

Supervision Duties

400.1 PURPOSE AND SCOPE

This policy is being adopted to ensure officers utilize Evidence Based Practices for Community Corrections, the Department's Supervision Practice Model, and a balanced approach to monitor clients in the community.

400.2 APPLICABILITY

This policy applies to all department officers.

400.3 GENERAL DEFINITIONS

Definitions related to this policy include:

Evidence Based Practices (EBP) for Community Corrections: Approaches and interventions that have been scientifically tested in controlled studies and proven effective with at least one client subgroup. EBP implies that there is a definable outcome(s); it is measurable; and it is defined according to practical realities (recidivism, victim satisfaction, etc.). They are also designed for standardized use so when they are replicated with fidelity similar outcomes can be expected.

The eight guiding principles for EBP in Community Corrections are:

- (a) Formally assess clients with a validated tool that identifies risk and needs,
- (b) Utilize engagement skills to determine what motivates a person to make changes,
- (c) Carefully target anti-social factors for intervention while being mindful of Risk Need/Responsivity principles:
 - (a) Risk principle: Prioritize supervision and treatment resources for higher risk clients.
 - (b) Need principle: Target interventions to assessed criminogenic needs.
 - (c) Responsivity principle: Be responsive to temperament, learning style, motivation, culture gender and proximity when identifying treatment or intervention programs in the Case Plan.
 - (d) Dosage: Structure 40-70% of high or intensive risk client's time for 3-9 months.
- (d) Assist clients in developing pro-social skills by building cognitive behavioral competencies,
- (e) Increase positive reinforcement,
- (f) Engage ongoing support in their communities,
- (g) Track outcomes of intervention efforts,
- (h) Provide feedback to the client on assessment results and progress under supervision.

Supervision: The effort by the department to monitor progress and compliance of clients released by the Court for community monitoring. Elements of supervision include:

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- Formal and informal assessment
- Case management
- Case planning
- Facilitating progress towards case plan objectives
- Referrals to approved service providers based on assessed needs

Informal Assessment: Other information or insight about a client that is available or known to the officer including things like past performance under supervision, provider progress reports, acceptance of responsibility, and level of engagement.

Risk-Based Supervision: An evidenced-based approach that utilizes an actuarial risk and needs assessment tool to determine which clients are supervised and at what level (High, Medium or Low). In line with the Risk/Need/Responsivity principles, clients assessed as a higher risk to community safety are supervised more intensively, receiving more resources and interventions to address their criminogenic needs, while low risk clients run the risk of recidivating more frequently when supervised intensively.

Supervision Practice Model: The department employs a “Supervision Practice Model” which consists of the five elements (review diagram of model). All activities involving clients connect to at least one of these supervision model elements: Assessment, Planning, Linking, Monitoring, and Advocacy. Through the use of Integrated Behavioral Intervention Strategies (IBIS) skills (link to IBIS manual), all officers use Motivational Interviewing, cognitive interventions, and a balanced approach with clients to facilitate change opportunities.

Case Management: “A collaborative process which assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet an individual’s health needs, using communications and available resources to promote quality, cost-effective outcomes.” – Case Management Society of America. In a collaborative process, there may be overlapping roles. As the Primary Case Manager for each client, probation officers conduct formal and informal assessment, engage with clients, their support group and providers for case planning purposes, respond to behavior in a consistent, predictable manner, and make referrals to services in an effort to protect community safety, reduce recidivism, and hold clients accountable.

Case Plan: A written, structured tool that directs the individual and the case manager or officer toward targeted activities and outcomes.

Incentives and Sanctions: A risk-based Incentives and Sanctions program is an evidence-based intervention where supervising officers apply sanctions or rewards in response to specific client behaviors. Incentives and Sanctions are tools to assist officers in the Supervision objective of behavior change. Optimally, desired behavior should be incentivized at least four times more often than negative behavior is sanctioned.

Balanced Approach: An officer holds clients accountable (supervision strategy) while engaging clients in rehabilitative services (case management strategy) to support long term positive change.

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400.4 ASSESSMENT TOOLS

In line with the first principle of EBP, all clients referred to probation are assessed using department-approved tools. All assessment tools are administered with the use of motivational interviewing techniques. Through the engagement process, probation officers build rapport, focus on specific criminogenic needs, evoke the client's motivation for change, and empower them to establish an individualized plan to become productive members of society.

Department approved assessment tools include:

Adult Field Service (AFS): Correctional Offender Management and Profile for Alternative Sanctions (COMPAS) used with all clients to assess general recidivism and violent recidivism risks and to identify and prioritize criminogenic needs.

Additional AFS assessment tools:

- **Static 99R** on sex offenders required to register per PC 290,
- Ontario Domestic Assault Risk Assessment (**ODARA**) on domestic violence cases defined in PC 1203.097.

Juvenile Field Service (JFS): San Diego Risk and Resiliency Checkup II (SDRRC-II) used with all clients to predict both recidivism and desistance. The Resiliency Self-Administered Tool (RSAT), a self-administered questionnaire, enhances the validity and usefulness of the assessment results.

Additional JFS assessments/screening tools:

- Evaluation of Imminent Risk and Reasonable Candidacy (EIRRC) on all youth with a sustained true finding pursuant to WIC 602,
- Massachusetts Youth Screening Instrument (MAYSI-2) on all youths with a sustained true finding pursuant to WIC 602,
- Juvenile Sex Offender Recidivism Risk Assessment Tool (JSORRAT) on youth who have sustained true findings for identified sex offenses.

Individual programs may conduct additional assessments and screenings to meet the needs of their populations. Please refer to the procedure manuals for your service for additional instruction on assessment processes. The general assessment tool results identify risks and needs to assist the officer in determining the proper supervision level. The assessment results are also utilized in generating the Case Plan goals, tasks, and referrals to appropriate service providers.

400.5 FREQUENCY OF ASSESSMENT

A thorough general assessment will be completed with a client each time a new conviction or true finding is rendered, regardless of the time elapsed from the last assessment. Please refer to the procedure manuals for your service for additional instruction on assessment processes.

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400.6 FREQUENCY OF RE-ASSESSMENT/CASE REVIEWS

In support of Case Management efforts, clients being supervised at all levels in JFS and at High Risk in AFS will be formally reassessed at least every six months or when there is a significant change in the person's life. Informal reassessments, including IBIS skills, will be utilized throughout the period of supervision. Please refer to the procedure manuals for your service for additional instruction on reassessment processes.

400.7 RISK-BASED SUPERVISION

Regardless of assessed risk level, officers will use a balanced approach to enhance case management efforts when addressing a client's risk and needs. Consistent with the previously stated objectives of supervision, officers will act to support long-term behavior change in a client to reduce or end their involvement in the criminal justice system. Using EBPs, Integrated Behavioral Intervention Strategies (IBIS), and a balanced approach, officers provide referrals for treatment services to address the client's assessed criminogenic needs while also adhering to the department's mission to protect community safety.

400.8 LEVELS OF SUPERVISION

This risk/intervention dynamic is the foundation upon which the department assigns clients to supervision levels. Supervision level options include High, Medium, and Low. The highest risk score from applicable department-approved assessments will largely determine the level of supervision. For example, if the COMPAS score nets an overall "low" level of risk, but the ODARA indicates a "high" level of risk, the case should be referred for High Risk supervision. Please refer to the procedure manuals for your service for additional instruction on cut points for risk assessments.

400.9 ASSIGNMENT TO SUPERVISION LEVEL

The assessment tool is an essential element of EBP and will be given significant weight in the overall evaluation of all cases when determining supervision level but is not intended to replace officer judgment. All assessment results will be considered along with other factors including informal assessment, the social profile of a case (for example: media cases, high liability clients like drunken driving or sexual offending), and other information available from community partners and/or treatment professionals. Probation officers will consider all facts of the case when making a decision to assign a level of supervision.

When all available information is evaluated, its sum might support raising the supervision level to protect community safety and ensure clients receive the proper level of community intervention and services. An officer will request an override or deviate upwards from the supervision level indicated by the assessed risk scores by bringing the case to their supervisor's attention. In the case of an override, the client will be supervised according to the standards of the higher supervision level, not the assessed risk level. Clients will never be initially supervised at a level lower than their assessed risk indicates. Supervision level may be reduced below the assessed risk level after a minimum period of supervision consistent with meeting case plan objectives

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and with supervisor approval. Refer to your service procedure manuals, program guidelines, and supervisor to ensure your recommended level of supervision is appropriate.

400.10 TRANSFERS WHILE UNDER SUPERVISION

The supervision of cases will be transferred between units, officers, and regions based on a variety of factors, including but not limited to, program criteria, court status, and physical address. Supervision level will be reduced or increased based upon client behavior, attention to case plan objectives, and supervisor approval. For specific transfer requirements and timelines, refer to your service procedure manual.

400.11 MINIMUM CONTACT STANDARDS

The following are the face-to-face contact frequency standards:

Assessed Risk	Adult Field Services	Juvenile Field Services
High	At least two contacts per month	At least twice a month: however, several programs require more frequent contacts
Medium	At least once over 90 days	At least once every 60 days
Low	As warranted	As warranted

The location and frequency of contacts is subject to Case Plan implementation and supervisor oversight, taking into consideration case dynamics. Specific programs may require more frequent contacts. Refer to your service procedure manuals, program guidelines, and supervisor to ensure you are familiar with expectations for your assignment.

400.12 CASE PLANNING

All case-carrying officers will engage clients to conduct case planning as appropriate. Case plans will include goals that are individualized, client-driven, and aimed at intervening with the most significant criminogenic needs. Using formal and informal assessments, officers will determine the severity and origin of the client's needs and the potential impact of addressing identified needs with the overarching goal of recidivism reduction. Officers will also consider the results of supplemental assessment tools or screenings as they may provide additional insight for working effectively with a client. The IBIS (IBIS manual link) skills of Behavioral Analysis, RACE, and the Cognitive Model will be utilized to identify specific targets to address with a client (high-risk people, places, things and thoughts). When engaging the client to develop a Case Plan strategy, officers will consider the available support system including family members, friends, mentors, faith-based advisers, and other pro-social individuals.

When appropriate, all case-carrying officers will generate case plans that include client-driven tasks and referrals to services. Officers will only refer to service providers listed in the Community

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Resource Directory (CRD), a web-based catalogue of countywide services to which adults and juveniles can be referred in pursuit of their rehabilitation.

400.13 CASE PLAN DRIVEN CONTACTS

The goals, tasks and referrals of the individualized case plan will guide interactions with clients. The officer's discussions and actions with a client during planned contacts will rely on the case plan, focusing on progress and/or lack of success. Officers will engage with service providers and be familiar with the nature of the client's participation in community-based interventions. Prior to any planned contact, the officer will review the case plan, provider feedback, and case notes.

400.14 INCENTIVES AND SANCTIONS

All officers will use an Incentives and Sanctions-based approach in supervising clients. As clients show progress towards case plan goals, officers will consider providing an incentive-based response. As officers encounter or discover non-compliance, officers will respond either through the issuance of an administrative sanction or a formal revocation, as case dynamics indicate. Responses to non-compliance should not be more intrusive or restrictive than necessary. Refer to your service procedure manuals for further guidance on implementation of the approved Incentives and Sanctions plan.

400.15 SERVICE PROVIDERS

In support of case management efforts, case-carrying officers will collaborate with service providers involved in the case plan to increase client engagement, evaluate progress, and coordinate priorities.

400.15.1 SHARING INFORMATION

Officers will secure release of information documents to facilitate this exchange of information with partners and service providers. The disclosure will list the Probation Department and the program/agency as the parties in the release of information documents, not the specific officer or counselor. If you are unsure about providing information to another party please screen the circumstances with your supervisor.

400.15.2 DUTY TO REPORT

Any employee who, in the course of their duties, witnesses that a contracted provider appears negligent or in violation of their contract should notify their chain of command as soon as practicable.