higher-level thinking and increased students' digital literacy resulting in the attainment of desirable skills required for the 21st Century productive citizen.