

Performance Report Introduction

The Department of Corrections Annual Performance Report for fiscal year 2013 is provided in compliance with requirements of Iowa's Accountable Government Act.

The Department continued its focus on those operational and correctional practices shown by research, data or results to be the most effective "best practice" in each area of the organization. By focusing on what is known to work, the agency has better directed limited resources to those strategies that produce the greatest value to lowans. State-wide focus on the alignment with these best practices has been accomplished through communication of the leadership agenda, the Departments' Strategic Plan, Performance "Score Card", offender information system (ICON) and management information system, and the employee performance accountability system.

The Departments' key service areas include: the assessment and **identification of the risk** offenders pose to the community; the effective **management of individual offender risk** and **offender accountability**; **the reduction of future risk** from supervised offenders through the use of intervention and treatment programs that have been shown to impact criminal behavior; and efficient **management** of the facilities and resources that provide for **healthy**, **safe and humane environment** for staff and offenders.

The Departments key strategies are:

- Offender Management Best Practices Reentry Model
- Population Management
- Information Best Practices
- Workforce Investment

Strategic Goals are:

- Impact recidivism through provision of evidence based programs, interventions, case planning and reentry initiatives.
- Improve operation effectiveness through utilization of "best practices"
- Impact Corrections system grown in community and prisons
- Reinvention of the way the department does business to manage resources in the most cost effective and productive manner to produce ultimate value for taxpayer dollars.
- Use data and evidence to make fiscally responsible decisions.
- Adequate and diverse human resources, financial resources and processes to maintain infrastructure and delivery of services.

The Departments' accomplishments for each key strategy include:

1. Offender Management - Best Practices Reentry Model

- 43.79% of correctional treatment interventions have been designated as EBP "Promising" or "Excellent".
- Iowa has a low prison return rate of 30.3% compared to the surrounding Midwest states (only Nebraska had a lower rate than Iowa according to a 2011 Pew Center on the States report).
- The Department contracts with community colleges to provide GED classes to offenders in prison and in FY2013 522 offenders received their GEDs. The GED program provided 185,751 hours of instruction in GED.
- The Literacy Program in the prisons served 53 offenders and provided 49,145 hours of instruction. 304 literacy completions were awarded.
- Eight of Iowa's nine prisons have received CEA (Correctional Education Association) Accreditation Certificates.
- 64.74% of community based corrections offenders are successfully completing treatment programs, such as Batterers Education, Drug Court, Dual Diagnosis, etc.
- 86.25% of DOC's offenders are completing treatment for their top 4 needs.



Improving Offender Programming

In 2008, the lowa Department of Corrections embarked on a comprehensive audit of all institutional and community corrections offender programs that receive corrections funding. The audit focused on the degree to which each program adheres to evidence-based practices principles (what works best). The audit areas are listed below along with some examples of the questions asked about each program:

Risk Assessment Criteria. Is a risk assessment conducted? Does the program address the risks identified by the risk assessment?

Responsivity Assessment Criteria. Does the assessment identify how best to motivate an offender (for example; incentives, rewards, motivational enhancement interviewing)? Is the treatment designed to be received positively by the offender?

Cognitive Behavior Interventions (changing the way the offender thinks). Are cognitive behavioral programs used to help the offender develop a more positive way of thinking (and behaving)?

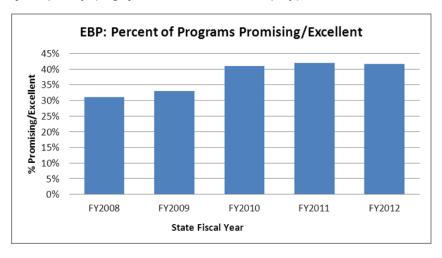
Continuing Support. Is there a plan for the offender to receive continuing community support after the formal program has been completed (for example: mentors, support groups)? **Program Measurement/Feedback.** Has the program been evaluated by correctional staff for effectiveness? Has it been evaluated by and independent researcher?

Clinical Supervision. Has the program supervisor been trained in Evidence-Based Practices (what works best)? Each program received a rating, with categories from high to low as follows: Excellent, Promising, or Needs Improvement. Some programs were eliminated and improvement plans were developed for other lower-scoring programs. As shown below, more programs now score as promising or excellent due to these efforts.

More Offender Reentry and Employment Issues

A recent lowa Workforce Development study found that offenders who obtained a high school diploma or GED (with the majority achieving the latter) had higher employment rates than those who did not. In addition, offenders with a high school diploma or GED consistently earned higher wages than those that did not.

The IWD study also found that the accommodation and food service industries provide among the lowest pay, yet employ the highest average number of female offenders (comprising 50.7% to 64.6% of those employed, depending on the quarter), and ranked second in employment of male offenders (comprising 17.8% to 22.5% of those employed, depending on the quarter). Such findings are of particular significance in that a 1999 study by Christopher Uggen found a small but consistent relationship between job quality (e.g. job satisfaction, net pay) and recidivism.



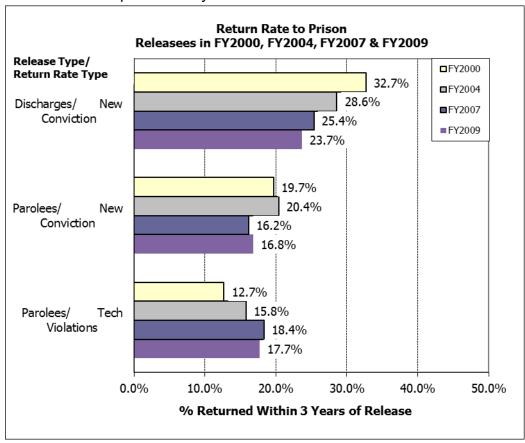


Reentry efforts aimed at improving the quality of post-release employment for all offenders appears to hold promise for further reducing recidivism; manufacturing jobs, for example, were among the highest paying jobs held by both male and female offenders.

New Conviction Lower for Paroles

Prison inmates who are paroled are less likely to return to prison due to a new conviction than are inmates who leave prison due to expiration of sentence.

Offenders who discharge their sentences cannot be returned to prison for technical violations because they do not receive community supervision. However, as shown below their rates of return to prison for new conviction is higher than new conviction rates among parolees, suggesting that community supervision enhances public safety.



The bar graph also shows a downward trend in new convictions for both offenders expiring their sentences and those placed on parole. This suggests that correctional programming in the institutions and the community has improved.

WISH

WISH is designed to provide comprehensive, gender responsive substance abuse treatment over a 6 month period to female offenders who are subject to release within 12 months of incarceration. The project treats 45 female offenders at ICIW during a six month cycle. WISH is a major improvement to the existing female offender substance abuse treatment because this new program is not limited to long-term offenders. All female offenders who begin prison treatment with shorter sentences are afforded the opportunity to complete a gender-responsive holistic substance abuse treatment program which also provides a mentoring component to enhance their reentry/transition back into the community. A co-occurring component was also developed for this program which utilizes an integrated approach focusing on both substance use and psychiatric disorders.



INNOVATIVE BEP PILOT PROJECT

Since October of 2009, the DOC has been collaborating with the University of Iowa to test the feasi-bility and efficacy of a novel, evidence-based group intervention program for domestic abuse offenders. The new approach is being piloted in the first, second, third, fifth, sixth and seventh judicial districts. The new curriculum entitled "Achieving Change Through Value-Based Behavior" (ACTV) is based on the principles and techniques of Acceptance and Commitment Therapy (ACT). The United States Substance Abuse and Mental Health Services Administration (SAMHSA) has now listed ACT as an empirically supported method as part of its National Registry of Evidence-based Programs and Practices (NREPP). Acceptance and Commitment Therapy (ACT) is based on empirically-supported mindfulness-based cognitive behavioral therapy and has two major goals:

- To foster acceptance of unwanted mental experiences which are out of our personal control
- To facilitate commitment and action toward living a valued life

The ACTV Curriculum has incorporated the essential components of Acceptance and Commitment Therapy and applied it to working with domestic abuse offenders. ACTV seeks to expand the offenders' knowledge of ACT and to assist them in applying it to their daily lives. The goal is to assist offenders in defining their true values in life and working with them as they move toward a life consistent with their values, particularly that of remaining nonviolent and non-abusive.

lowa is the first state in the country to apply this model and these new techniques to a domestic violence treatment program. The project is now in the completion stage and the curriculum is under copyright to the University of Iowa. Results show men in ACTV had significantly lower rates of physical, psychological and sexual aggression at Week 24 after beginning treatment compared to men in the standard Duluth/Current Cognitive Based Treatment (CBT) programs. There were no differences at Week 1. Men in ACTV also had greater declines in physical, psychological and sexual aggression over the 24 weeks compared to men in Duluth/CBT.

Based on the evaluation of this innovative approach to domestic violence treatment the Curriculum is now available for statewide application and national review.

2. Population Management

The Department of Corrections contracts with Spectrum Health Systems to conduct front-end substance abuse assessments at the inmate reception center – Iowa Medical and Classification Center. Such assessments are considered vital in so far as 80-85% of offenders in DOC institutions list alcohol/drug problems as one of their top three need areas. These assessments not only identify whether or not substance abuse treatment is needed, but also the appropriate level of care.

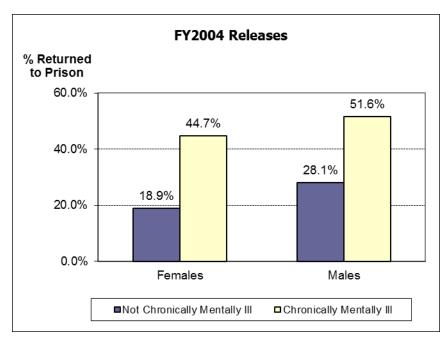
For both male and female offenders, the most common level of treatment needed is outpatient treatment. However, the data also show that substance abuse treatment needs differ between male and female offenders. Higher percentages of male offenders were identified as needing inpatient or outpatient treatment, while higher percentages of female offenders were identified as needing aftercare after relapse.

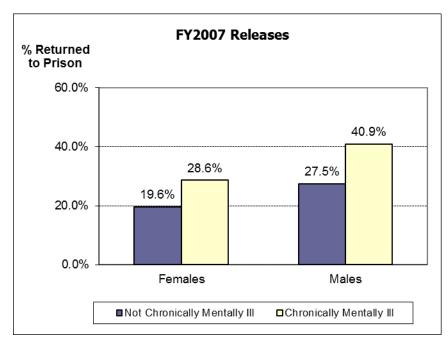
Improved Outcomes for Offenders with Chronic Mental Illness

In June 2011, DOC released a study entitled *Iowa Recidivism Report: Prison Return Rates*. The study documents that Iowa's three-year return rate to prison for offenders released during FY2007 decreased from 33.9% for the previous three-years period studied to 31.8% (and below our goal of 33.3%). More dramatic is the decrease in the percent of offenders with mental illness returning to prison.

Comparison between the two graphs below reveals return rates to prison for offenders released in FY2007 who had a chronic mental illness were significantly lower than the rates for mentally ill offenders released in FY2004. However, return rates to prison for offenders who were not chronically mentally ill were not significantly different. "Chronic" mental illness is defined as conditions that are managed rather than "cured."







While much more needs to be done to improve the supervision and treatment of offenders with a mental illness in our institutions, it is heartening to establish that our efforts to date have made a difference.

Central Classification

IDOC continues to use the Custody Classification instrument, implemented in 2009 on incoming offenders and reclassified all incarcerated offenders. The instrument is gender specific and structured to better assess risk to security and to society and appropriate incarceration custody level recognizing security, programming and reentry services. The new scoring instrument, utilized for both male and female offenders resulted in classification and re-classification of a significant portion of the population to minimum custody.

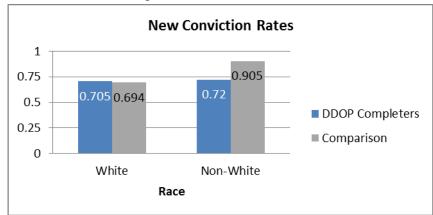


Dual Diagnosis Program Works Best for Minorities

The Iowa Division of Criminal and Juvenile Justice Planning recently released a report summarizing its evaluation of the Dual Diagnosis Offender Program (DDOP) administered by the First Judicial District Department of Correctional Services.

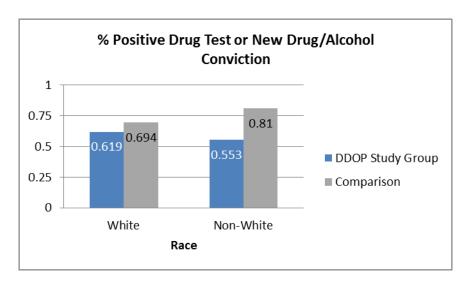
Basically, DDOP entails case management and treatment of dual diagnosed offenders (substance abusing and mentally ill) by a team comprised of a PPOIII who has expertise in working with this challenging group, a substance abuse treatment counselor, and a mental health counselor. The offenders reside from 6-12 months in a 16-bed unit for male offenders at the Waterloo Residential Correctional Facility.

The evaluation consisted of comparing outcomes of DDOP completers and non-completers with that of a control group comprised of offenders with similar characteristics not receiving DDOP. As the table below shows, there did not exist a statistically significant difference between white DDOP completers and the comparison group in regards to being convicted of a new crime than non-white offenders not receiving DDOP services.



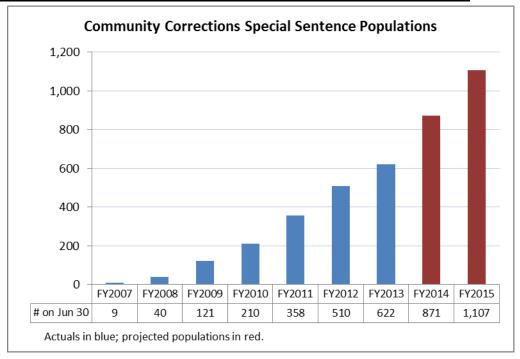
When comparing outcomes for testing

positive for drugs or new drug/alcohol conviction, white and non-white DDOP completers and non-completers fared better than their counterparts in the comparison group. In other words, even non-completers benefitted from DDOP via lower UA test results or new drug/alcohol convictions. Further, non-white DDOP offenders again achieved dramatic improvement in outcomes through participation in DDOP.



While DDOP overall provided positive outcomes for both white and non-white offenders, it proved particularly beneficial for non-white offenders. That result is good news for reducing disproportionate incarceration, and the report findings suggest that the First District expand the number of non-white offenders placed in DDOP.

Increase in Special Sentence Sex Offender Caseloads Expected



The lowa Department of Corrections projects community corrections special sentence caseloads to increase by 78% over the next two years, from 622 to 1,107 by the end of FY2015. The lowa Division of Criminal and Juvenile Justice Planning projects even larger growth beyond FY2015. In particular, individuals under lifetime supervision are expected to triple within seven years.

3. Information Best Practices

 Successfully deployed an offender e-mail (CorrLinks) system in the prisons statewide with all of the prisons deploying bi-directional email.

ICON: It's Not Just for Corrections Anymore

The lowa Correctional Offender Network (ICON) is a data collection system that was first deployed in community corrections in 2000 after two years of planning, and was integrated with the institutions in 2004. The purpose of ICON is to collect and organize the data necessary to make informed decisions. Corrections owes it to the lowa taxpayers to be good stewards with the funding they provide, and ICON helps accomplish that charge by telling us which correctional programs work and don't work, along with when, where, and with whom. ICON helps tell us what is the optimal level of security for each offender, both in institutions and under community-based supervision. Nationally, lowa Corrections has one of the lowest rates of return-to-prison in the nation, and the information we receive from ICON is one of the reasons why. In recent years, the ICON system has begun interacting with other organizations and whole systems for the benefit of public safety and the taxpayers, including:

- ⇒ Criminal Justice Information System (CJIS)-County Attorneys obtain victim information and offender release information from prison;
- ⇒ DOC and the Iowa Courts Information System (ICIS) exchange Pre-Sentence Investigation of orders and returned to courts information;



- ⇒ Board of Parole (BOP)-ICON feeds information into the BOP docket and Release Plans, and ICON in turn receives Review Dates, BOP Risk Scores and Decision Codes;
- ⇒ DOC and ICIS-Offender recidivism is tracked through ICIS;
- ⇒ ICON sends Child Support Recovery and Food Assistance Program a file to assist with locating offenders;
- ⇒ ICON sends Medicaid a file to assist in the investigations of fraudulent usage of Medicaid; and
- ⇒ ICON sends lowa Vine data, which provides victims with information and notification.
- ⇒ ICON exchanges data with the Sex Offender Register i.e., address, tier, restrictions, etc.
- ⇒ Standardizing crime code language among justice system partners to improve sharing of information.
- ⇒ Not only does Iowa Corrections depend on the information generated through ICON, but so do a number of other agencies. The results are taxpayer savings and improved public safety.

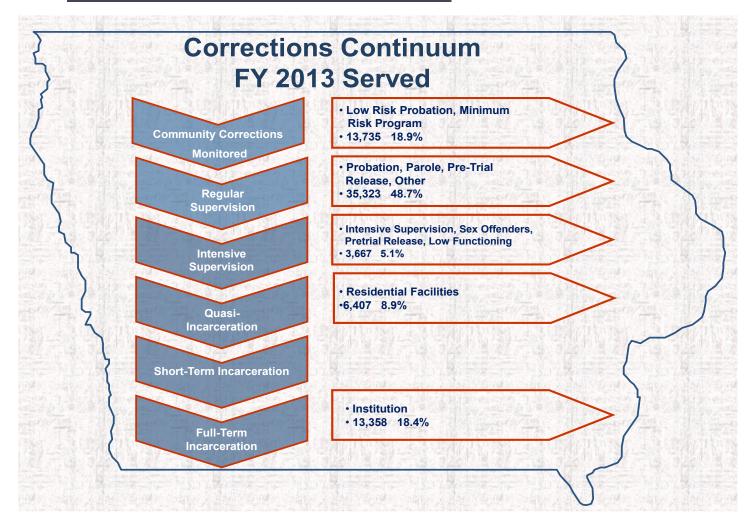
4. Workforce Investment

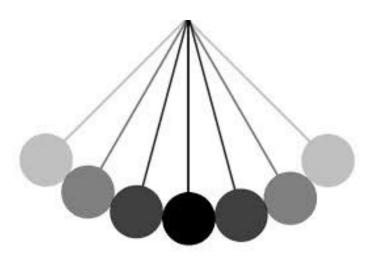
- For institution and industries staff there was an average of 64.6 training hours per employee for FY13.
- The Learning Center conducted 7 Pre-Services in Training Year 2013 for a total of 28 weeks of Pre-Service Training.
- ♦ In Training Year 2013, there were 59 hours of training offered via eLearning.





Corrections Continuum







Community Based Corrections & Prison Offenders Served FY13

CBC Field Services	Active at Start 7-01-12	New Admits FY13	Closures FY13	Active at End 6-30-13	Offenders Served
CCUSO Transitional Release	0	1	0	1	1
Interstate Compact Parole	332	209	201	348	541
Interstate Compact Probation	1117	570	585	1090	1687
No Correctional Supervision Status	7	42	47	7	49
OWI Continuum	5	54	7	7	59
Parole	3066	2999	2301	3477	6065
Pretrial Release With Supervision	1500	4419	4331	1549	5919
Probation	21699	16079	15291	21621	37778
Special Sentence	445	181	112	543	626
Statewide Total	28171	24554	22875	28643	52725

CBC Residential Services	Active at Start 7/1/12	New Admits FY13	Closures FY13	Active at End 6/30/13	Offenders Served*
Federal	163	489	455	194	657
Interstate Compact Parole	1	5	2	2	6
Interstate Compact Probation	0	14	5	0	14
Jail (Designated Site)	3	54	32	8	57
OWI Continuum	137	372	410	120	509
Parole	8	53	28	10	61
Pretrial Release With Supervision	12	46	21	3	58
Probation	779	2018	1684	824	2797
Special Sentence	56	143	113	58	199
Work Release	478	1571	1519	435	2049
Statewide Total	1642	4765	4269	1654	6407

^{*} Includes VC and VT

Prisons	Active at Start 7-1-12	New Admits FY13	Closures FY13	Active at End 6-30-13	Offenders Served
Parole	136	370	72	134	506
Prison	8069	4555	5001	7793	12624
Prison Compact	36	3	2	37	39
Prison Safekeeper	50	48	72	51	98
Special Sentence	25	42	7	46	67
Work Release	10	12	135	6	22
Statewide Total	8328	5030	5289	8069	13358

Strategy: Offender Management: Best Practices Reentry Model

Strategy: Information Best Practices

GOALS:

Recidivism through provision of evidence based programs, interventions, case planning and reentry initiatives.

Operation effectiveness through utilization of "best practices."

Use data and evidence to make fiscally responsible decisions.

Desired Outcomes:

Enhanced public and staff safety, crime reduction Payment of debt to victims and society Offender accountability

Provision of information, technology and information analysis to ensure access to complete, accurate, timely and useful information

Sustain and improve best practice data and information

Description: Iowa's corrections system is moving to ensure that evidence based correctional intervention programs and practices are in use across the system.

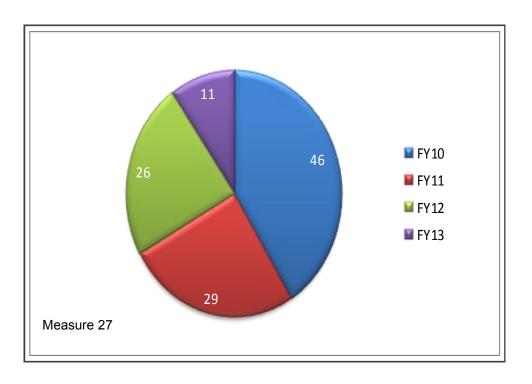
Why we are doing this: Research has shown that future offender risk can be reduced by appropriate supervision and receiving appropriately delivered and timed interventions that are directed toward the needs that contribute to that offender's criminal behavior. Release planning and reentry transition services help to insure that the offender can more safely be returned to their community.

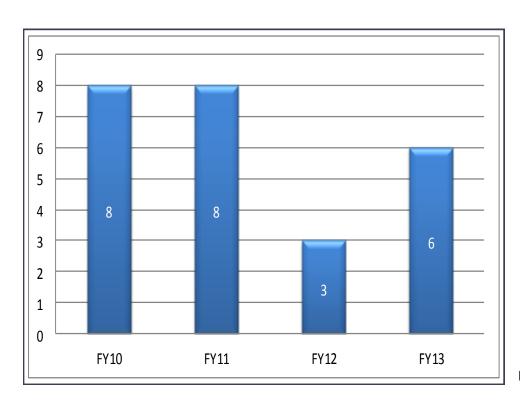
What are we doing to achieve results: All programs and practices are undergoing scrutiny to asses their level of compliance with evidence based principles. Corrective action plans are being deployed. Resources are being realigned with those programs that contribute to this effort.



Number of serious injuries or accidents of offenders

Injury must be life threatening or requires emergency room care or hospitalization





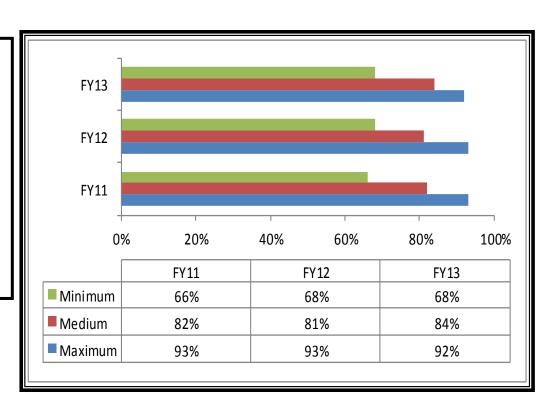
Number of serious injuries caused to staff

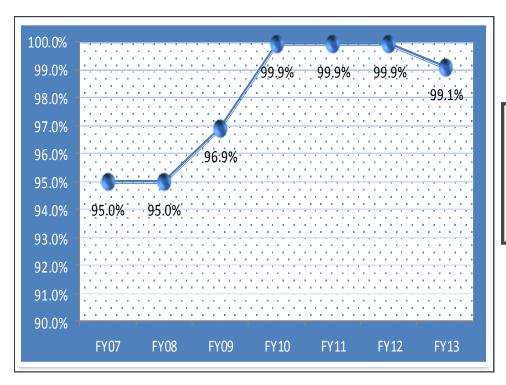
Injury must be life threatening or requires emergency room care or hospitalization

Measure 22

Percentage of offenders assigned/ supervised in accordance with risk assessment/ classification instruments: Max/Med/Min

Measure 4



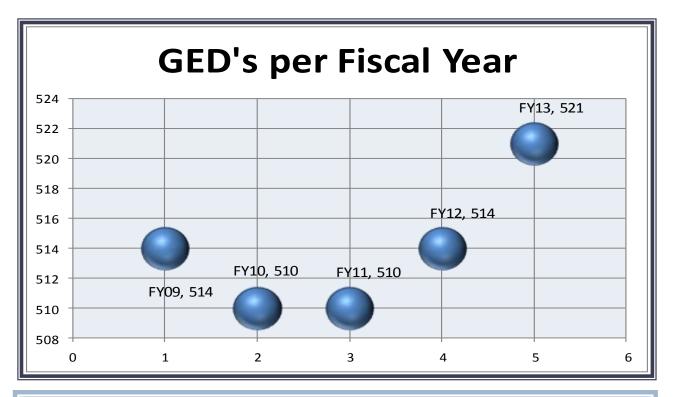


Percentage of required Custody Classifications completed

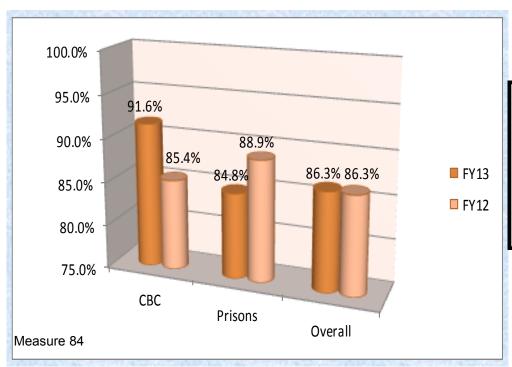
Measure 3



Measure 34



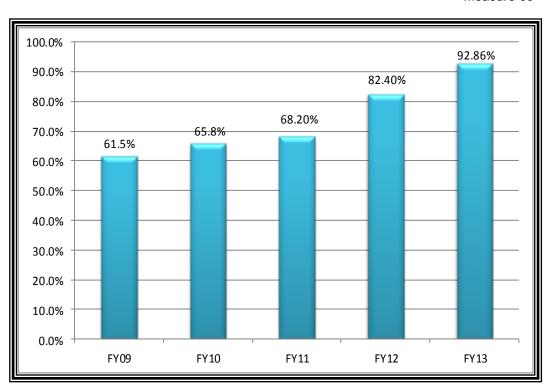
Number of GED completions by Iowa offenders per community college contract.



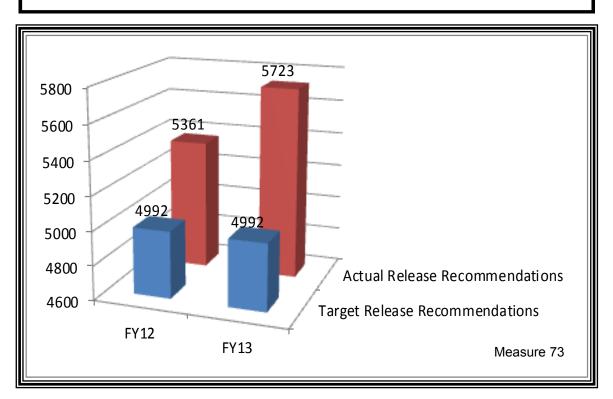
Percent Med/ High Risk Case Plan Programming Completed Top Four Needs

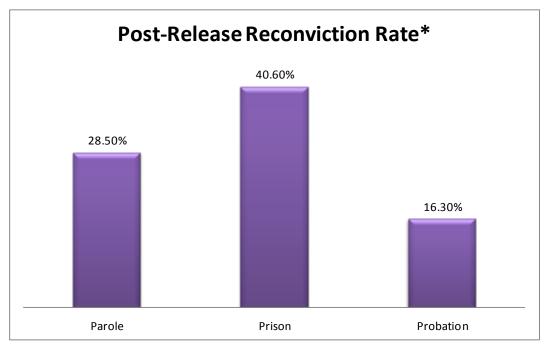
Measure 65

Percentage lowa Board of Parole agrees with the lowa Department of Corrections recommendations



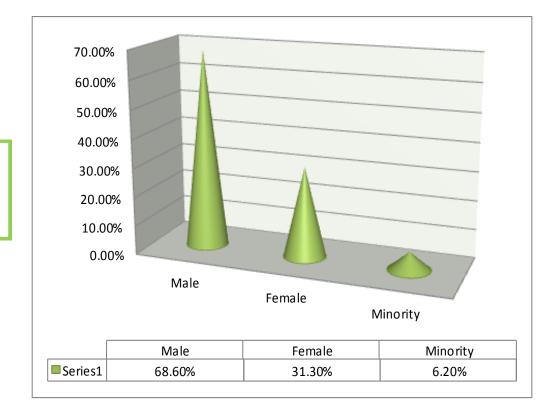
Target vs. Actual Release Recommendations to the lowa Board of Parole

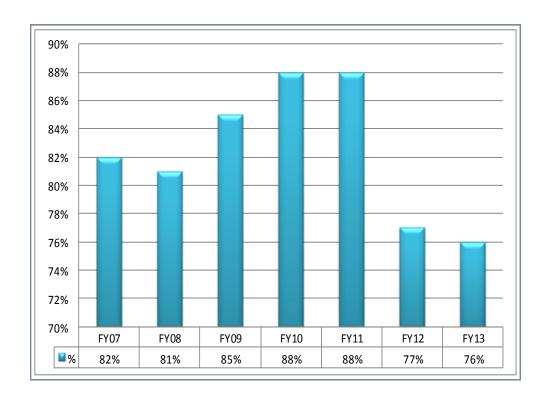




*Aggravated misdemeanor or felony convictions within three years for offenders who discharged from correctional supervision.

Diversity of Prison Staff

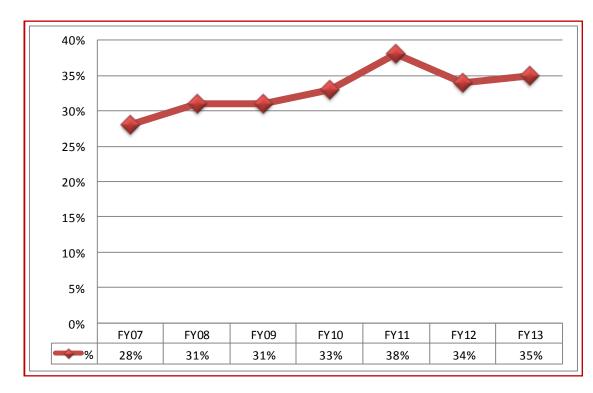




Percentage of needed FTEs funded based on workload formula.

Measure 61

Percentage of FTEs applied to work formula



Measure 94



Risk Identification Institution and CBC Top Priority Needs

