

STATE OF COLORADO



# **COMMUNITY CORRECTIONS AUDITING GUIDELINES (Revised)**

November 2005

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**Based on  
The Colorado  
Community Corrections  
Standards  
Revised  
(2005)**

The Community Corrections Self Audit Guidelines is a project undertaken by the Division of Criminal Justice, Office of Community Corrections and the Standards Subcommittee of the Governor's Community Corrections Advisory Council. The individuals contributing to this document are:

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## Background and Overview

The Community Corrections Self-Auditing Guidelines is a technical assistance tool, intended to assist community corrections programs in their internal auditing to measure compliance with the Colorado Community Corrections Standards (C.C.C.S.) (Revised July 1, 2005).

The standards, established and revised by the Governor's Community Corrections Advisory Council, are designed to establish minimum levels of service within Colorado community corrections programs and to reduce risks associated with managing offenders in the community. Maintaining compliance with these standards requires providers to establish, maintain, and consistently review the internal management controls process that targets various systems within the organization.

This document identifies, in general terms, methods commonly used in determining compliance with the C.C.C.S. by the Division of Criminal Justice. It is intended to serve as a guideline for programs to develop and implement their own internal management controls.

## Audit Sampling

The Division of Criminal Justice, when conducting official audits of the C.C.C.S, selects a sample of offender files, personnel files, and other official documents (e.g. house count sheets, medication records, internal audit records, service records, building and fire inspections, etc). In all cases, a sample is drawn that reasonably represents the program's business practices and can sufficiently be generalized to a broader scale. Following are some general guidelines for sampling for the purposes of self-auditing:

Offender Case Files – Sampling begins with a random sample of case files. A representation of Diversion and Transition cases are selected based on the facility population and practices. Samples are drawn from billing records and/or the Client Termination Forms submitted by programs. Cases are selected for the actual audit sample based on a range of factors (length of stay, offense type, referral type, termination reason). Generally a sample size of 10% of the average annual number of terminated offenders is used as a baseline sample size. The size of the sample may be increased based on the auditor's discretion. Ten files are selected for review on all follow-up audits.

The time range selected for audit review may vary based on auditor's discretion. Generally, audit ranges will cover time frames since the last published audit report. In cases when a program has not been audited before, generally a period of two years will be selected for review.

Personnel Files – The Auditor will review a representative sample of personnel files for current full-time and part-time security, case management, administrative, and ancillary staff positions. Additionally, a small sample of closed personnel files may be evaluated.

House Count Sheets – The auditor will review a random sample of house count documentation for 2-4 months during the established audit period.

Medication Records – Depending on the number of offenders who are taking medications at any given time, the auditor will review a sample of medication records that is broad enough to represent the agency's business practices.

## Definitions

**Auditor Discretion** - There are cases where the C.C.C.S. is best measured qualitatively rather than quantitatively. These are typically cases where the standard cannot be easily quantified. This requires the use of professional judgment to assess the degree to which the program meets the intent or requirements of the standard. In such cases, the auditor will evaluate the program's business practices and determine if, as a whole, the program operates consistently with the intent of the standard.

When possible the auditor will use the following general guideline:

Very Satisfactory	All documents or business practices fully comply with the standard
Satisfactory	Most documents or business practices fully comply with the standard
Needs Improvement	Some documents or business practices fully comply with the standard
Unsatisfactory	Few documents or business practices fully comply with the standard

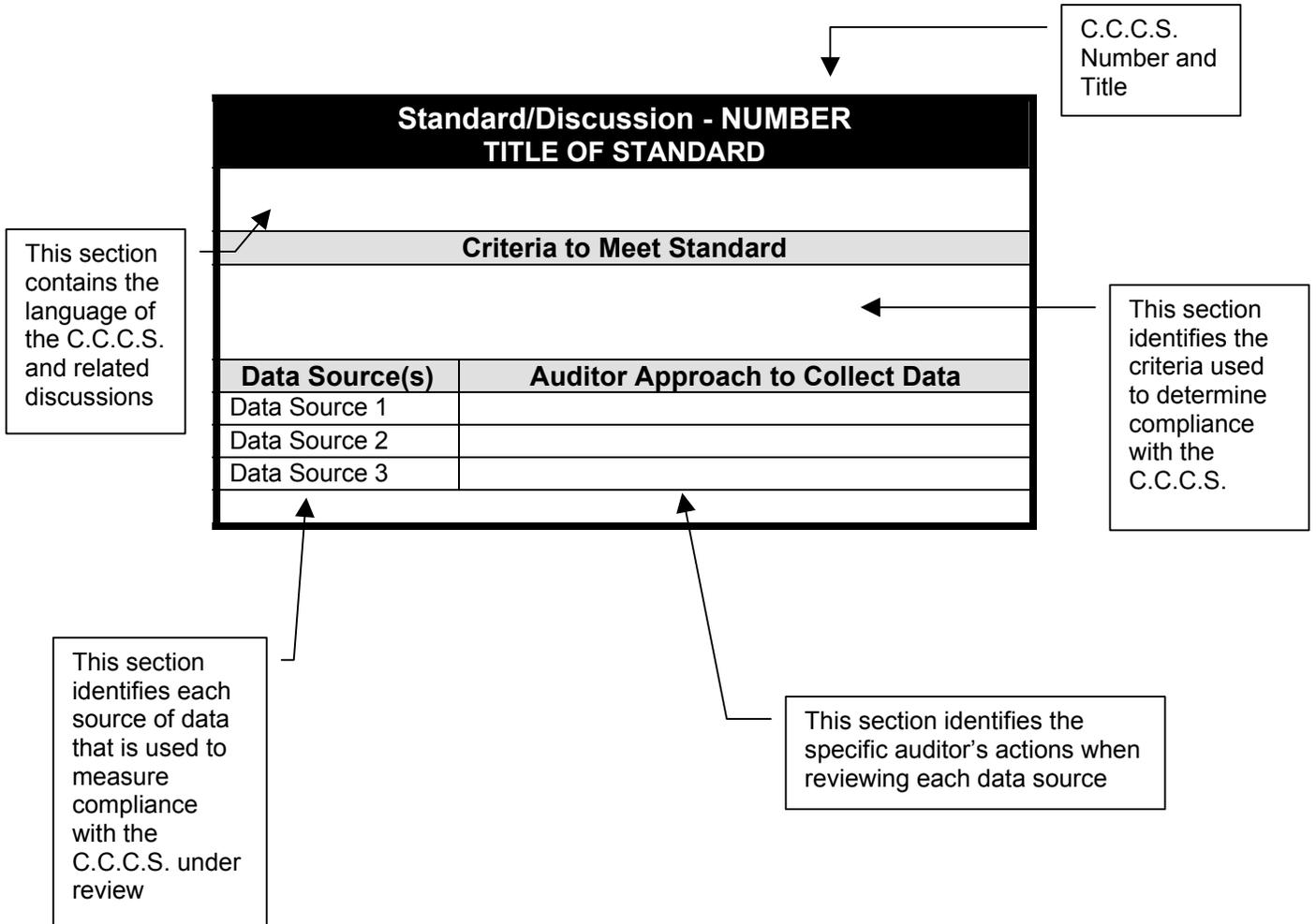
**85% Rule** – Used to measure standards that can be measured quantitatively. The method of measure will vary based on the specific standard. Several standards are measured based on a pass/fail basis. Examples may include: offender property inventory, termination summary, offender supervision plans and employee performance reviews. Each file will be evaluated to determine if these specific documents exist in the file and whether they have met the time frames of the applicable standard. For the program to be considered compliant, a minimum of 85% of the offender files in the sample must meet the standard.

Other standards may be measured differently based on a range of data collected during the audit period. Examples may include: weekly case management meetings, urinalysis/breath testing, off-site monitoring and monthly progress reviews. For the program to be considered compliant, a minimum of 85% of the weeks/months reviewed must meet the standard.

Glossary of terms can be found in the Colorado Community Corrections Standards, page 37. Administrative procedures for program audits and appeals can be found on page 42 of the standards.

# Format Guide

The following format is used for each C.C.C.S. standard in the Self Auditing Guidelines document. Reviewing and understanding the illustration below should assist in following the format used in this document.



## Section 1-000 ADMINISTRATION

### Standard/Discussion - 1-010 LEGAL ENTITY

The public or private agency operating a community corrections program shall be a legal entity or part of a legal entity. The administrators shall maintain a file at the local headquarters of the agency that includes current documentation as follows:

- a) Public Agencies
  - 1. The executive or legislative order of the unit of local government designating the agency as a community corrections program.
  - 2. An organizational chart indicating the agency's position within the local government and a listing of the administrative officer(s) authorized to act as the legal agent(s) of the agency.
- b) Private Agencies
  - 1. Certificate and articles of incorporation
  - 2. List of the Board of Directors
  - 3. Corporate bylaws and names of officers authorized to sign contracts or authorize expenditures.
  - 4. All documentation pertaining to the standards

#### Criteria to Meet Standard

Exhibit A must have every document listed in CCCS 1-010 according to the type of entity (private or public). Exhibit A must contain I.R.S. documentation which indicates tax status.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will review the appropriate documentation to determine if the agency is currently recognized as a legal entity

### Standard/Discussion - 1-020 MISSION STATEMENT

The administrators shall maintain a mission statement that describes the general purpose, goals, and organizational values guiding the operation of the program. The mission statement shall be reviewed at least annually and updated as needed.

#### Criteria to Meet Standard

Exhibit A must contain a copy of (or reference to) the current agency mission statement and a written statement from the Program Administrator that the mission statement has been reviewed, and the date of the last review

Data Source(s)	Auditor Approach to Collect Data
Exhibit A Review	Auditors will review the appropriate documentation to determine if the agency has a mission statement that meets the standard
Staff Interviews	Auditors will interview staff to determine familiarity with or knowledge of the agency mission statement

## Section 1-000 ADMINISTRATION

### Standard/Discussion - 1-030 ORGANIZATIONAL CHART

The administrators shall maintain a current internal organizational chart at each program location that accurately lists all positions involved in the community corrections program and demonstrates the lines of authority and agency structure. The organizational chart shall be reviewed annually and updated as needed.

#### Criteria to Meet Standard

Exhibit A must contain a copy of the current organizational chart. Exhibit A must also contain written acknowledgement from the Program Administrator that the organizational chart is current, is reviewed annually, and is updated as needed. Organizational chart must be maintained at all program locations

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will review the appropriate documentation to determine if the agency has an organizational chart that meets the standard
Observation (On Site)	Auditors will inspect the facilities to make sure a copy of the organizational chart is maintained at each program location.

### Standard/Discussion - 1-040 FISCAL OPERATIONS

The administrators shall manage the program's fiscal affairs with:

- a) An annual budget, prepared at the beginning of the contract period or organization's fiscal year, that anticipates revenue from individual sources and outlines projected expenditures by operational categories and line items. The budget shall be reviewed and updated throughout the year as required by the governing authority of the program.
- b) Written policies and procedures that employ recognized accounting procedures to control and record the receipt, maintenance and dispersal of funds associated with operation of the program.
- c) A system to regularly compare the actual revenues and expenditures associated with the operation of the program and the categories and line items of the annual budget.

#### Criteria to Meet Standard

- a) Exhibit A must contain annual budget forms as requested by DCJ.
- b) Exhibit A must contain written accounting policies and procedures as requested by DCJ.
- c) Exhibit A must contain written explanation of a system to compare actual operations to budget.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will review the appropriate documentation to determine if the agency manages the program's fiscal affairs according to the standard
Observation (On Site)	

## Section 1-000 ADMINISTRATION

### Standard/Discussion - 1-050 INDEPENDENT FISCAL AUDIT

The administrators shall provide to the DCJ a complete independent financial audit report(s) covering the agency's fiscal year(s) relevant to the contract period.

**Discussion/Definitions:** *The DCJ may waive the requirement for an annual audit and accept a financial review by an independent auditor if the DCJ and the local community corrections board concur, in writing, that the service of the program has been satisfactory and that a full independent audit has been completed within the past three years. If the community corrections program is operated as a unit of government or by a larger corporate entity, a segment audit or review may be required by the DCJ and/or local community corrections board.*

*A compilation of internally prepared financial statements will not be considered to be in compliance with this standard.*

#### Criteria to Meet Standard

Exhibit A must contain an annual independent financial audit or a written waiver from DCJ and the local community corrections board.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will review the appropriate documentation to determine if the agency complies with the standard.

### Standard/Discussion - 1-060 INSURANCE

The administrators shall maintain proof of insurance coverage at levels required in state contracts at the local program or agency headquarters.

#### Criteria to Meet Standard

Exhibit A must contain proof of insurance listing DCJ as “additional insured” and must include an *Additional Insured Endorsement* form

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will review the appropriate documentation to determine if the agency complies with the standard

## Section 1-000 ADMINISTRATION

### Standard/Discussion - 1-070 ANNUAL REPORT

The administrators shall prepare an annual report for the DCJ, the program's governing authority, the local community corrections board, and referral agencies. The report shall contain statistical summaries of activities and accomplishments during the year, delineated and segregated by sub-programs, such as IRT, non-residential and residential, with reference to the stated mission and goals of each component. Information shall include, but not be limited to, the number and types of offenders served, success rates, average length of placement, restitution paid to victims, and a listing of services provided to offenders.

**Discussion/Definitions:** *Annual reports provide important information to both the organization itself and to key external groups and individuals. The information demonstrates program accountability for the community. Individual program statistics are available for facility administrators from the Division of Criminal Justice, along with composite statewide statistics.*

#### Criteria to Meet Standard

Exhibit A must contain a copy of the program's most recent annual report

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will review the appropriate documentation to determine if the agency complies with the standard

## Section 2-000 PERSONNEL

### Standard/Discussion - 2-010 PERSONNEL POLICIES

The program shall maintain written personnel policies that are available to all staff and accessible by employees at their work sites. The policies shall include hiring practices, promotions, grievance procedures, staff development, performance appraisals, benefits, disciplinary procedures, terminations, and other requirements more fully described in this section

#### Criteria to Meet Standard

In order to meet standard, a program must have personnel policies in place which address all components specified in 2-010 and that support each of the following standards:

2-030	2-070	2-110
2-040	2-080	2-120
2-050	2-090	2-140
2-060	2-100	2-150

These must also be supported by documentation maintained in employee personnel files.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will request and review personnel policies
Staff Interviews	Auditor will interview staff to ensure awareness of policies and procedures and accessibility of policy manual.
Policy Review	Auditor will request and review required policies
Observation (On Site)	Audit will look for personnel policies and posted notices as required by law.
Personnel File Review	Auditor will ensure compliance with personnel policies

### Standard/Discussion – 2-020 JOB DESCRIPTIONS

The program shall maintain written job descriptions and salary ranges for all positions. The job descriptions shall include job titles, minimum qualifications, responsibilities and duties.

#### Criteria to Meet Standard

Program must have a job description and salary range for all positions. Program staff must demonstrate knowledge of job duties, responsibilities, and salary range

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will request copies of all job descriptions and revised job descriptions. Comparisons are made between the job descriptions, organizational charts, and salary range information provided to DCJ.
Staff Interviews	Auditor will ask for job title, job duties, and salary range
Personnel File	Auditor will review qualifications of staff and salary verification.

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-030 EQUAL EMPLOYMENT

The program shall maintain and implement hiring and promotion policies that provide equal employment opportunities and prohibit discrimination in accordance with state and federal law.

#### Criteria to Meet Standard

Program must have posted policies as required by the Equal Employment Opportunity Commission, and the State of Colorado, including, but not limited to:

Minimum Wage Notices  
Equal Employment Notices  
Worker's Compensation Notices

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will review personnel policies to determine the existence of required information
Observation (On Site)	Auditor will look for posted EEOC and notices as required by Federal Law.

### Standard/Discussion – 2-040 BACKGROUND CHECK

After applicants have been offered a conditional position, the program shall assure that a background investigation is conducted and the results are documented in the applicant's personnel file. The background investigation shall include a CCIC/NCIC criminal history and warrants check, verification of compliance with job qualifications, and a review for prior criminal record through fingerprint identification. The program shall submit a fingerprint card to the appropriate screening agency within 15 working days of the applicant's conditional hire. Until such time as a fingerprint record check is returned, the employee shall not work without direct supervision. The program shall obtain approval from the local community corrections board, referral agencies and the DCJ before employing anyone with a history of a felony conviction. The program shall not hire anyone who is under current jurisdiction for probation, parole, or other conditional release for a felony or misdemeanor offense (including driving under restraint, and driving under the influence or while impaired by alcohol or drugs).

#### Criteria to Meet Standard

Programs should provide evidence to the following:

- Background checks must be completed for all staff on or before date of hire
- Background check documentation in personnel file must contain each of the following:
  - NCIC/CCIC criminal history/warrants check
  - Verification of compliance with job qualifications, and
  - DCJ letter or other documentation of criminal record check through fingerprint identification
  - Written approval from appropriate agencies in cases where staff with felony criminal records are employed

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy supporting 2-040
Personnel File	Auditor will look for preliminary background check letter, fingerprint card response, arrest disposition information (as applicable), approval letters from required agencies (as applicable).
DCJ Files	Auditor will look for fingerprint cards, background check letters, criminal records data, arrest notices, waiver documentation, approval letters from required agencies (as applicable).

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-050 PERSONNEL FILE

The program shall maintain a confidential personnel file for each employee that is accessible to the individual employee. The file shall be maintained in a standardized and indexed format and shall contain records of the background investigations, dates of employment, training records, performance appraisals, commendations, disciplinary actions, and related records. Information from the files shall be available to the local community corrections board and/or state oversight agencies only for the purpose of verifying compliance with standards or contractual requirements. It shall be the responsibility of the local community corrections board and oversight agencies to maintain the confidentiality of the information

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Review index from personnel file
Staff Interviews	To determine access to personnel file
Observation (On Site)	Review maintenance/security of personnel files
Personnel File	Review file for contents

### Standard/Discussion – 2-051 EMPLOYEE MEDICAL RECORDS

Employee medical records shall be maintained in a separate individual file. Written policies and procedures shall govern the confidentiality of these medical records in accordance with current state and federal law.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Look for existence of policy supporting 2-051
Staff Interviews	Ask Human Resources personnel about location/storage of employee medical records
Personnel File	Check to see if medical records are maintained according to 2-051

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-060 PERFORMANCE APPRAISALS

The program shall conduct employee performance appraisals at least annually. Such appraisals shall be based upon defined criteria as established by the program. The results of the evaluation are to be discussed with the employee, the review signed by the employee and the evaluator, and a copy placed in the employee's personnel file.

#### Criteria to Meet Standard

**For individual record compliance:**

Performance appraisals shall contain all necessary signatures and dates and be completed annually. The timeframe between performance appraisals shall be no less than one year.

**For overall compliance:**

Refer to *85% Rule for Personnel Files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Look for defined criteria for performance appraisal (e.g. performance appraisal forms)
Staff Interviews	Look for staff involvement and knowledge of performance appraisal process
Personnel File	Look for existence of signed, dated, completed annual evaluations consistent with established criteria

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-070 ETHICAL RELATIONSHIPS

The program shall maintain current personnel policies that define ethical and professional conduct between staff or agents and offenders under supervision. The policies shall prohibit:

- a. The use of official positions to secure or receive advantages, gifts or favors.
- b. The display of favoritism or preferential treatment for individual offenders or groups of offenders.
- c. Any personal or business relationship with offenders or offenders' family or associates.
- d. The assignment of work duties that result in offenders having supervisory control over other offenders.
- e. The assignment of work duties to offenders that improve the value of the facility or provide personal benefit to any staff or agent of the program.

Program personnel shall report any attempt to violate these relationship guidelines immediately to the program director. Any exception to the above must be approved, in writing, by the program director.

#### Criteria to Meet Standard

See standard and above table

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for existence of policy that identifies each specified element of 2-070.
Staff Interviews	Auditor will look for staff understanding of reporting requirements
Client Interviews	Auditor will look for evidence of unreported violations
Observation (On Site)	Auditor will look for evidence of unreported violations and documentation of approved exceptions.

### Standard/Discussion – 2-080 NOTIFICATION OF CRIMINAL CONDUCT

Program personnel shall not engage in any criminal conduct. If any employee is investigated by law enforcement, arrested or charged with any criminal offense, the program shall notify the local community corrections board, referral agencies and the DCJ immediately by phone. The notification must clarify the work status of the employee during disposition of pending charges. The program director or administrators shall submit a written report to the board and state agencies within 72 hours of the telephone notification.

**Discussion/Definitions:** A sample form for documenting this information may be obtained from the DCJ web site.

#### Criteria to Meet Standard

See standard and above table

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for existence of policy
Staff Interviews	Auditor will look for staff understanding of reporting requirements
Personnel File	Auditor will look for documentation according to standard (if applicable)
DCJ Files	Auditor will look for documentation according to standard (if applicable)

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-090 DRUG FREE WORK PLACE

The program shall have a written policy that provides for an alcohol/drug-free workplace. At a minimum, the policy shall address the following areas:

- a. Prohibition of the use of illegal drugs.
- b. Prohibition of the possession of illegal drugs.
- c. Procedures used to ensure compliance with the alcohol/drug-free workplace policy.
- d. Availability of treatment and/or counseling for substance abuse.
- e. Penalties for violations of the policy.
- f. Specific circumstances under which substance testing of employees may be conducted in the following areas: pre-employment, random drug testing, and testing based on reasonable suspicion

#### Criteria to Meet Standard

See standard and above table

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for existence of policy and contents
Staff Interviews	Auditor will look for staff understanding policy
Observation (On Site)	Auditor will review contents of policy

### Standard/Discussion – 2-100 STAFF ORIENTATION TRAINING

All full-time and part-time program and security staff shall receive twenty hours of formal orientation training, including review of program policies and procedures relevant to the performance of their duties, before receiving an unsupervised work assignment. Provision of this orientation shall be documented in training or personnel files

#### Criteria to Meet Standard

Data Source(s)	Auditor Approach to Collect Data
<p><b>For individual record compliance:</b></p> <p>See standard and above table</p>	<p><b>For overall compliance:</b></p> <p>As evidenced by the personnel files, 100% of all new employees must have the number of hours required by the standard</p>

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for existence of policy and number of orientation training hours documented per employee. <i>Refer to 2-130 for training that will be counted in the audit process.</i>
Staff Interviews	Auditor will confirm formal orientation training
Personnel File	Auditor will look for training documentation which must include the number of training hours and training topic(s)

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-110 STAFF ANNUAL TRAINING

All full-time program and security staff shall receive a minimum of forty hours of job-related training annually. In the first year of employment, twenty hours may be the formal orientation training addressed in standard 2-100. Part-time program and security staff shall receive a prorated amount of training equivalent to that provided to full-time staff.

#### Criteria to Meet Standard

**For individual record compliance:**

See standard and above table

**For overall compliance:**

Refer to *85% Rule for Personnel Files*

#### Data Source(s)

#### Auditor Approach to Collect Data

Exhibit A	Auditor will look for existence of policy and number of annual training hours documented per employee. <i>Refer to 2-130 for training that will be counted in the audit process.</i>
Staff Interviews	Auditor will confirm formal orientation training
Personnel File	Auditor will look for training documentation

### Standard/Discussion – 2-120 ANCILLARY AND ADMINISTRATIVE TRAINING

Ancillary and administrative staff shall receive a minimum of twenty hours of job-related training annually. During their first year of employment, this training shall include a documented review of the program policies and procedures relevant to the performance of their job and a general orientation to the program. Part-time ancillary and administrative staff shall receive a prorated amount of training equivalent to that provided to full-time staff.

**Discussion/Definitions:** *The general orientation to the program, although not as comprehensive as that required for program and security staff in standard 2-100, should include an overview of the various services provided to offenders by the program, an informal tour, and other features which will give the ancillary and administrative staff a general understanding of how the program operates*

#### Criteria to Meet Standard

**For individual record compliance:**

See standard and above table

**For overall compliance:**

Refer to *85% Rule for Personnel Files*

#### Data Source(s)

#### Auditor Approach to Collect Data

Exhibit A	Auditor will look for existence of policy and number of annual training hours documented per employee. <i>Refer to 2-130 for training that will be counted in the audit process.</i>
Staff Interviews	Auditor will confirm formal orientation training
Personnel File	Auditor will look for training documentation

## Section 2-000 PERSONNEL

### Standard/Discussion – 2-130 TRAINING EVENTS

Training events shall be documented in personnel or training files with topic, date, duration, trainer, participants, evaluation methods or results, and shall include the employee's and the supervisor's signature. Training events must be:

- a. Sanctioned by the agency
- b. Based on pre-determined training objectives or goals
- c. Related to the job
- d. Scheduled in advance of the event
- e. Delivered by a qualified trainer

**Discussion/Definitions:** *Examples of acceptable trainings include first aid/CPR courses, training videos or workshops by qualified instructors, and "on the job" training with specific objectives that meet the qualifications detailed in the standard. Activities such as performance evaluations, supervision or staff meetings without pre-determined training objectives, or informal tours, do not qualify as training*

#### Criteria to Meet Standard

Training documented in personnel files must meet each of the criteria in 2-130 to be counted in the audit process. It will be up to the professional judgment of the auditor to determine if the training meets 2-130 overall

#### Data Source(s)

#### Auditor Approach to Collect Data

Personnel File	Auditor will look for type of training
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### Standard/Discussion – 2-140 CASE MANAGER EDUCATION

Program case managers shall have a baccalaureate degree in social or behavioral sciences, criminal justice, or related fields. Related education or experience may be substituted on a year for year basis

#### Criteria to Meet Standard

**For individual record compliance:**

**For overall compliance:**

See standard and above table

Refer to *85% Rule for Personnel Files*

#### Data Source(s)

#### Auditor Approach to Collect Data

Exhibit A	Auditor will look for level of formal education and experience
Staff Interviews	Auditor will look for level of formal education and experience
Personnel File	Auditor will look for documented compliance with staff qualification requirements

## Section 2-000 PERSONNEL

<b>Standard/Discussion – 2-150 PROGRAM ADMINISTRATOR EDUCATION</b>	
The program administrator shall have, at a minimum, a baccalaureate degree in social or behavioral sciences, criminal justice, business or public administration, or related fields; or four years of related administrative or management experience	
Criteria to Meet Standard	
<b>For individual record compliance:</b>	<b>For overall compliance:</b>
See standard and above table	<i>Pass/Fail</i>
Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for level of formal education and experience
Staff Interviews	Auditor will look for level of formal education and experience
Personnel File	Auditor will look for documented compliance with staff qualification requirements

<b>Standard/Discussion – 2-151 SECURITY STAFF EDUCATION</b>	
All security staff shall have, at a minimum, a GED or High School Diploma.	
Criteria to Meet Standard	
<b>For individual record compliance:</b>	<b>For overall compliance:</b>
See standard and above table	<i>Pass/Fail</i>
Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for level of formal education and experience
Staff Interviews	Auditor will look for level of formal education and experience
Personnel File	Auditor will look for documented compliance with staff qualification requirements

<b>Standard/Discussion – 2-152 STAFF AGE REQUIREMENT</b>	
Any staff member who has contact with offenders must be at least 18 years old.	
Criteria to Meet Standard	
<b>For individual record compliance:</b>	<b>For overall compliance:</b>
See standard and above table	<i>Pass/Fail</i>
Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look at the dates of birth for the staff
Staff Interviews	Auditor may ask staff about their age at the time of employment
Personnel File	Auditor will look for dates of birth in personnel files

## Section 2-000 PERSONNEL

<b>Standard/Discussion – 2-160 VOLUNTEERS</b>	
All volunteers shall be subject to all standards related to their assigned duties.	
Criteria to Meet Standard	
<b>For individual record compliance:</b>  See standard and above table	<b>For overall compliance:</b>  Refer to <i>85% Rule for Personnel Files</i>
Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for existence of policy
Personnel File	Auditor will look for level of formal education and experience
DCJ Files	Auditor will look for documented compliance with staff qualification requirements
Volunteer Interview	Auditor will look for documented compliance with staff qualification requirements

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-010 POLICY AND PROCEDURE MANUAL

The program shall maintain a current policy and procedure manual readily accessible by all staff, that describes the purpose, philosophy, programs and services, and operating procedures of the program. The manual shall address all requirements, programs, or services delineated by these standards. The program shall operate in accordance with this manual and all staff shall be familiar with its contents. The manual shall be reviewed at least annually by the governing authority or program administrator, and updated when necessary. The program shall outline a system to ensure that changes in program policies and procedures are reviewed, prior to their implementation, with any state agency or local community corrections board that will be affected by the change.

**Discussion/Definitions:** *Policies articulate the organization’s position and direction on operational issues and must be current. Procedures define and describe the activities and methods to implement the policies. Procedures should be developed on all operational functions, including, but not limited to, intake, orientation, evaluation, assessment, sign in/out, case processing plans, facility searches, U/A’s, terminations, escapes, etc. Changes to the program’s policy and procedure manual must be made available to applicable staff and state oversight agencies. Both local and state oversight agencies must be provided with current copies of the policy and procedure manual, if requested*

#### Criteria to Meet Standard

See standard and above table

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will verify that policy manual exists and is reviewed annually.
Staff Interviews	Auditors will ask staff about their knowledge of the policy manual contents and about the program’s use of its own policies.
Observation (On Site)	Auditors will look for policy manual on site

### Standard/Discussion – 3-020 MONTHLY STAFF MEETINGS

The program shall have a written policy requiring monthly staff meetings that include security and program staff. Documentation of the meetings shall include dates, times, issues discussed and staff attendance.

**Discussion/Definitions:** *Staff meetings are essential to program cohesiveness. Security staff, program staff, and the program administrators need to have regular opportunities to communicate about issues regarding offenders in the program (e.g. criminal history, attitude, program adjustment, responses to sanctions, and other issues related to offender management and risk reduction). Staff meetings are also an opportunity to review policies and procedures to ensure consistency and compliance by all staff, as well as possible improvements.*

#### Criteria to Meet Standard

See standard and above table

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will look for policy and established schedule for staff meetings.
Staff Interviews	Staff will be interviewed regarding the frequency and content of staff meetings.
Observation (On Site)	Auditor will review sample of monthly meeting documentation and compare with Exhibit A information

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-030 ACCEPTANCE CRITERIA

The program shall establish written screening criteria or guidelines for the acceptance or rejection of offenders referred by state criminal justice agencies and the transfer of offenders between residential and non-residential supervision. Copies of the criteria or guidelines shall be provided to the local community corrections board, the Department of Corrections, the Division of Criminal Justice, the Chief Probation Officer for each Judicial District referring offenders, and the Chair of the State Parole Board. Subsequent changes to those criteria or guidelines shall be provided, in writing, to all agencies affected by the change within thirty days of such issuance.

***Discussion/Definitions:** The criteria or guidelines provide referral agencies with information regarding offenders acceptable for placement. The criteria also more clearly define a program's target population, providing opportunities to specialize programming to supervise and serve that population. The criteria or guidelines governing acceptance should include, but not be limited to: types of information to be gathered and reviewed on applicants prior to admission; specific criteria for acceptance; and procedures to be followed when accepting or not accepting referrals*

#### Criteria to Meet Standard

See standard and above table

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for screening criteria and the related policy
Staff Interviews	Interview staff directly involved in screening process for knowledge/awareness of acceptance criteria

### Standard/Discussion – 3-040

#### WRITTEN RESPONSE TO REFERRAL AGENCIES

The program shall provide a written response to the referring agency within two weeks of the receipt of the referral indicating acceptance, rejection, or need for additional information, based on criteria established in standard 3-030.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will look for existence of policy and procedures in the Exhibit A.

### Standard/Discussion – 3-050

#### SCREENING CRITERIA RE: DISCRIMINATION

The program shall have screening criteria that prohibit discrimination on the basis of ethnicity, primary language, color, religion, creed, disability, sexual preference or national origin

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditors will look for existence of written screening criteria.

## Section 3-000 MANAGEMENT CONTROLS

<b>Standard/Discussion – 3-060 PROGRAM COMPLIANCE</b>	
The program shall comply with special conditions as required by the referring agency or community corrections board	
Criteria to Meet Standard	
<b>For individual record compliance:</b>	<b>For overall compliance:</b> <i>Refer to 85% rule for offender files</i>
Data Source(s)	Auditor Approach to Collect Data
Case File Reviews	Auditor will review board screening forms and referral agency forms to determine compliance with any special conditions in program plans or chronological entries.
Staff Interviews	Auditor will interview staff in cases where compliance with special conditions is not documented through case file reviews.
Other (Subcontracts)	Auditor will review board subcontracts to look for any special conditions.

<b>Standard/Discussion – 3-070 RECEIVING OFFENDERS</b>	
The program shall receive an offender only if:	
<ul style="list-style-type: none"> <li>▪ The local community corrections board has approved the placement or the offender meets board eligibility requirements; and</li> <li>▪ A court order has been issued specifying the offender's sentence to community corrections; or</li> <li>▪ An Executive Assignment Order (EAO) has been issued from the Department of Corrections; or</li> <li>▪ A copy of the Parole Agreement/Order (PAO) or modification specifying the placement in community corrections has been issued</li> </ul>	
Criteria to Meet Standard	
<b>For individual record compliance:</b>	<b>For overall compliance:</b>
Each applicable form must be in offender case file.	<i>Refer to 85% rule for offender files</i>
Data Source(s)	Auditor Approach to Collect Data
Case File Reviews	Auditor will look for all applicable forms in case file.

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-080 SUPERVISION OF SEX OFFENDERS

Any program supervising sex offenders and domestic violence offenders must comply with to the requirements of the Colorado Revised Statutes, as amended, on sex offender management and domestic violence offender management

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will review treatment provider documentation
Staff Interviews	Staff will be interviewed regarding their knowledge/awareness of SO/DV standards.
Client Interviews	(Optional) – Auditor may interview clients in cases where further exploration is warranted
Observation (On Site)	Auditor will look for Sex Offender/Domestic Violence standards on site

### Standard/Discussion – 3-090 VICTIM NOTIFICATION

Any program supervising offenders serving a sentence for any of the offenses listed within the Victim Rights Act must conform to the requirements of the Colorado Revised Statutes, as amended, on victim notification requirements.

#### Criteria to Meet Standard

Pass/Fail – See Victim’s Rights Statutes(s) - C.R.S. 24-4.1-301 et seq.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will review victim notification forms. Forms must be maintained in a confidential file separate from the offender files.

### Standard/Discussion – 3-100 DNA TESTING

The program shall comply with the DNA testing requirements as specified by Colorado Revised Statutes, as amended.

#### Criteria to Meet Standard

Pass/Fail – See DNA Testing Statutes(s) - C.R.S. 16-11-102.3 et seq.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will review mittimus to look for a written order requiring DNA testing.
Other _____	Auditor will review board policies for DNA testing

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-110 FAMILY/COMMUNITY ACTIVITIES

The program shall have written policies and procedures that provide increasing opportunities and privileges for offender involvement with family and community activities prior to final release.

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for implementation of program policy
Staff Interviews	Auditor will verify compliance with program policy
Client Interviews	Auditor will verify compliance with program policy

### Standard/Discussion – 3-120 DISCIPLINARY HEARINGS

The program shall have written policies and procedures to specify timely arrangements and appropriate procedures for offender disciplinary hearings and decisions. Disciplinary hearings for rule violations by Transition offenders and Parolees shall be conducted in a manner approved by the Department of Corrections. Disciplinary hearings for court-referred offenders shall be conducted in a manner approved by the community corrections board and local probation office. These procedures shall be provided to the offender in writing in accordance with time frames established in standard 4-010.

#### Criteria to Meet Standard

<p><b>For individual record compliance:</b></p> <p>Each applicable form must be in offender case file.</p>	<p><b>For overall compliance:</b></p> <p>Refer to <i>85% rule for offender files</i></p> <p><i>See also Standard 4-010</i></p>
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Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for implementation of disciplinary hearing policy (including the policy acknowledgement form signed by the offender)
Staff Interviews	Auditor will verify awareness of disciplinary hearing policy
Client Interviews	Auditor will verify awareness of disciplinary hearing policy

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-130 GREIVANCE/APPEALS PROCEDURE

The program shall have written policies and procedures for the handling of offender grievances or complaints, including an appeal procedure. This policy must state that each offender in the program has the right to file a grievance and include the following areas:

- The various levels of appeal;
- Time guidelines and policy for response to the grievance shall be provided to offenders in writing;
- The grievance shall be transmitted without alteration, interference, or delay to the party responsible for receiving and investigating grievances;
- The person reporting the grievance should not be subject to any adverse action as a result of filing the report.

Records of all grievances or complaints, and the final disposition, shall be maintained in offender case records as well as a centralized administrative file.

#### Criteria to Meet Standard

##### For individual record compliance:

Each applicable form must be in offender case file

##### For overall compliance:

Refer to *85% rule for offender files*

*See also Standard 4-010*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for implementation of offender grievance policy (including the policy acknowledgement form signed by the offender)
Staff Interviews	Auditor will verify awareness of offender grievance policy
Client Interviews	Auditor will verify awareness of offender grievance policy
Observation (On Site)	Auditor will look for access to blank grievance forms in the facility

### Standard/Discussion – 3-140 ON/OFF GROUNDS COUNT

The program shall be responsible for reporting the Daily Offender On and Off-grounds Count to the Division of Community Corrections in the Department of Corrections each day according to procedures established by the Department of Corrections and the DCJ.

**Discussion/Definitions:** *The Department of Corrections forwards these daily count sheets to the DCJ for further review. All populations reported on the count sheet are reviewed and should be accurately reported.*

#### Criteria to Meet Standard

Programs must submit forms a minimum of 85% of the days recorded in the auditor's 3-month sample

Data Source(s)	Auditor Approach to Collect Data
Exhibit A Review	Auditor will look for policy and procedure consistent with the requirements of the standard
Other (Daily Count Forms/Database)	Auditor will calculate the percentage of forms received/missing on a daily basis in a 3-month sample.

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-150 REFERRAL AGENCY REPORTS

The program shall have written policies and procedures to define and specify procedures for dissemination of routine documentation, such as: supervision plans, supervision plan modifications, termination summaries, and quarterly and monthly reports, as requested by referring or oversight agencies.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard

### Standard/Discussion – 3-160 OFFENDER TIME CREDITS

The program shall have written policies and procedures to define the calculation of time credit or sentence reduction for offenders in accordance with procedures outlined by the Department of Corrections for Transition offenders, or as specified in Colorado Revised Statutes, as amended, for Direct Sentence offenders. A current copy of this calculation shall be maintained in the offender's individual case file.

**Discussion/Definitions:** *Procedures and forms to meet this standard have been distributed to programs and are available upon request from the DCJ or at the DCJ website. Forms and procedures are subject to revision and must be used and followed*

#### Criteria to Meet Standard

For individual record compliance:	For overall compliance:
Each applicable form must be in offender case file	Refer to <i>85% rule for offender files</i>

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for completed and signed time credit forms
Staff Interviews	Auditor will verify awareness of time credits policy
Client Interviews	Auditor will verify awareness of time credits policy

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-170 INCIDENT NOTIFICATION

The types of incidents regarding offenders that require written notification to referral and oversight agencies shall include, but are not limited to:

- a. Medical emergencies requiring hospitalization
- b. Arrest
- c. Illegal weapon possession
- d. Media involvement
- e. Death
- f. Violent acts per 16-11-309, C.R.S.
- g. Escapes
- h. Use of force

The format and deadlines for each notification may vary depending upon the referral or oversight agency, and should be included in program policy and procedure.

#### Criteria to Meet Standard

Pass/Fail

**Data Source(s)**

**Auditor Approach to Collect Data**

Exhibit A

Auditor will look for policy and procedure consistent with the requirements of the standard

### Standard/Discussion – 3-180 SYSTEMATIC FILE REVIEW

All active individual offender case records shall be audited within the first 45 days of admission. At a minimum, the records shall be audited to assure all documentation required by standards is present: admission documents, assessments, supervision plans and revisions, chronological notes, etc., and in the appropriate order prescribed by agency policy and procedures. A similar audit of the file shall be completed within 30 days of termination. Review shall be documented in each case record.

#### Criteria to Meet Standard

**For individual record compliance:**

**For overall compliance:**

Each applicable audit form must be in offender case file

Refer to *85% rule for offender files*

**Data Source(s)**

**Auditor Approach to Collect Data**

Exhibit A

Auditor will look for policy and procedure consistent with the requirements of the standard

Case File Reviews

Auditor will look for completed, signed, and dated audit forms

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-190 SELF-AUDITS OF OPERATIONS AND PROGRAMMING

The program shall have written policies and procedures that provide for a well-documented system of regular internal auditing and self-monitoring of operations and programming. The following functions shall have a documented review or audit by program staff at least once every calendar quarter:

- a. Drug and alcohol testing systems
- b. Medication monitoring
- c. Sign-in/out records (residential only)
- d. Off-site monitoring records
- e. Contraband inspections
- f. Offender service delivery reports (including attendance logs, progress notes, treatment curriculum, etc.)
- g. Headcounts
- h. Monthly service standards for non-residential offenders
- i. Quarterly testing of fire prevention alarm systems
- j. Quarterly emergency evacuation drills

Audit documentation for each of these functions shall be maintained by the program.

The audit documentation shall include recommendations by staff auditor(s) for enhancements and/or modifications to existing program policies, procedures, and practices based on internal audit outcomes to ensure compliance with standards.

**Discussion/Definitions:** *Internal audits may discover errors of commission as well as omission and serve a quality control function for the program operations.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	(Optional) Auditor will look for auditing documentation
Staff Interviews	(Optional) Auditor will verify auditing procedures
Observation (On Site)	Auditor will look for auditing documentation

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-200 ORGANIZED INFORMATION COLLECTION

The program shall have access to and use an organized system of information collection, retrieval and review. All records, printed or electronic, shall be available upon request, for review by referral and oversight agencies. The Information Technology System (ITS) shall have a backup system to ensure data retention and availability in accordance with contract requirements.

**Discussion/Definitions:** *It is recommended that the program establish an ITS for collecting statistical data, and review this data for future planning purposes. An organized system of data collection will provide the program with information to determine the type of offender best served by the program and the trends in its referral and intake system. Program staff should participate in identification of information needs, and guidelines should be established concerning the security of all information on offenders*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for organization of information collection, retrieval, and review
Observation (On Site)	Auditor will look for organization of information collection, retrieval, and review. ITS back-up system will be inspected

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-210 DOCUMENTATION

The program shall have policies and procedures to require that all program documentation be legible, accurate and systematically filed. Program documentation shall be signed and dated by all parties involved, i.e., intake paperwork, supervision plans, plan revisions, progress reports, etc. The signature can be original or documented via electronic means (electronic signature and/or biometric verification). Electronic signatures and biometric verification methods must be secure and auditable.

#### Criteria to Meet Standard

(Overall evaluation based on auditor's professional judgment and discretion)

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for organization, legibility and accuracy of information
Observation (On Site)	Auditor will look for organization, legibility and accuracy of information

### Standard/Discussion – 3-220 NON-RESIDENTIAL LEVEL OF SUPERVISION

Each non-residential offender shall be assigned to one of the following levels of supervision based on the offender's risk of re-offending, need for services (as determined by the standardized offender assessment process), and adjustment to supervision:

1. Intensive
2. Regular
3. Minimum
4. Administrative

Monthly service standards for the levels shall be:

Frequency of Services Each Month by Level				
Service	Level			
	1	2	3	4
Case Management Meetings	4	3	2	1
Phone Contacts	3	2	1	1
Employment Verifications	2	2	1	1
Home Visits	1	1	*	*
Drug Testing	2	2	1	*
Breathalyzer Testing	2	1	1	1

(NOTE: Any service frequency listed as "\*" above shall be conducted at least once each quarter.)

#### Criteria to Meet Standard

All six areas of service will be scored independently using the *85% Rule for Offender Files*.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Review	Auditor will compare levels of service provided to levels of services billed
Billing Documentation	Auditor will compare levels of service provided to levels of services billed.

## Section 3-000 MANAGEMENT CONTROLS

### Standard/Discussion – 3-230 ADMINISTRATIVE REVIEW

The procedures that result in transfers from a lower to a higher level of supervision shall provide for an administrative review for the offenders affected by the transfers pursuant to Colorado Revised Statutes.

#### Criteria to Meet Standard

Pass/Fail - See Administrative Review - C.R.S. 17-27-101 et seq.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	(Optional) – Auditor may interview staff to verify compliance of program policy
Client Interviews	Auditor will review examples of applicable cases. Documentation should follow program policy

## Section 4-000 SECURITY

### Standard/Discussion – 4-010 OFFENDER ADVISEMENT

Within 12 hours of admission each offender shall be advised in writing of the following:

- a) Program rules and regulations
- b) Disciplinary actions
- c) Grievance procedures
- d) Program orientation
- e) Facility emergency equipment and exits
- f) Location of community legal services
- g) Services provided by the program
- h) Personal responsibility for medical and dental services/expenses
- i) Location of emergency medical and other health care services

The staff and the offender shall sign and record the date and time of the notification, and a copy shall be maintained in the offender's case record.

#### Criteria to Meet Standard

**For individual record compliance:**

Forms without staff and offender signature, date, and time of advisement will not be counted as compliant with the standard.

**For overall compliance:**

Refer to *85% rule for offender files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for a signed and dated document that corresponds to each item listed in the standard
Client Interviews	Auditor will interview clients related to their advisement of the items listed in the standard

## Section 4-000 SECURITY

### Standard/Discussion – 4-020 INTAKE INTERVIEW

An intake interview shall be completed with each incoming offender within 12 hours of admission. Each offender shall be interviewed to record, at a minimum, the following basic information:

- a) Name
- b) Address
- c) Date of Birth
- d) Gender
- e) Race/Ethnicity
- f) Social Security number
- g) Contact person in case of emergency
- h) Person authorized to claim property if not claimed by the offender (residential only)
- i) Photograph of the offender
- j) Entry date and time

The staff and the offender shall sign and record the date and time of the notification. A copy shall be maintained in the offender's case record

#### Criteria to Meet Standard

**For individual record compliance:**

A case file must document that offender was interviewed by a staff member within 12 hours of the offender's entry. Forms without staff and offender signature, date, and time of interview will not be counted as compliant with the standard.

**For overall compliance:**

Refer to *85% rule for offender files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for a signed and dated document that corresponds to each item listed in the standard
Client Interviews	Auditor will interview clients related to their intake interview

## Section 4-000 SECURITY

### Standard/Discussion – 4-030 HEALTH INVENTORY

Within 12 hours of admission a health inventory of the offender shall be conducted. The inventory shall, at a minimum, include the following items: special dietary needs, current medications, current medical needs/concerns, dental problems and other health problems, as reported by the offender. The inventory shall be documented by date, time and signature of the offender and the staff conducting the interview and shall be maintained in the offender's case record

#### Criteria to Meet Standard

**For individual record compliance:**

A case file must document that staff administered a complete health inventory of the offender within 12 hours of the offender's entry.

**For overall compliance:**

Refer to *85% rule for offender files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for a signed and dated document that corresponds to each item listed in the standard
Client Interviews	Auditor will interview clients related to their health inventory interview

## Section 4-000 SECURITY

### Standard/Discussion – 4-040 MEDICATION

All prescribed medications for offenders shall be secured and their use shall be monitored to ensure compliance with instructions of the prescribing medical authority. Records shall be kept to document this monitoring of prescribed medications to offenders and these records and medications shall be audited at least twice each month. Policies and procedures shall govern the disposal of unused medications. Policies and procedures shall address the circumstances under which the offender may take non-controlled, prescribed medication off grounds.

#### Criteria to Meet Standard

##### For individual record compliance:

Policy must:

- 1) Require that all prescribed medications be adequately labeled, and include all prescription directions. All medications should be kept in the original container
- 2) Ensure that prescribed medications are not physically distributed by staff but rather, require staff to ensure the quantity taken by the offender is consistent with prescription directions
- 3) Require that staff document each ingestion or use of medication. Documentation must include date, time, name of offender, type of medication, amount to be taken from container, amount taken, and signature of staff observing medication use. Documentation must also include the deduction of all amounts taken from an ongoing medication count/balance.
- 4) Require that prescription refills be clearly indicated in medication documentation, to include the date and quantity of the refill.
- 5) Require that the use of medication prescribed to address the offender's treatment/programming needs (e.g. Disulfuram), mental health needs (e.g. lithium, Prozac) or other circumstances where public safety concerns are indicated, be closely observed by staff. Staff should physically witness the offender taking these medications. Unlike the use of other medications (where use is the responsibility of the offender), policy must provide procedures which ensure precise consistency between prescription directions and actual rates of ingestion.
- 6) Define the objective and outline the procedures to be used for medication audits. Procedures should include guidelines for the uniform documentation of the audits and must include date and time of the audit, signature of the staff conducting the audit, results of the audit, and actions taken as a result of the audit.

##### For overall compliance:

85% of all medication records selected for the audit sample must comply with the standard

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will physically inspect medication storage to determine compliance with the standard.
Other (Medication Records)	Auditor will review medication records

## Section 4-000 SECURITY

Standard/Discussion – 4-050 STAFF RESPONSE TO MEDICAL EMERGENCIES	
The program shall have written policies and procedures that direct staff response to offender medical emergencies.	
Criteria to Meet Standard	
Pass/Fail	
Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff related to their knowledge of the medical emergency procedures

Standard/Discussion – 4-060 FIRST AID/CPR CERTIFICATION	
The program shall have at least one staff member on duty at all times who is trained in emergency first aid and CPR.	
Criteria to Meet Standard	
(Overall evaluation based on auditor's discretion)	
Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff related to the scheduling of staff with CPR/Standard First Aid certification.
Personnel File Review	Auditor will document Standard First Aid/CPR certificates of each staff member. Expired certificates will not count as compliant with the standard.

## Section 4-000 SECURITY

### Standard/Discussion – 4-070 OFFENDER PROPERTY

The residential program shall have policies and procedures for a system to inventory and secure incoming offender property within 12 hours of admission. Procedures shall specify which items are allowable for offender possession or storage at the facility. A copy of the inventory, signed and dated by both staff member and offender, shall be provided to the offender at intake. Policies and procedures shall also address the maintenance of the inventory after admission, and shall dictate proper disposal of property upon the offender's departure if not claimed by the offender.

#### Criteria to Meet Standard

**For individual record compliance:**

A case file must document that staff administered an initial property inventory of the offender within 12 hours of the offender's entry.

**For overall compliance:**

Refer to *85% rule for offender files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for a timed and dated form (with staff and offender signature) that documents the property inventory. Maintenance/updated property inventories must also contain dates, times, staff, and offender signatures to be compliant.
Client Interviews	Auditor will interview clients related to their property inventories.

## Section 4-000 SECURITY

### Standard/Discussion – 4-080 SUBSTANCE ABUSE TESTING

The program shall have written policies and procedures that govern the substance abuse testing of all offenders and shall address, at a minimum, the following areas:

- a. The time lapse between offender notification of testing and the collection of samples for urinalysis shall be no more than 2 hours.
- b. Chain of custody and testing of samples shall be designed to meet acceptable evidentiary standards. Documentation shall include the date and time of tests, substances tested, staff and offender identification.
- c. Urinalysis samples shall be stored in a manner that is approved in writing by the outside testing laboratory.
- d. Programs utilizing in-house substance abuse testing equipment, to include breath testing equipment, shall operate in accordance with the manufacturer's guidelines, including collection, storage and testing and shall maintain certification documentation within the personnel files of all operators.
- e. Programs utilizing drug screening kits shall ensure that the kits meet Food and Drug Administration standards and are used in strict compliance with the manufacturer's instructions.
- f. Programs shall conduct urinalysis and other testing for alcohol and controlled substances using basic safety precautions.
- g. Programs shall visually monitor urinalysis collection using staff of the same gender as the person being tested.
- h. Programs utilizing outside testing shall maintain documentation of the laboratory's license or certification.
- i. Offenders shall not be charged an additional fee for substance abuse testing except as noted in 4-090, or without written approval of the DCJ.

**Discussion/Definitions:** *Due to the serious consequences for offenders with positive urinalysis results, precautions must be taken to ensure the proper collection, supervision, handling, storage, transportation, and testing of urine samples. Sensible sanitary practices should be followed. No smoking, eating or drinking shall be allowed at the testing site. Rubber gloves should be used by all staff during the handling of samples. No food or medications should be stored in the immediate vicinity where urine samples or test chemicals are stored.*

#### Criteria to Meet Standard

(Overall evaluation based on auditor's discretion using the following general guidelines)

Very Satisfactory	All components of the policy requirements are met AND Program practice complies with policy and procedure
Satisfactory	Most components of the policy requirements are met AND Program practice complies with policy and procedure
Needs Improvement	Policy and/or procedure is inadequate OR Program practice does not regularly follow policy and procedure
Unsatisfactory	Policy and/or procedure is absent OR Program practice does not follow policy and procedure

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will review urinalysis-testing documentation and offender financial records
Observation (On Site)	Auditor will observe process for chain of custody and storage

## Section 4-000 SECURITY

### Standard/Discussion – 4-090 CONFIRMING POSITIVE TEST RESULTS

All positive test results that the program intends to use to transfer an offender to a higher level of custody shall be confirmed by gas chromatography/mass spectrometry (GC/MS) at an outside laboratory, except when an offender admits to use.

The program shall not pass along the costs of confirmatory tests to the offender if the initial test result proves to have been a false positive, unless it can be shown that the false positive was likely caused by use of an adulterant, masking agent, or other attempted manipulation of the test result by the offender.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Client Interviews	Auditor will look for evidence of GC/MS confirmation of positive UA's when appropriate.

### Standard/Discussion – 4-100 ENTRY URINE SAMPLES

A urine sample shall be taken within 12 hours of the offender's admission into the program. This initial sample shall be tested for the following controlled substances:

- a) Cocaine metabolite
- b) THC
- c) Amphetamines
- d) Opiates
- e) Barbiturates

All entry urine samples shall be tested, using any private clinical laboratory, or by using in-house substance abuse testing equipment. Drug screening kits may not be used for this purpose. An entrance urinalysis test is not required if an offender transfers from residential to non-residential when both programs are operated by the same community corrections agency.

**Discussion/Definitions:** *Timely initial substance testing can provide the program with valuable information concerning the offender's substance use and condition at time of admission. The information can be used to direct future substance testing as well as programming.*

#### Criteria to Meet Standard

For individual record compliance:	For overall compliance:
A case file must document that staff administered an initial UA within 12 hours of the offender's entry. In cases where the offender is transferred within the same community corrections agency, and there is no break in custody, exceptions are made as indicated in the standard.	Refer to 85% rule for offender files

Data Source(s)	Auditor Approach to Collect Data
Case File Reviews	Auditor will look for an intake UA within 12 hours of the offender's entry that meets the requirements of the standard
Observation (On Site)	Auditor will review the procedures used to test samples to determine compliance with the standard

## Section 4-000 SECURITY

### Standard/Discussion – 4-110 INTERIM URINE SAMPLES

Interim urinalysis testing shall be conducted randomly on each offender. For offenders in a residential program these interim tests shall be conducted at least twice during each full calendar month. For offenders under non-residential supervision the interim testing shall be conducted in accordance with standard 3-220. Each interim sample shall be tested for at least two of the following controlled substances:

- a) Cocaine metabolite
- b) THC
- c) Amphetamines
- d) Opiates
- e) Barbiturates

Offenders shall be tested for their drug of choice at least once a month. Gaps between urine tests shall not exceed 30 days.

**Discussion/Definitions:** *Alcohol is not considered a controlled substance and is not tested under this standard. The above testing rates represent minimum testing requirements. More frequent testing may be indicated for some offenders based on case assessment or requests by referring agencies. The offender's drug of choice should be determined by reference to the Pre-Sentence Investigation Report (PSIR), the Inmate Assessment and Treatment Form (IATF) or the Standardized Offender Assessment (SOA).*

#### Criteria to Meet Standard

**For individual record compliance:**

A case file must document that staff administered interim U.A.s' according to the requirements of the standard.

**For overall compliance:**

Refer to *85% rule for offender files*

**Data Source(s)**

**Auditor Approach to Collect Data**

Case File Reviews

Auditor will count the frequency of interim UA and the number and type of substances tested for

## Section 4-000 SECURITY

### Standard/Discussion – 4-120 EXIT URINE SAMPLES

A urine sample shall be taken within 12 hours prior to the offender's successful discharge or transfer from the residential program. At a minimum, this sample shall be tested for the following controlled substances:

- a) Cocaine metabolite
- b) THC
- c) Amphetamines
- d) Opiates
- e) Barbiturates

Documentation of this exit urine test shall be maintained in the offender's case record. All exit urine samples shall be tested, using any private clinical laboratory, or by using in-house substance abuse testing equipment. Drug screening kits may not be used for this purpose.

#### Criteria to Meet Standard

**For individual record compliance:**

A case file must document that staff administered an exit UA within 12 hours of the offender's exit.

**For overall compliance:**

Refer to *85% rule for offender files*

**Data Source(s)**

**Auditor Approach to Collect Data**

Case File Reviews

Auditor will look for an exit UA within 12 hours of the offender's exit that meets the requirements of the standard

### Standard/Discussion – 4-130 BA'S AND UA'S FOR ALCOHOL

A breath test or urinalysis test for alcohol shall be conducted on each offender within 12 hours of admission and positive termination.

A random breath test or urinalysis test for alcohol shall be conducted on each offender in a residential program at a rate of no less than one (1) per seven (7) day period. Gaps between testing may not exceed seven days. See standard 3-220 for acceptable non-residential interim testing requirements. An entrance alcohol test is not required if an offender transfers from residential to non-residential when both programs are operated by the same community corrections agency.

#### Criteria to Meet Standard

**For individual record compliance:**

A case file must document that staff administered an entry BA/UA for alcohol, interim BA/UAs for alcohol and an exit BA/UA for alcohol according to the time frames outlined in the standard.

**For overall compliance:**

Refer to *85% rule for offender files*

**Data Source(s)**

**Auditor Approach to Collect Data**

Case File Reviews

Auditor will look for a BA or UA for alcohol within 12 hours of the offender's entry and positive termination. Auditor will also count the frequency of random BAs and UAs during the offender's residential stay

## Section 4-000 SECURITY

### Standard/Discussion – 4-140 RECORD KEEPING FOR SUBSTANCE ABUSE TESTING

The program shall maintain record keeping systems for substance abuse testing that provide (1) information in individual case records sufficient for case management functions, and (2) aggregate substance abuse testing results within the facility records for broader management functions.

**Discussion/Definitions:** Case managers and treatment staff must have easy access to testing information to determine if supervision plans are being followed or need to be revised. Aggregate drug testing information enable program managers to monitor testing levels and ensure that minimum testing levels are met. Aggregate data also identifies trends that may indicate needed changes in treatment/programming or in testing patterns.

#### Criteria to Meet Standard

Overall evaluation based on auditor's discretion

Data Source(s)	Auditor Approach to Collect Data
Case File Reviews	Auditor will look for the presence of UA records in the offender case files
Staff Interviews	Auditor will ask staff and management about access to UA records

### Standard/Discussion – 4-150 ISOLATION/OBSERVATION OF OFFENDERS

The program shall have written policies and procedures that direct the isolation and observation of offenders who are intoxicated or under the influence of controlled substance(s).

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff regarding the implementation of agency policy related to this standard.
Observation (On Site)	Auditor will observe, if possible, implementation of this standard.

## Section 4-000 SECURITY

### Standard/Discussion – 4-160 RANDOM OFF-SITE MONITORING

The program shall have written policies and procedures that provide for the random monitoring of each residential offender's off-site location. The offender's off-site location shall be randomly verified through personal contact or phone contact, initiated by program staff. Offenders shall be randomly monitored at least once in each calendar week, exclusive of job search monitoring. The offender's off-site location shall be monitored with at least two (2) work and two (2) pass verifications each month. Documentation shall include the time of the monitoring, date, offender location, signature of the staff, and results of the verification. For offenders under non-residential supervision, the frequency of location monitoring shall be conducted in accordance with standard 3-220.

**Discussion/Definitions:** *A known supervisor or treatment provider may verify an offender's location.*

#### Criteria to Meet Standard

Refer to *85% rule for client case files* - Auditor discretion will determine if there was adequate opportunity for the program to have obtained work and or pass monitors during each sample month. Monitors must be completed one each calendar week regardless of client's pass/work status.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will select two full months of the offender's stay to evaluate this standard. Auditor will count the frequency of off-site monitors, type of off-site monitors, and determine consistency with sign-out locations. Off-site monitors shall only be counted if they are properly documented consistent with the standard.

### Standard/Discussion – 4-161 JOB SEARCH ACCOUNTABILITY

The program shall have written policies and procedures that provide for a system of offender accountability, including a practice for verifiable monitoring, while offenders are on job search status.

#### Criteria to Meet Standard

Refer to *85% rule for client case files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Look for existence of a policy
Case File Reviews	Auditor will review case files to determine if practices are consistent with policy and procedure

## Section 4-000 SECURITY

### Standard/Discussion – 4-170 PASSES

The program shall have written policies and procedures that govern the issuance of all passes that include review and approval by the referring agency, if required. Offender's off-site location must be monitored in accordance with standard 4-160.

**Discussion/Definitions:** *Due to the potential need of such documentation during legal proceedings, proper documentation relating to time and place must be maintained. As with regular monitoring, furlough verifications are meant to establish accountability.*

#### Criteria to Meet Standard

Pass/Fail

#### Data Source(s)

#### Auditor Approach to Collect Data

Exhibit A

Auditor will look for policy and procedure consistent with the requirements of the standard

### Standard/Discussion – 4-171 FURLOUGHS

The program shall have written policies and procedures that govern the issuance of all furloughs that include review and approval by the referring agency, if required, for initial furlough privileges or whenever the absence exceeds 18 hours. While on furlough, the offender's location will be verified during each 12-hour period of absence via staff-initiated contact with the offender. Documentation of location verification shall include offender name, method of verification, date, time, location, and staff signature.

**Discussion/Definitions:** *Due to the potential need of such documentation during legal proceedings, proper documentation relating to time and place must be maintained. As with regular monitoring, furlough verifications are meant to establish accountability.*

#### Criteria to Meet Standard

#### For individual record compliance:

A case file must document that staff monitored clients on furlough according to the time frames outlined in the standard.

#### For overall compliance:

Refer to 85% rule for offender files

#### Data Source(s)

#### Auditor Approach to Collect Data

Exhibit A

Auditor will look for policy and procedure consistent with the requirements of the standard

Case File Reviews

Auditor will review documentation of location verification during furloughs. Off-site furlough monitors shall only be counted if they are properly documented consistent with the standard.

## Section 4-000 SECURITY

### Standard/Discussion – 4-180 SURVEILLANCE OF OFFENDERS

The program shall have written policies and procedures that outline procedures and conditions by which monitoring of the offender is conducted on and off grounds. Specific procedures shall address areas related to pursuit, confrontation, use of force, and law enforcement assistance, pursuant to current state statute and standard rules of evidence. Policies and procedures shall establish the limits for staff monitoring activities and requirements for contacting law enforcement agencies.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff regarding knowledge/implementation of the policies

### Standard/Discussion – 4-190 USE OF PHYSICAL FORCE

The program shall have written policies and procedures restricting the use of physical force by staff. If physical force is used by program staff, the incident shall be fully documented.

**Discussion/Definitions:** *Staff of community corrections programs are not usually peace officers or staff of a secure correctional facility. Use of or possession of deadly weapons is prohibited. Use of force shall be limited to force that would reasonably be used by citizens to protect persons, property, premises, or to assist law enforcement officers (Refer to 18-1-704 through 707, C.R.S.). If physical force is used, the situation must be thoroughly documented with names, dates, circumstances, and justifications.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff regarding knowledge/implementation of the policies

## Section 4-000 SECURITY

### Standard/Discussion – 4-200 RANDOM HEADCOUNTS

There shall be at least 4 random headcounts conducted during each 8-hour period at residential programs, during which each offender's physical presence or itinerary will be observed. A record shall be made of the time and date of such counts and signed by the staff member conducting the count. The status of offenders off facility grounds at the time of the count shall be included in headcount documentation.

#### Criteria to Meet Standard

(Overall evaluation based on auditor's discretion using the following general guidelines)

Very Satisfactory	All (approx 95-100%) headcount documents fully comply with the standard
Satisfactory	Most (approx 85-94%) headcount documents fully comply with the standard
Needs Improvement	Some (approx 70-84%) headcount documents fully comply with the standard
Unsatisfactory	Few (approx <69%) headcount documents fully comply with the standard

Data Source(s)	Auditor Approach to Collect Data
Observation (On Site)	Auditor will pull a sample of headcount documents for 2 different months. Auditor will review frequency of headcounts, quality of documentation, and completeness.

## Section 4-000 SECURITY

### Standard/Discussion – 4-210 RECORDING AUTHORIZED ABSENCES

A log shall be kept for each residential offender for the purpose of recording all authorized absences from the facility. Documentation within each entry shall be legible and include, at a minimum, offender name, date, time of departure, destination by street address, authorized purpose, expected return time, actual return time, and offender signature. Staff and offender signatures prior to the offender's departure and following arrival will verify all entries. Authorizations for location changes shall be clearly and consistently documented and shall adhere to all the documentation elements with the exception of offender signature. Signatures can be original or documented via electronic means (electronic signature and/or biometric verification). Electronic and biometric verification methods must be secure and auditable.

**Discussion/Definitions:** *Sign-out logs are essential accountability documents. Because these documents are frequently used in disciplinary proceedings, accurate information is critical. Destination information should include a specific location and indicate the type of sign-out (e.g. pass, work, furlough). To ensure validity, all entries must be legible and clearly reflect the offender's location within the community*

#### Criteria to Meet Standard

(Overall evaluation based on auditor's discretion using the following general guidelines)

Very Satisfactory	All (approx 95-100%) sign-out log documents fully comply with the standard
Satisfactory	Most (approx 85-94%) sign-out log documents fully comply with the standard
Needs Improvement	Some (approx 70-84%) sign-out log documents fully comply with the standard
Unsatisfactory	Few (approx <69%) sign-out log documents fully comply with the standard

Data Source(s)	Auditor Approach to Collect Data
Case File Reviews	Auditor will pull a sample of sign-out logs. Auditor will review completeness of sign-out logs, quality of documentation, and legibility. In order to meet the standard, sign-out logs must be individualized, verifiable, complete, and legible.
Observation (On Site)	See above.

## Section 4-000 SECURITY

### Standard/Discussion – 4-220 CONTRABAND

The program shall have written policies and procedures that define contraband and have a detailed procedure for its detection, confiscation, storage, disposal, and documentation. Disciplinary actions that could result from the possession of contraband shall be defined and made available to the offender. Procedures shall include guidelines for contraband searches which include "pat" searches, room searches, vehicle searches, personal property searches and limited visitor searches.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will review program documentation for contraband searches as outlined in the standard

### Standard/Discussion – 4-230 WORK STOPPAGES

The program shall have written policies and procedures that govern program response to work stoppages, natural disasters, or other disruptions of normal work routines. For programs with single coverage shifts, policies shall require that "on-call" staff be able to respond to the facility within 30 minutes.

**Discussion/Definitions:** *Pre-determined back-up procedures are imperative, particularly when the program schedules single coverage shifts. It is advisable to have administrative or supervisory staff on-call or at the facility at all times.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff regarding implementation of the policy

## Section 4-000 SECURITY

### Standard/Discussion – 4-240 SECURITY STAFF STAFFING PATTERN

Residential programs shall provide an acceptable staffing pattern that concentrates security staff during the program's peak hours. The overall ratio of security staff to the program's current residential population shall be a minimum of one full-time (or full-time equivalent) security staff member per twelve residential offenders. At a minimum, programs with a residential population of 40 or more shall be covered by at least two security staff members during peak hours.

Security staff shall be on-site and trained in security policies and procedures. Non security staff used to provide backup to security staff shall be trained in applicable security policies and procedures and their primary responsibility shall be security duties during this coverage period.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will review policy and procedure related to the standard as well as staff rosters.
Staff Interviews	Auditor will interview staff regarding implementation of the policy and staffing patterns.
Observation (On Site)	Auditor will review current staffing schedule and observe peak-hour staff coverage.

### Standard/Discussion – 4-250 TRANSPORTATION OF OFFENDERS BY STAFF

The program shall have written policies and procedures that govern the transportation of offenders by program staff. The policy shall prohibit transportation of offenders in personal vehicles unless the program provides insurance for such transportation.

**Discussion/Definitions:** *The uninsured transport of offenders raises serious liability issues. Unless the insurance policy(s) includes "non-owner" coverage, such transport should not occur. Other safety and liability issues that should be considered include staff, offender and public safety. Staff that lack proper credentials or have unacceptable driving histories should not be permitted to transport offenders.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Client Interviews	Auditor will interview clients regarding implementation of the policy.

## Section 4-000 SECURITY

### Standard/Discussion – 4-260 ESCAPE

The program shall have written policies and procedures that specify the conditions under which an offender is placed on escape status. Program policy shall conform to the requirements of the referring agencies and the Colorado Revised Statutes, as amended. Procedures to be followed after an escape shall be clearly outlined by the program. At a minimum, and within two hours after offender's unauthorized absence is discovered, prompt notification shall include:

- a. Appropriate referral agency and the community corrections board (if required)
- b. Law enforcement agencies
- c. Victim where requested notification has been made
- d. Any third parties known to be at risk

**Discussion/Definitions:** *Currently the Department of Corrections has established policies for reporting escapes of offenders under its jurisdiction. The Fugitive Reporting System, as revised, is used for offenders under the jurisdiction of the courts. (See Standard 6-191).*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will review fugitive reporting documents in offender case files when applicable
Other (Fugitive Reporting Database)	Auditor will compare number of escapes reported versus number of escapes communicated to others

## Section 5-000 FACILITIES

### Standard/Discussion – 5-010 BUILDING/ZONING CODES

The program shall remain in compliance with all applicable building codes and zoning requirements. Proof of compliance shall be kept on file at each program location.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for certificates of occupancy or other written proof of compliance

### Standard/Discussion – 5-020 COMPLIANCE WITH FIRE AUTHORITY

The program shall comply with the regulations of the fire authority having jurisdiction. Compliance shall be verified by an annual inspection by the local fire department that provides suppression services. In the event the local authority having jurisdiction does not provide fire code inspection services, the program shall obtain an annual fire safety inspection from a Colorado certified fire safety inspector. Proof of compliance shall be kept on file at each program location.

**Discussion/Definitions:** *Many areas of the state are protected by volunteer fire departments that may not have qualified fire inspectors. In areas of the state where there are not certified inspectors, the Colorado Department of Public Safety, Division of Fire Safety can conduct fire safety inspections at the request of the local authority having jurisdiction on a fee for service basis. The Division of Fire Safety also maintains a listing of Colorado certified fire safety inspectors.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for written proof of fire inspections by an authorized inspector
Observation (On Site)	Auditor will inspect fire extinguishers to determine expiration date

### Standard/Discussion – 5-030 FLAME RETARDANT MATTRESS AND PILLOW

The residential program shall provide flame-retardant mattresses and pillows in good condition, with labels that indicate the fire safety performance requirements

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Observation (On Site)	Auditor will inspect each offender's mattress and pillow

## Section 5-000 FACILITIES

### Standard/Discussion – 5-040 AUTOMATIC SPRINKLER SYSTEM

The residential program shall maintain an automatic sprinkler system, where required by the local building code.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for evidence that facility has a maintenance agreement or a letter from local authority that indicates a sprinkler system is not required.

### Standard/Discussion – 5-050 FIRE ALARM AND DETECTION SYSTEM

The residential program shall have a fire protection alarm system and an automatic smoke detection system that is approved by the authority having jurisdiction. All system elements shall be tested on a quarterly basis; adequacy and operation of the systems are to be approved by a state fire official or other qualified authority annually. Written documentation shall be maintained at the facility.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for approval from a local fire authority and related testing documents.
Observation (On Site)	Auditor may inspect documents and fire alarm equipment.

### Standard/Discussion – 5-060 STORAGE OF HAZARDOUS MATERIALS

The program shall store all flammable liquids and hazardous materials (paint, cleaners, adhesives, etc.) in their original containers and away from kitchen and dining areas, furnaces, heaters, sleeping and high traffic areas.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Staff Interviews	Auditor may interview staff regarding storage procedures for flammable liquids and hazardous materials.
Observation (On Site)	Auditor will inspect facility for flammable liquids and hazardous materials storage.

## Section 5-000 FACILITIES

### Standard/Discussion – 5-070 CONDUCTING FIRE DRILLS

All program locations shall conduct random emergency evacuation fire drills at least once quarterly. Documentation of these drills shall be maintained at each program location. Documentation shall include the following: time, date, staff initials, number of participants, response time and comments.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will request and inspect documentation of quarterly fire drills

### Standard/Discussion – 5-080 FIRST AID MANUAL AND MEDICAL SUPPLIES

Program staff shall have immediate access to a first aid manual and appropriate medical supplies.

**Discussion/Definitions:** For a list of appropriate medical supplies, refer to the American Red Cross or American Medical Association.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure related to location of first aid manual and medical supplies
Staff Interviews	Auditor will interview staff regarding their knowledge of location of first aid and medical supplies
Observation (On Site)	Auditor will inspect facility for location of first aid manual and medical supplies

### Standard/Discussion – 5-090 MINIMUM FLOOR SPACE

A minimum of 50 square feet of floor space shall be provided per offender in sleeping areas of the residential program, of which no more than 4 square feet shall be closet or wardrobe space.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Observation (On Site)	Auditor will measure square footage of each sleeping area. Auditor will calculate square footage per offender by dividing total square footage by capacity of offenders in each room.

## Section 5-000 FACILITIES

### Standard/Discussion – 5-100 SEPARATE SPACE

The program shall provide separate space for each of the following:

- Private individual counseling
- Group meetings
- Monitored visitation (residential only)
- Dining (residential only)
- Food preparation (residential only)

**Discussion/Definition:** *Multi-purpose areas shall only be used for one of the events listed above, at any given time.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Staff Interviews	Auditor will interview staff related to location and use of the above areas
Observation (On Site)	Auditor will walk through facility and inspect each of the above areas

### Standard/Discussion – 5-110 VISITATION SPACE

The residential program shall provide space for visits by family members, attorneys, criminal justice officials and other appropriate visitors and maintain policies and procedures to monitor and control such visits.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for visitor records in case files
Staff Interviews	Auditor will interview staff related to location and use of visitation areas
Observation (On Site)	Auditor will walk through facility and inspect each of the visitation areas

## Section 5-000 FACILITIES

### Standard/Discussion – 5-120 TOILETS, BASINS, SHOWERS

The residential program shall maintain, at a minimum:

1. One operable toilet for every 10 offenders, or combination of toilet and urinals for every 10 offenders.
2. One operable wash basin for every 6 offenders (hot water not to exceed 130 degrees).
3. One operable shower or bath for every 8 offenders (hot water not to exceed 130 degrees).
4. One operable washer and dryer for every 12 offenders, or access to commercial laundry machines within 2 miles of the residential program.

**Discussion/Definitions:** *The hot water supply shall be sufficient to meet the reasonable needs of each residential offender on a daily basis.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Client Interviews	Auditor may interview offenders regarding problem areas with any of the above facilities
Observation (On Site)	Auditor will count each of the toilets, urinals, wash basins, showers, baths, washers, and dryers accessible to offenders and divide the total of each by the capacity of facility.

### Standard/Discussion – 5-130 HEALTH AND SANITATION CODES

The program shall comply with all health and sanitation codes of the jurisdiction having authority. Written reports of inspections by state and local authorities shall be maintained at each program location. In the event there are no local city and/or county codes applicable, state codes will prevail. In the event that no local or state codes are applicable, appropriate national codes shall be applied.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for copy of the most recent health inspection including documents from the health inspector and program responses to the findings of the health inspector
Observation (On Site)	Auditor will look for general issues that may cause health and/or sanitation code violations

## Section 5-000 FACILITIES

### Standard/Discussion – 5-140 ACCESS TO NUTRITIONAL MEALS

Residential offenders shall have access to meals meeting nutritional requirements established as U.S. Required Daily Averages. Food shall be stored, prepared and served in compliance with all state and local codes, laws and regulations. Any food service that includes extensive preparation by offenders, subcontracts with restaurants, or service by outside vendors must be approved by the local community corrections board.

Meals:

- Shall be approved and reviewed annually by a registered dietician.
- Shall be specially prepared if required for documented medical reasons.
- A weekly menu for all meals shall be posted.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for evidence that a registered dietician has inspected the menus and certified that nutritional requirements are met. Auditor may look for health inspection records related to food storage and preparation. Auditor will also look for contracts for food preparation, if applicable, and approval from the community corrections board.
Client Interviews	Clients will be interviews regarding food preparation and menus
Observation (On Site)	Auditor will look for posted menus and inspect prepared meals. Auditor will look for consistency between menus and actual food served.

### Standard/Discussion – 5-150 PROPERTY AND SAFETY

The program and surrounding property shall be kept in safe repair and in clean and sanitary condition at all times. Written policies and procedures shall define regular housekeeping and maintenance routines, with daily documented inspections.

**Discussion/Definitions:** *Compliance with health and sanitation codes is vital to the safety and well being of the offenders.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will inspect facility grounds

## Section 5-000 FACILITIES

### Standard/Discussion – 5-160 HOUSECLEANING ASSIGNMENTS

Resident offenders may be assigned house cleaning chores and duties following written policies and procedures that provide for the fair and equal distribution of such assignments. (Also reference standard 2.070)

**Discussion/Definitions:** *The distribution of daily offender chores requires impartiality and consistency by staff. This includes the monitoring and supervision of all offender chores. Clear written guidelines should exist concerning the distribution of additional chores as a result of disciplinary action.*

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for disciplinary records for violations chore/cleaning assignments
Client Interviews	Auditor will interview offenders regarding the assignment of chore/cleaning duties. Clients will also be asked about assignments above and beyond normal facility cleaning

### Standard/Discussion – 5-170 OFFENDER BEDDING

The program shall have written policies and procedures that provide for regular inspections to ensure that each offender's bedding is clean.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will look for documentation of bedding inspections

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-010 CASE RECORD

A separate case record shall be maintained for each offender in the program. Each individual case record shall include, at a minimum, the following information that is uniformly filed and kept current:

- a) Commitment documents from referring agencies, including background information
- b) Proof of eligibility or acceptance by the local community corrections board
- c) Intake and admission information forms (see standards 4-010 and 4-020)
- d) Individual case assessment and supervision plans, documentation, and reviews
- e) Release of information and other consent forms
- f) Chronological entries and progress reports documenting developments of the case, including compliance with special conditions
- g) Documentation of treatment attendance and progress
- h) Financial information including: employment, earnings, taxes paid, court ordered payments and collections
- i) Copies of incident reports, disciplinary actions, disciplinary appeals, and grievances
- j) Copies of correspondence, referral forms, or other documents related to the case
- k) Termination forms, summaries, and notices
- l) Case record map

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard based on overall organization of documents within the case file.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for case file map
Case File Reviews	Auditor will look for each of items a) through l) from the standard and for overall organization of case files

### Standard/Discussion – 6-020 SEPARATE MEDICAL FILES

Offender medical records developed by licensed health care professionals while the offender is in the program shall be maintained in a separate individual file. Written policies and procedures shall govern the confidentiality of these medical records in accordance with current state and federal law.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Auditor will look for separate medical records and/or existence of medical information in case files
Staff Interviews	Auditor may interview staff regarding maintenance of client medical records
Observation (On Site)	Auditor will ask for location of separate medical records

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-030 CONFIDENTIALITY OF CASE RECORDS

The program shall have written policies and procedures that govern the confidentiality of case records and shall address, at a minimum, offender access to records, staff access, and release of information to third parties. Offender records shall be maintained in accordance with federal and state laws.

#### Criteria to Meet Standard

Pass/Fail

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Observation (On Site)	Auditor will inspect case records for compliance with program policy and procedure

### Standard/Discussion – 6-040 RELEASE OF INFORMATION

The program shall have written policies and procedures that govern the release of information to third parties including authorized representatives of criminal justice or oversight agencies. The program's "Release of Information Form" shall address circumstances under which releases are permitted and restrictions on the type of information to be released. Staff and agents of the program shall have clear instructions on the release of information to third parties.

The structure and identification of information to be placed on the form includes, but is not limited to:

- a) Name of person, agency or organization requesting information
- b) Name of person, agency or organization releasing information
- c) The specific information to be disclosed
- d) The purpose or need for the information
- e) Expiration date
- f) Date consent form is signed
- g) Signature of the offender
- h) Signature of individual witnessing offender's signature
- i) Copies of the consent form shall be maintained in the offender's file.

**Discussion/Definitions:** *It is extremely important that the confidentiality of records be respected and maintained at all times. Program policies must specify what information will be available to the offender, particularly when his/her mental and social adjustment might be affected; when a co-defendant is involved; when informants' names are recorded, or when victim information is included.*

#### Criteria to Meet Standard

Refer to 85% rule for client case files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy, procedure and sample forms consistent with the requirements of the standard
Case File Reviews	Auditor will look for actual forms consistent with the requirements of the standard

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-050 STORAGE OF CASE RECORDS

The program shall have written policies and procedures that provide for secure storage of all case records, logs, and records in accordance with contract requirements. Records must subsequently be disposed of in a manner ensuring complete confidentiality.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Program must be able to provide all requested files
Staff Interviews	Staff may be interviewed regarding storage and retention of records
Observation (On Site)	Auditor will observe storage area during on site visit

### Standard/Discussion – 6-060 ASSIGNMENT OF CASE MANAGER

The program shall have written policies and procedures for assigning each offender to a case manager within one working day after the offender's admission to the program.

**Discussion/Definitions:** Program staff must be accessible to offenders for advice, counseling and supervision. Every effort shall be made to match case managers and offenders based on risk, need and responsivity. Caseloads shall be set at a level reasonable enough to ensure compliance with all standards and referral agency requirements. Consideration of lower caseloads should be given to case managers supervising specialized offender populations such as: sex offenders, seriously mentally ill offenders and female offenders

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review of chronological records and other supporting documentation to establish assignment date
Staff Interviews	Interview staff regarding procedure
Client Interviews	Interview client regarding case management assignment

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-070 WEEKLY MEETINGS

Case managers shall meet individually at least once each week with each residential offender on their caseload. Gaps between meetings shall not exceed 10 calendar days. For offenders under non-residential supervision, case management meetings shall be conducted in accordance with standard 3-220. The purpose of the meeting is to discuss progress towards objectives identified in the offender's supervision plan and address problems that may be impinging on the offender's reintegration within the community. Sessions shall be documented in the chronological notes in the offender's file.

**Discussion/Definitions:** Case management meetings should be scheduled in advance to allow both parties to prepare and identify topics for discussion. Adequate time should be allowed to fully discuss case progress and problems.

#### Criteria to Meet Standard

Refer to 85% rule for offender files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review of chronological records
Client Interviews	Interview client regarding frequency of case management meetings

### Standard/Discussion – 6-080 CHRONOLOGICAL OR PROGRESS NOTES

Chronological or progress notes shall be entered into an offender's case record each time there is a scheduled meeting, an event or information potentially affecting the direction or progress of the case, and any interagency communication regarding the particular case and shall adequately document the content of the event. All entries shall be legible, accurate, systematically filed in the offender's case record and signed and dated by the staff member making the entry. The signature can be original or documented via electronic means (electronic signature and/or biometric verification). Electronic signatures and biometric verification methods must be secure and auditable.

**Discussion/Definitions:** A consistent coding system and format should be used to identify the type of event being recorded (individual, collateral, staffing, etc.). Because such documentation is often used for disciplinary hearings or other important case decisions, legibility and accuracy are critical.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review of chronological records

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-090 ASSESSMENTS

The program shall have written policies and procedures for systematically assessing all incoming offenders for their individual criminal risks, criminogenic needs, and responsivity to various intervention strategies. The assessments shall be completed and documented in the offender case record within 10 working days of the offender's admission. Programs may use assessments that were completed within six months prior to placement. Assessments include:

- a) The Level of Supervision Inventory (LSI)
- b) Simple Screening Instrument (SSI)
- c) Adult Substance Use Survey (ASUS)
- d) Substance Use History Matrix (SUHM)

**Discussion/Definitions:** *The Level of Supervision Inventory (LSI) should be re-scored every six months and when significant events occur in the offenders placement (e.g. new drug use, transfer to non-residential placement).*

*The assessment of offender criminal risk, criminogenic need, and individual responsivity should include (1) a careful consideration of referral information and offender behavior in the program, and (2) a systematic application of assessment instruments that have established validity and reliability. This assessment process serves as the basis for subsequent case analysis and supervision plan development.*

*State criminal justice agencies and treatment agencies have implemented a system-wide substance abuse screening and assessment process (16-11.5-101, et.seq., C.R.S, as amended). This mandated assessment process supplements these standards.*

#### Criteria to Meet Standard

Refer to 85% rule for client case files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review files for completed assessments
Staff Interviews	Interview staff regarding assessment training

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-100 SUPERVISION PLAN

Case managers shall formulate a personalized supervision plan for each offender which specifies supervision approaches. The case manager and the offender shall plan the interventions targeted to address particular criminogenic needs and referral agency treatment requests. Supervision plans shall include measurable criteria of expected positive behavior and accomplishments and a time schedule for achievement. Both residential and non residential original supervision plans shall be completed, signed, and dated by both the case manager and the offender within 15 working days of the offender's program entry date. A summary of the individualized assessment and/or supervision plan shall be provided to the referral or oversight agency upon request.

The supervision plan must be tied to the Standardized Offender Assessment (SOA) and to evaluation outcome. The recommended type of supervision plan is a problem-oriented format that separately identifies each of:

- a) The offender's key behavioral problems
- b) Short-range behavioral objectives which address the above problem
- c) Specific steps the offender needs to take in the immediate future to accomplish the established objectives
- d) The specific steps the case manager will take to assist and/or hold the offender accountable for accomplishment of identified objectives

**Discussion/Definitions:** Care should be taken to avoid over-loading any offender with too many objectives to accomplish at any one point; two to four behavioral objectives is a range most offenders are likely to manage during a given period. The achievement of objectives should be reinforced soon after the desired behavior occurs. Positive reinforcement accelerates behavior changes and should be meaningful to the offender.

#### Criteria to Meet Standard

Refer to 85% rule for client case files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review files for completed supervision plan that is supported by assessment results
Client Interviews	Interview offenders regarding awareness of supervision plan objectives

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-110 REVIEW OF OFFENDER PROGRESS

Case managers shall perform a documented review of offender progress to include supervision plans at least once each month and revise the plan if indicated by case developments. This review shall note progress, problems, or need for revisions to the supervision plan. Any modifications to the supervision plan or expectations of the offender shall be personally reviewed with the offender and a written record of the modifications shall be made in the case record, signed, and dated by the offender and case manager.

**Discussion/Definitions:** *Offenders in community corrections programs have adjustments to make, and modifications to supervision plans must be reviewed in a staff meeting or by an individual staff member. It is essential that the program records reflect this progress, or lack of it, in the individual case record. Items of special concern in this review include, at a minimum, the reviews of the rater box items on the Level of Supervision Inventory (LSI), the short-range objectives specified in the offender's supervision plan and any special conditions required by the referring agency or local community corrections board (if not integrated into the supervision plan). This review provides some assurances that offenders are not overlooked in the treatment and reintegration process. Level 3 and level 4 non-residential offenders' progress and supervision plans may be done quarterly.*

#### Criteria to Meet Standard

Refer to 85% rule for client case files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review of case files for monthly progress reviews and modifications to supervision plan, as required
Staff Interviews	Interview case managers regarding procedure
Client Interviews	Interview offenders regarding awareness of supervision plan modifications and input into changes made.

### Standard/Discussion – 6-120 MOVEMENT OF OFFENDERS

The program shall establish written policies and procedures governing the movement of offenders through various levels of supervision. Areas such as time frames and completion of program expectations will be addressed in these policies and procedures.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review level change documentation
Staff Interviews	Interview staff regarding awareness of level change requirements
Client Interviews	Interview clients regarding awareness of level change requirements

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-130 EMPLOYMENT SERVICES

The program shall develop a specific plan for offender employment services. The plan shall include preparation for job search readiness including: aptitude testing, job referrals, public transportation, and facility phone access during business hours. Community employment resources shall be described in detail.

**Discussion/Definitions:** *Programs shall develop specific strategies for minimizing common obstacles to employment for offenders. Issues that should be addressed include: inadequate transportation and phone access, insufficient support during the job search process, and lack of familiarity with local employment resources.*

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for written plan addressing the requirements of the standard
Client Interviews	Interview offender regarding employment services available

### Standard/Discussion – 6-140 EDUCATIONAL REVIEW

The program shall review each offender's educational status to determine if attendance in Adult Basic Education (ABE) or General Equivalency Degree (GED) program is indicated. Information regarding ABE and GED services shall be made available to appropriate offenders including information on costs, locations, and enrollment procedures.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Documentation of review

### Standard/Discussion – 6-150 OFFENDER TREATMENT

The program shall develop a written plan to address offender treatment, to include procedures for assessment, referral, treatment and monitoring. Treatment resources shall be described in detail and be supported by written curricula. The plan shall be revised or updated as needed.

**Discussion/Definitions:** *Programs are required to maintain listings of other treatment resources and refer offenders to the most appropriate service based on assessment conclusions.*

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for plan addressing the requirements of the standard as related to ALL offender treatment

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-160 REFERRALS TO QUALIFIED TREATMENT PROVIDERS

The program shall make appropriate referrals to qualified treatment providers to meet the needs of the offenders accepted for placement. Participation and progress in treatment shall be regularly monitored by the program to include monthly verification of attendance. Offenders shall be advised upon intake, or upon a decision to refer, of the reasons for the referral, their responsibilities for payment and participation in treatment.

**Discussion/Definitions:** *Programs should establish a regular system of monitoring offenders' participation in treatment including periodic on-site visits, telephone contact, written reports or other monitoring techniques.*

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Review of treatment provider list and qualifications
Case File Reviews	Review of treatment attendance and progress information that correlates to assessment tools and supervision plan objectives.
Staff Interviews	Interview case managers concerning process for monitoring delivery of services.

### Standard/Discussion – 6-170 TERMINATION/TRANSFER SUMMARY

At termination, a discharge summary shall be prepared that reviews the offender's performance in the program. If the offender is to transfer to a non-residential program, probation, or parole, the summary shall also include recommendations to assist with continuity and transition of supervision. The discharge summary shall be signed and dated by the case manager upon completion and a copy shall be maintained in the offender's case record. Upon termination of the offender, a discharge summary shall be submitted to the referring agency within five working days, if required.

**Discussion/Definitions:** *At a minimum, this report summarizes in narrative form activities which occurred during the program, unusual occurrences, treatment during supervision that affected the outcome of supervision, and the staff's assessment of the reasons for the successful or unsuccessful outcome*

#### Criteria to Meet Standard

Refer to 85% rule for client case files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review file for existence of discharge summary that meets the standard

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-180 OFFENDER BUDGET

The program shall assist each offender in developing a budget (financial management plan) that corresponds with the offender's pay period. It should prioritize the offender's financial obligations and assist the offender in addressing those obligations. The written budget shall be signed and dated by the offender and case manager and maintained in the case record.

**Discussion/Definitions:** *Offenders are to be encouraged to develop both short and long-term budgets to prepare for reintegration into the community and meet financial obligations imposed by the criminal justice system. Such budgets are not required for unemployed offenders.*

#### Criteria to Meet Standard

Refer to 85% rule for client case files

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard
Case File Reviews	Review of budget/financial documentation including corresponding pay stubs and receipts. Review of outside savings account records if applicable.

### Standard/Discussion – 6-190 FINANCIAL TRANSACTIONS

The program shall have policies and procedures that describe documentation to be maintained for individual recording of financial transactions related to placement in the program (such as earnings, subsistence fees, restitution, fines, treatment fees and savings). Receipts for financial transactions shall be provided to the offenders. Monthly statements, signed and dated by the offender and staff, shall be provided to each offender with the status of offender funds (if maintained by the program) as well as the status of bills or debts to the program. A final financial statement shall be provided to both the offender and the referral agency, if required, upon termination. A copy shall be maintained in the offender's case record.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard.
Case File Reviews	Review of financial documentation as specified in the standard.
Client Interviews	Interview clients about receipt of monthly financial statements.

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-191 LIMITED POWER OF ATTORNEY

A Limited Power of Attorney form, signed and dated by the offender and staff, shall govern the distribution of offender funds, if maintained by the program, in the event of escape in accordance with statute.

#### Criteria to Meet Standard

Refer to *85% rule for client case files*

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for a copy of the form
Case File Reviews	Auditor will look for a completed, signed, and dated form

### Standard/Discussion – 6-200 RESTITUTION

The program shall have an established process to monitor the payment of restitution in accordance with the requirements of the local jurisdiction.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard.
Case File Reviews	Review of restitution documentation

### Standard/Discussion – 6-210 CONTRACT APPROVAL

Offenders shall obtain both program approval and, if required, referral agency approval before entering into any contract.

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure that identifies contracts requiring pre-approval

## Section 6-000 CASE MANAGEMENT

### Standard/Discussion – 6-220 DRIVING PRIVILEGES

The program shall have written policies and procedures that define when offenders under supervision will be permitted to drive and use privately owned vehicles. The policy shall include, at a minimum, the requirement of a current and valid driver's license, proof of insurance, Department of Motor Vehicle record, and referral agency approval, if required. Copies of all documentation shall be maintained in the offender's case record.

**Discussion/Definitions:** *Allowing offenders to drive raises potential liability issues. Before offenders are authorized to drive, risk to the offender and community must be assessed. An example of high risk is a license revocation within the past 3 years. Other considerations may include the relationship of the offender's driving history to his/her offense (past or present). Due to the importance of current and valid documentation, programs should implement some sort of "tickler" system that alerts staff, ahead of time, of upcoming expiration dates*

#### Criteria to Meet Standard

Auditor will use professional discretion to determine compliance with the standard.

Data Source(s)	Auditor Approach to Collect Data
Exhibit A	Auditor will look for policy and procedure consistent with the requirements of the standard.
Case File Reviews	Review of all required documentation if applicable.