

A Report to the Montana Legislature

## Performance Audit

## Montana's Probation and Parole Practices: Supervising According to Risk

**Department of Corrections** 

March 2022

LEGISLATIVE AUDIT DIVISION

20P-05

## LEGISLATIVE AUDIT COMMITTEE

#### REPRESENTATIVES

KIM ABBOTT
Kim.Abbott@mtleg.gov

Denise Hayman, Chair
Denise.Hayman@mtleg.gov

EMMA KERR-CARPENTER
Emma.KC@mtleg.gov

TERRY MOORE
terry.moore@mtleg.gov

MATT REGIER
Matt.Regier@mtleg.gov

JERRY SCHILLINGER
jerry.schillinger@mtleg.gov

#### **SENATORS**

JASON ELLSWORTH, VICE CHAIR

Jason.Ellsworth@mtleg.gov

JOHN ESP

Johnesp2001@yahoo.com

PAT FLOWERS

Pat.Flowers@mtleg.gov

TOM JACOBSON

Tom.Jacobson@mtleg.gov

TOM MCGILLVRAY

Tom.McGillvray@mtleg.gov

MARY MCNALLY

McNally4MTLeg@gmail.com

Members serve until a member's legislative term of office ends or until a successor is appointed, whichever occurs first.

\$5-13-202(2), MCA

### PERFORMANCE AUDITS

Performance audits conducted by the Legislative Audit Division are designed to assess state government operations. From the audit work, a determination is made as to whether agencies and programs are accomplishing their purposes, and whether they can do so with greater efficiency and economy.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. Members of the performance audit staff hold degrees in disciplines appropriate to the audit process.

Performance audits are conducted at the request of the Legislative Audit Committee, which is a bicameral and bipartisan standing committee of the Montana Legislature. The committee consists of six members of the Senate and six members of the House of Representatives.

### AUDIT STAFF

AMBER ROBBINS

ALYSSA SORENSON

FRAUD HOTLINE
(STATEWIDE)
1-800-222-4446
(IN HELENA)
444-4446
LADHotline@mt.gov
www.montanafraud.gov

Reports can be found in electronic format at: <u>https://leg.mt.gov/lad/audit-reports</u>

### LEGISLATIVE AUDIT DIVISION

Angus Maciver, Legislative Auditor Deborah F. Butler, Legal Counsel



Deputy Legislative Auditors: Cindy Jorgenson William Soller

March 2022

The Legislative Audit Committee of the Montana State Legislature:

This is our performance audit of the Probation and Parole Division managed by the Department of Corrections.

This report provides the Legislature information about community supervision practices in Montana. This report includes recommendations for improving community supervision of offenders based on recidivism risk at the Department of Corrections. A written response from the Department of Corrections is included at the end of the report.

We wish to express our appreciation to the Department of Corrections personnel for their cooperation and assistance during the audit.

Respectfully submitted,

/s/ Angus Maciver

Angus Maciver Legislative Auditor

## **TABLE OF CONTENTS**

	Figures and Tables	
	Appointed and Administrative Officials	. iv
	Report Summary	S-1
CHAPTER I –	INTRODUCTION AND BACKGROUND	1
OIMI IERI	Introduction	
	Probation and Parole Division Structure and Responsibility	
	Reshaping Community Supervision	
	Assessing Offender Risk	
	Case Management	
	Responding to Offender Behavior	
	Audit Scope	
	Audit Objective	
	Methodology	
	Issues for Further Study	4
CHAPTER II -	PROCESS EFFICIENCY AND CASELOAD	
	Introduction	5
	Officers Completed Risk Assessments on Time but Did Not Always Reassess Offenders When They Should	5
	Officers Did Not Reassess Offenders As Frequently As They Should	
	Simplifying the Risk Assessment Process Would Help Officers Meet Assessment	,
	Requirements	6
	Some Officers Did Not Meet Minimum Contact Requirements	
	Officers Contacted Higher-Risk Offenders More Often Than Lower-Risk Offenders,	
	but Did Not Always Meet Minimum Requirements	8
	High Caseloads and Excessive Paperwork Hinder Officer Ability to Meet Contact	
	Minimums	9
	Opportunities Exist to Lower Officer Caseloads and Improve Processes	.10
	It Is Difficult for Officers to Identify Caseload Contact Needs	
CHAPTER III	- EVALUATING PERFORMANCE AND PROGRAM OUTCOMES	13
CHAI TEKIH	Introduction	
	Risk Assessment Results Need to Be Integrated Into Case Management	
	Officers Were Not Consistently Using Assessment Results in Case Management	
	Case Management Tools and Policy Do Not Provide Enough Guidance for Officers  Other States Case Plans Are More Formalized	
	Quality Assurance to Track Risk Assessment Use in Case Planning Is Underdeveloped	
	Officers Lack Confidence in the Effectiveness of the Risk Assessment	
	Officers Did Not Fully Utilize the MIIG	
	Officers Were Sometimes Unable to Provide Jail Interventions	
	There Are Consequences When Officers Cannot Put Offenders in Jail	. 1/
	Legislative Caps on Reimbursement Rate Decreased County Willingness to	10
	Take DOC Offenders	
	Officers Underutilize Incentives, Particularly for Higher-Risk Offenders	
	Some Options on the MIIG Did Not Reflect Current Field Practices	
	DOC Implemented the MIIG Without an Evaluation Plan	20

CHAPTER IV – DATA INTEGRITY TO MONITOR & EVALUATE SUPERVISION TO RISK	23
Introduction	23
Probation and Parole Has a Data Integrity Problem	23
The OMIS User Interface Design Is Not Conducive to Easy Data Entry by Officers	
Current OMIS Change Request Process Does Not Meet Organization Needs	
Front-End User Needs Should Be Prioritized.	
DOC Needs to Be Able to Use Probation and Parole Data	24
The Department Needs to Determine if OMIS Meets Its Needs Long-Term	
DEPARTMENT RESPONSE	
Department of Corrections	A-1

## FIGURES AND TABLES

<u>Figures</u>	
Figure 1	Twenty-Three Probation and Parole Offices Supervise Nearly 10,000 Offenders in Six Regions Across the State.
Figure 2	Data Suggest Officers Generally Met Direct Offender Contact Requirements in 2020 but Did Not Always Meet Collateral Contact Requirements
Figure 3	Nearly a Third of Officers Reported They Meet Contact Requirements for Half or Fewer of Offenders on Their Caseload
Figure 4	Higher-Risk Offenders Report Communicating With Their Officers More Than  Lower-Risk Offenders
Figure 5	High-Risk Offenders Were Less Likely to Have Minimum Contact Requirement Met9
Figure 6	A Substantial Number of Officers Indicate They Refer to Risk Assessment Results Half the Time or Less When Making Individualized Case Management Decisions
Figure 7	Half of Officers Reported Case Plans Were Not Effective Supervision Tools 14
Figure 8	Most Officers Completed Case Plans With Offenders Who Needed One Half the Time or Less
Figure 9	Most Officers Find Risk Assessments Were Only Slightly or Not at All Useful Supervision Tools
Figure 10	Fourteen Percent of Officers Felt They Could Never Remove Offenders From the  Community
Figure 11	Only 8% of Officers Met or Exceeded the Goal of Four or More Incentives Provided  Per Intervention on Average
Figure 12	Officers in Only Two Regions Provide More Incentives Than Interventions on Average to Offenders
Figure 13	High-Risk Offenders Were Less Likely to Report Receiving Incentives From

## **APPOINTED AND ADMINISTRATIVE OFFICIALS**

Department of Corrections

Brian Gootkin, Director

Cynthia Wolken, Deputy Director

Jim Anderson, Chief Executive Officer Public Safety

Kevin Olson, Administrator, Probation and Parole Division

(August 2020 through March 2021)

Katie Donath, Eastern Bureau Chief, Probation and Parole Division

Kim Lahiff, Western Bureau Chief, Probation and Parole Division





#### MONTANA LEGISLATIVE AUDIT DIVISION

## Montana's Probation and Parole Practices: Supervising According to Risk

DEPARTMENT OF CORRECTIONS

### BACKGROUND

The Probation and Parole Division is responsible for supervising around 10,500 offenders on community supervision in Montana. Probation and Parole Officers use risk assessments to determine the recidivism risk of an offender and to tailor supervision accordingly. To ensure the most efficient use of resources and best chance of success, higher-risk offenders should receive more intensive supervision and programming than lower-risk offenders.

### Agency:

Department of Corrections

### Director:

Brian Gootkin

### Program:

Probation and Parole Division

## **Program FTE:** 261

**Program Revenue FY21:** \$719.000

**Program Expenses FY21:** \$105,200,000

In 2017, the Montana Department of Corrections reshaped community supervision to focus on supervising offenders according to recidivism risk. The department implemented new policies and procedures to reflect this goal that were largely adopted across the state. However, we determined improvements to processes, quality assurance, and data integrity and integration are needed to better supervise offenders according to recidivism risk. We found risk assessments were difficult to complete, officers did not fully utilize the formal response grid, officers did not always meet minimum contact requirements, and significant data integrity issues challenged the monitoring and evaluation of supervision to risk.

#### **KEY FINDINGS:**

Time-consuming risk assessments caused officers to not complete risk assessments when they should. Overall, officers completed reassessments for offenders within necessary time frames, but not after life-changing events. They also reported that keeping up with assessment requirements is difficult. We found simplifying the risk assessment process could help officers meet assessment requirements.

Some officers did not meet some types of minimum offender contact requirements. High caseloads and cumbersome processes contributed to missing minimum contact requirements. We determined reducing data entry and paperwork requirements and lowering officer caseloads will improve officers' ability to meet requirements for more of their caseload. We also determined officers need a better way of identifying caseload contact needs to ensure they meet contact requirements.

Officers completed risk assessments but did not consistently integrate the results into supervision practices. We determined case management tools, policy, and current training did not provide enough guidance to officers to effectively use risk assessments in case management. The department's quality assurance processes also do not track use of risk assessments in case management. Montana's risk assessments are still not validated for Montana's population resulting in diminished officer buy-in.

Officers did not fully utilize the Montana Incentives and Intervention Grid (MIIG) to respond to offender behavior. Almost all officers refer to the MIIG to select interventions and incentives in response to offender behavior. However, we found some officers were unable to use jail holds and others were underutilizing incentives for high-risk offenders. Statutory caps on jail populations and rates for jail stays limited officers' ability to fully use the MIIG. The department implemented the MIIG without a formal evaluation plan to monitor its use and revise it over time.

For the full report or more information, contact the Legislative Audit Division.

leg.mt.gov/lad

Room 160, State Capitol PO Box 201705 Helena, MT 59620-1705 (406) 444-3122

The mission of the Legislative Audit Division is to increase public trust in state government by reporting timely and accurate information about agency operations, technology, and finances to the Legislature and the citizens of Montana.

To report fraud, waste, or abuse:

Online www.Montanafraud.gov

Email LADHotline@mt.gov

Call (Statewide) (800) 222-4446 or (Helena) (406) 444-4446

Text (704) 430-3930

DOC practices and the Offender Management Information System (OMIS) structure hindered officer ability to enter complete and accurate offender information. The user interface in OMIS was not designed to ensure ease of data entry by officers who use it for daily tasks. This design persists due to difficulty in making changes in OMIS and not prioritizing front-end user needs. Long-term planning should consider whether the current system structure can meet the needs of the department.

### **RECOMMENDATIONS:**

In this report, we issued the following recommendations: To the department: 6
To the legislature: 0

RECOMMENDATION #1 (page 6):

Management and operational effectiveness

We recommend the Department of Corrections identify means to simplify the assessment and reassessment process without decreasing effectiveness at predicting recidivism risk.

Department response: Concur

Recommendation #2 (page 11):

Management and operational effectiveness

We recommend the Department of Corrections decrease caseloads and the administrative requirements of supervising offenders, including decreasing paper and signature requirements outside of OMIS.

Department response: Concur

Recommendation #3 (page 11):

System and information management

We recommend the Department of Corrections develop a method to easily identify offenders who have exceeded average days expected by risk level since last offender and collateral contact.

Department response: Concur

Recommendation #4 (page 16):

Management and operational effectiveness

We recommend the Department of Corrections strengthen inclusion of offender risk assessment results in case management strategies, enhance related procedures, monitor officer performance, provide officer training, and validate Montana's risk assessment tools.

Department response: Concur

Recommendation #5 (page 21):

Management and operational effectiveness

We recommend the Department of Corrections develop processes for ongoing maintenance and evaluation of the MIIG, including making necessary revisions and targeting training efforts.

Department response: Concur

Recommendation #6 (page 25):

System and information management

We recommend the Department of Corrections review and update OMIS to meet community supervision data needs, establish an effective OMIS change request process, develop a road map to embed user workflows, and evaluate long-term offender management information system needs for the department.

Department response: Concur

## Chapter I – Introduction and Background

### Introduction

In 2017, the Montana Legislature passed policy reforms based on the Justice Reinvestment Initiative (JRI). The JRI was a years-long examination of the entire Montana criminal justice system to identify ways to decrease the corrections population. One major reform tasked the Montana Department of Corrections (DOC) to reshape community supervision to focus on supervising offenders according to recidivism risk. The Legislative Audit Committee prioritized a performance audit of the Probation and Parole Division (PPD) in fiscal year 2019 to assess community supervision practices. While PPD has adopted policies and procedures to shift supervision to reflect evidence-based practices, we determined that there is room to improve processes, quality assurance, and data integrity and integration.

### Probation and Parole Division Structure and Responsibility

There are around 10,000 offenders on community supervision on any given day, over 70 percent of the total corrections population. PPD is responsible for more offenders than any other division within the Department of Corrections. Offenders are released to community supervision on probation by the courts, parole by the Board of Pardons and Parole, or conditional release by DOC. The chief public safety officer within the department oversees PPD. The division is organized into an Eastern and Western Bureau, six regions, and 23 offices. Staff includes 2 bureau chiefs, 6 regional deputy chiefs, 26 supervisors (POIIs), 13 pre-sentence investigation (PSI) writers, 175 probation and parole officers (PPOs), 32 administrative staff, 4 hearings officers, and 1 trainer. The following figure shows the locations of the 23 PPD offices and the number of offenders supervised through each.

Six Regions Across the State Region 5 Region 6 Kalispell **Great Falls** Region 3 Region 1 Offender Population ≤500 Region 4 ≤1000 ≤1500 Region 2 ≤2000 <2500 Bureau Eastern Western

Figure 1

Twenty-Three Probation and Parole Offices Supervise Nearly 10,000 Offenders in Six Regions Across the State

Source: Compiled by the Legislative Audit Division from department records.

## **Reshaping Community Supervision**

JRI resulted in many statutory changes to probation and parole practices in both the 2017 and 2019 Legislative Sessions. The directive to formally supervise offenders according to recidivism risk required a major cultural shift in PPD and significant coordination to implement. The following sections describe some of these areas and the tools used to implement supervision according to recidivism risk.

### **Assessing Offender Risk**

The first step to supervising offenders according to recidivism risk is identifying their criminogenic needs, which are major risk factors likely to cause them to reoffend. Since 2017, statute requires the department to use a validated risk and needs assessment to drive supervision practices, such as contact standards and case management. As a result of this requirement, DOC formalized and expanded the use of two risk assessment tools. The Montana Offender Reentry and Risk Assessment (MORRA) and the Women's Risk and Needs Assessment (WRNA) tools. These tools identify the probability of offender recidivism, place each offender in one of four risk levels, and identify specific risk factors and criminogenic needs to prioritize programming.

### Case Management

Once the DOC assigns an overall recidivism risk level to an offender and identifies criminogenic need domains, officers should use this information to guide supervision and case management. More intensive resources and supervision strategies should be reserved for higher-risk offenders and targeted to their criminogenic need domains. Developing a case plan helps guide supervision strategies to meet identified criminogenic needs.

## Responding to Offender Behavior

Research shows that addressing undesirable behavior and rewarding positive behavior is effective for offenders on community supervision. Another tool required as part of the JRI was the Montana Incentives and Intervention Grid (MIIG). The MIIG serves as a formal and structured model to guide officers in making consistent use of incentives to address good behavior and interventions to address bad behavior. Using the MIIG, officer responses should escalate as offender behavior continues or increases in severity. Interventions include actions such as verbal reprimands, varied-length jail sanctions, referral to treatment, community service, increased contacts, monitoring for drug or alcohol use, among others. The most severe intervention is revocation in which the offender is recommended to be removed from community supervision. Incentives on the MIIG include options such as verbal praise, certificates of completion, and decreased contacts. The highest level of incentive is recommendation for conditional discharge from supervision. Conditional discharge allows offenders to end their supervision early if they meet certain criteria.

### **Audit Scope**

The purpose of supervising offenders according to recidivism risk is to reduce their chance of reoffending. We did not assess the efficacy of risk-based supervision practices as there is already a mature body of knowledge indicating that they can reduce recidivism if implemented appropriately. While overall effectiveness of correctional practices in reducing recidivism is of interest to the legislature and the DOC, we did not directly assess this area. The Crime and Justice Institute,

which provided initial support for Montana's Justice Reinvestment Initiative, was conducting a large longitudinal analysis on this topic at the time of the audit, expected to be completed in 2022.

Our audit focused on whether PPD supervises offenders according to recidivism risk and its adherence to policies and procedures proven to work based on current research. To assess this, we determined whether PPD evaluated recidivism risk promptly, if officers met minimum contact requirements, and if officers used the MIIG to respond to offender behavior. The DOC provided data used for this audit from its Offender Management Information System (OMIS). The offender population examined for this audit included all offenders under community supervision in 2020. We also obtained data by conducting two surveys, one for all PPD officers and supervisors and the second of a sample of offenders on community supervision around May and June 2021.

### **Audit Objective**

We developed a single objective for this audit:

Determine if the Probation and Parole Division supervises offenders according to recidivism risk level, as required by state law and best practices.

## **Methodology**

During audit fieldwork, we completed the following methods:

- Reviewed applicable laws and rules related to community supervision.
- Reviewed PPD mission, goals, policies and procedures.
- Identified and reviewed best practices for implementing evidence-based strategies in offender supervision according to recidivism risk.
- Interviewed stakeholders, including public defenders, a judge, a prosecutor, a treatment center administrator, a member of the Board of Pardons and Parole, and a staff-person of the Montana American Civil Liberties Union.
- Interviewed bureau chiefs, regional deputy chiefs, and six supervisors.
- Completed four job shadow days with officers from four different offices, one of which included tribal territory.
- Surveyed all probation and parole officers and supervisors in June of 2022.
- Surveyed offenders actively on community supervision in Montana for at least six months and who were not currently listed as absconded in May 2021.
- Analyzed completion rate of risk assessments for offenders based on a snapshot of offender data from December 31, 2020.
- Analyzed offender contacts recorded by officers in 2020.
- Analyzed use of incentives and interventions for offenders in 2020.
- Conducted a usability study of OMIS by observing four officers entering data into the system.
- Observed an officer conduct a full offender risk assessment interview.
- Interviewed probation and parole administrators from three states regarding their experience using models like Montana's to supervise to risk.

### 4 Montana Legislative Audit Division

### **Issues for Further Study**

We identified two issues during audit work that may warrant additional study. First, sentencing practices in Montana could shed light on another potential source of the high corrections population, contributing to high caseloads for officers. Sentencing structure and sentencing practices were identified in this and previous audits as potential issues that could result in unintended returns to supervision or inconsistent offender experiences despite similar crimes. Other states we interviewed described sentencing standards as helping regulate their community supervision workloads by limiting the length of probation sentences. Second, we identified an issue with jail space. We learned that lack of jail space or an otherwise inability to place offenders in jail affected the ability of officers to utilize the MIIG fully. We address some options for partially fixing this issue in the report. However, a deeper examination of factors impacting the use of jail space may be a topic of further interest.

## Chapter II - Process Efficiency and Caseload

### Introduction

Research shows that supervising offenders according to recidivism risk leads to reductions in recidivism. The Montana Probation and Parole Division (PPD) within the Department of Corrections (DOC) adopted policies and procedures to supervise offenders on community supervision based on recidivism risk, but administrative burdens and caseloads are impacting officers' ability to keep up with requirements. We found that simplifying the risk assessment and reassessment process would help ensure assessments are being completed when they should. We also found reducing officer caseloads, reducing supervision requirements for lower-risk offenders, and reducing paper processes would help officers meet contact requirements.

## Officers Completed Risk Assessments on Time but Did Not Always Reassess Offenders When They Should

The first step in supervising offenders according to recidivism risk is assessing each offender's risk to reoffend. We reviewed a snapshot of data from the Offender Management Information System (OMIS), including all offenders under community supervision, on December 31, 2020. Using the data, we determined whether assessments were completed promptly. According to the PPD procedure, assessments should be completed for offenders within 45 days of entering community supervision. Reassessments should occur annually or more frequently after that based on life-altering events. We found assessments were completed promptly overall, with 95 percent of offenders assessed on time. The percentage of overdue assessments by region ranged from 1 percent (Region 2 – Helena) to 9 percent (Region 3 – Great Falls).

### Officers Did Not Reassess Offenders As Frequently As They Should

Despite the overall timely completion of assessments, we identified potential issues regarding the ability of officers to complete assessments when they should. Supervisors frequently reported officers had difficulty completing assessments on time. As part of audit work, we visited four PPD offices across the state and shadowed an officer and their work partner for the day. During these visits, officers expressed that it was challenging to keep up with risk assessments and complete them on time. We learned that PPD made a targeted effort to get all assessments up-to-date before the 2021 Legislative Session, which was why we saw a high completion rate in our data analysis. Several officers also indicated they often did not complete reassessments after life-altering events. They reported reassessments are just as time-consuming as initial assessments because they are currently required to complete the entire assessment interview all over again, even if the previous assessment was conducted recently. Officers noted there are questions on the risk assessment with answers that should not change over time, so they felt asking these questions again on a reassessment is unnecessary. They also had concerns with some of the questions and the organization of the assessment.

## Simplifying the Risk Assessment Process Would Help Officers Meet Assessment Requirements

Some aspects of the risk assessment process may be unnecessarily complicated and burdensome. We spoke to contact administrators in three states, including Wyoming, Arkansas, and Missouri, as part of the audit. These states had also gone through a Justice Reinvestment Initiative, conducted community supervision at the state level, used evidence-based risk assessments, and used administrative sanction tools similar to the MIIG. Arkansas noted it revised the MORRA risk assessment tool (also currently used to assess male offenders in Montana) into a new abbreviated tool. This abbreviated tool removed static questions and prepopulated some fields from its management information system and external systems, leading to significant time savings for officers in Arkansas. Arkansas does not believe the changes to its assessment will affect the reliability of the assessment results in predicting recidivism for their state. Publications from the Federal Probation system describe similar findings, with one administrator describing reducing the assessment length as key to improving the completion and use of risk assessments in the field by officers. He also found that integrating the offender management system and the risk assessment tool could also decrease redundant data entry and prepopulate static data to save officers time. The Montana DOC has not yet simplified the process of completing risk assessments. Simplifying the risk assessment process could help ensure officers in the field conduct timely assessments and meet risk assessment requirements in policy.

#### **RECOMMENDATION #1**

We recommend the Department of Corrections identify means to simplify the assessment and reassessment process without decreasing effectiveness at predicting recidivism risk.

### Some Officers Did Not Meet Minimum Contact Requirements

Once an offender is assigned a risk level, DOC ensures officers supervise to risk by setting minimum contact requirements by risk level. The DOC requires officers to contact higher-risk offenders more frequently than lower-risk offenders. For example, officers must contact high-risk offenders at least twice per month and once every two months face-to-face. However, they only need to contact low-risk offenders once per quarter, with no specification requiring face-to-face contact. There are also requirements about contacting people connected to the offender, such as a spouse or parent. These are referred to as collateral contacts. The DOC requires officers to document all direct offender and collateral contacts in OMIS.

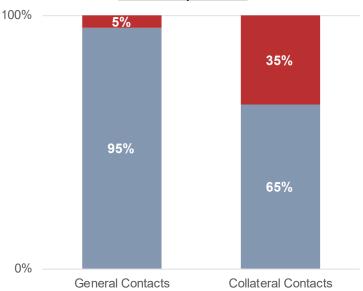
We used data from OMIS to determine if officers were meeting these minimum contact requirements for each risk category in 2020. We also assessed whether officers were supervising higher-risk offenders overall at a higher rate than lower-risk offenders. We found that officers met minimum overall contact requirements for 94.2 percent of offenders in 2020 and met collateral contact requirements for two-thirds of offenders, as seen in Figure 2 (see page 7). Completion of contacts for offenders differed by supervisory office, ranging from 100 percent to as low as 86.2 percent.

Figure 2

<u>Data Suggest Officers Generally Met Direct Offender Contact</u>

<u>Requirements in 2020 but Did Not Always Meet Collateral</u>

<u>Contact Requirements</u>



Source: Compiled by the Legislative Audit Division from OMIS data.

While the data suggested offender contact minimum requirements were overall being met, we identified issues with the integrity of the data. We identified some offenders who had abnormally high direct (noncollateral) contacts recorded relative to the number of contacts expected for their risk level and supervision duration. We manually reviewed a sample of them and found some were legitimate contacts, suggesting some offenders are over-supervised. However, other offender records showed inconsistencies in data entry that appeared to inflate the number of contact events recorded in OMIS artificially. Because of this, we could not determine the extent to which these contacts were necessary, potential over-supervision, or data integrity issues.

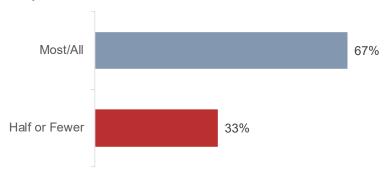
While the data may be unreliable for accurately determining compliance with contact requirements,

the results of our officer and offender surveys supported that officers were not always meeting contact requirements. We surveyed all PPD officers and supervisors (173) as part of the audit. We received 144 responses for a response rate of 83 percent. In the survey, we asked officers what portion of their caseload for which they felt they could meet contact requirements. Nearly one-third of the officers who responded indicated they could only meet them for half or fewer of their offenders (Figure 3).

Figure 3

Nearly a Third of Officers Reported They Meet Contact

Requirements for Half or Fewer of Offenders on Their Caseload

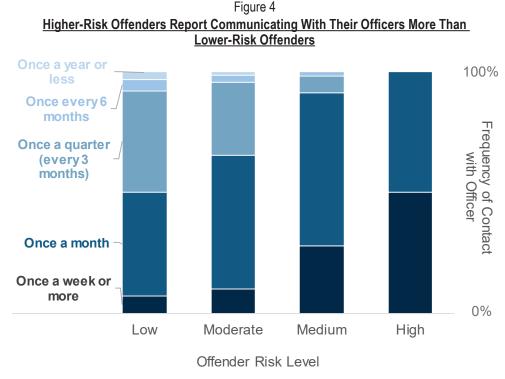


Source: Compiled by the Legislative Audit Division from OMIS data.

This survey response, combined with the data integrity issue described above, indicated that officers were likely not meeting minimum contacts as often as OMIS data initially showed.

## Officers Contacted Higher-Risk Offenders More Often Than Lower-Risk Offenders, but Did Not Always Meet Minimum Requirements

Research in the field of community supervision has developed a broad consensus that staff and programming should be more focused on higher-risk offenders than on lower-risk offenders. Effective supervision to risk warrants more extensive supervision strategies, including contacts, to higher-risk offenders and less extensive, more hands-off strategies for lower-risk offenders. Our analysis of OMIS data found that officers contacted higher-risk offenders on average more frequently than lower-risk offenders. In 2020, high-risk offenders had 15.6 contacts on average relative to low-risk offenders, who had an average of 9.85 contacts. This indicated they were appropriately adjusting supervision practices according to supervision risk level, consistent with best practices. Offenders also supported this in their responses to our offender survey. As part of the audit we sampled and surveyed 2,883 offenders on community supervision in May or June 2021. We received 984 responses for a response rate of 34.1 percent. In the survey, we asked offenders about their experiences with officers while on community supervision, including how often they communicated with their officers. Figure 4 shows their responses for the frequency of contact with their officer split by risk level.



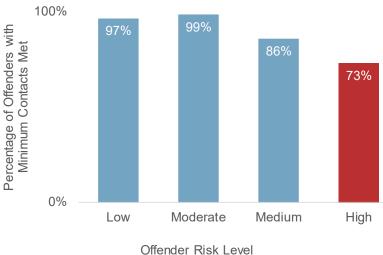
Source: Compiled by the Legislative Audit Division from offender survey data.

As the figure shows, offenders with higher levels of risk reported they met with their officers more frequently than offenders with lower risk levels. While we found officers were contacting higher-risk

Figure 5

<u>High-Risk Offenders Were Less Likely to Have Minimum Contact</u>

<u>Requirement Met</u>



Source: Compiled by the Legislative Audit Division from OMIS data.

offenders more, we found they were less likely to meet minimum contact requirements. Figure 5 shows the percentage of overall minimum contact requirements met by risk level.

The department established minimum contact requirements to help ensure officers focused more on higher-risk offenders than on lower-risk offenders. As shown in Figure 5, while about 97 percent of low-risk offenders were contacted according to minimum standards, only about 73 percent of high-risk offenders were contacted according to minimum standards. By officers not meeting the minimum contact

requirements for higher-risk offenders, there is a missed opportunity to use evidence-based practices to improve their likelihood of success in the community. Further, not meeting minimum contact requirements for higher-risk offenders also poses an increased risk to public safety.

## High Caseloads and Excessive Paperwork Hinder Officer Ability to Meet Contact Minimums

Overall, we found officers did not always meet minimum contact requirements, particularly for higher-risk offenders, which hinders their ability to supervise to risk effectively. Our officer survey asked officers what challenged their ability to supervise to risk effectively. Officers reported that the most challenging aspect of supervision was the volume of data entry and required paperwork, followed by the frequency of policy changes and caseload size. In interviews with officers, supervisors, and deputies and job shadow visits with officers, frustration with data entry and paperwork was a reoccurring theme. Many felt daily tasks required an excessive number of steps, including duplicative data entry, multiple downloads and uploads into and out of different systems to collect signatures, and an unfriendly OMIS user interface. We observed some examples of these while shadowing officers in the field.

Some managers felt that caseloads were not excessive for most officers and attributed some officer workload issues to time management challenges. However, we confirmed some officers' perceptions of high caseloads affecting their ability to effectively supervise offenders with caseload and contact data. We examined the relationship between officer caseload size and contact completion as part of this audit. We found a statistically significant negative correlation between the percentage of offenders with minimum contacts met and officers' weighted caseloads. This indicated that officers with higher caseloads were less likely to complete minimum contact requirements, which supported their perception that higher caseloads caused difficulty in meeting minimum contact requirements.

## Opportunities Exist to Lower Officer Caseloads and Improve Processes

The field of probation and parole has struggled to identify appropriate nationwide caseload standards due to the complexity and diversity of community corrections environments across the country. As a result, Montana does not have specific caseload standards. However, we identified a potentially reasonable goal for caseload size by asking officers in our officer survey what they thought was reasonable. While

"...only 28% of officers felt they could supervise caseloads over 70."

68 percent of officers felt they could supervise caseloads as high as 69 offenders, only 28 percent felt they could supervise caseloads over 70. We also found officers with caseloads over 70 were much less likely to report their caseloads as reasonable. While 74 percent of officers with caseloads between 61 and 70 described their caseloads as fair or light, only 19 percent of officers with caseloads between 71 and 80 felt the same.

We identified several ways to help reduce officer caseload, including reducing the burden on officers related to data entry and paperwork and administrative requirements for lower-risk offenders. Other states have been successful in reducing paperwork and lowering officer caseloads. For example, some other states have realized efficiencies and reductions in caseload by:

- Using apps or kiosks to complete portions of supervision for low-risk offenders.
- Reducing administrative requirements for low-risk, nonviolent, and nonsexual offenders. For example, some states have an option for "unsupervised supervision," in which officers only contact offenders when they miss a mandatory payment, treatment, or court date. One of these states, Wyoming, also has an additional category of offenders on administrative caseload only.
- Internalizing workflows and form generation in their information systems.

PPD managers have prioritized pushing the department to meet key requirements, such as completing risk assessments and conditional release from supervision notifications, as well as responding to ongoing new legislative demands. When possible, they have made some progress in decreasing the paperwork required of officers and have eliminated two forms in the past year. However, the net gain in required forms due to JRI-related changes is still high. There is not yet an active effort within PPD to streamline data entry by embedding workflows and generating forms in OMIS. Montana has not pursued some of these efforts that other states have to decrease the administrative burden of paperwork and supervision of lower-risk offenders.

#### **RECOMMENDATION #2**

We recommend the Department of Corrections:

- A. Decrease caseloads for nonspecialized officers below 70 offenders,
- B. Identify and implement options to decrease the administrative requirements for supervision of low-risk, nonviolent, and nonsexual offenders, and
- Decrease the amount of paper processes and signatures required outside of the OMIS.

### It Is Difficult for Officers to Identify Caseload Contact Needs

Another contributing factor to some officers' inability to meet minimum contact requirements is difficulty identifying when an offender is due for a contact. In interviews and office visits, officers shared it was easy to lose track of an offender because they did not have a simple way in OMIS to identify those who have missed contacts. In our survey, officers also commonly reported this as a challenge, with 27 percent of officers finding it difficult to access caseload information in OMIS. We learned almost 39 percent of officers reported using methods outside of OMIS to track offender contact and risk assessment schedules for their caseloads, such as paper, spreadsheets, and email. The DOC created an officer Caseload Health Dashboard in December 2021, which significantly improved PPD's ability to track and manage offenders. Adjusting the method by which this dashboard flags offenders would substantially improve officers' ability to monitor their own caseload needs and ensure offenders with higher contact needs were being prioritized. The dashboard does not yet allow officers to easily identify offenders who have exceeded the expected average days since their last contact and collateral contact by risk level.

#### **RECOMMENDATION #3**

We recommend the Department of Corrections develop a method in its caseload health dashboard to easily identify offenders who have exceeded average days expected by risk level since last offender and collateral contact.

# Chapter III – Evaluating Performance and Program Outcomes

### Introduction

The Department of Corrections (DOC) implemented policies and procedures to supervise offenders on community supervision based on recidivism to risk with an end goal to reduce recidivism. These policies and procedures reflect the requirements of Justice Reinvestment Initiative (JRI) statute passed by the 2017 and 2019 Legislatures. Initial JRI statutory requirements for community supervision changes were effective either immediate upon signing or for less than five months after the legislative session, contributing to incomplete integration and an underdeveloped quality assurance framework. To fully achieve supervision to risk, it is important to evaluate adherence to these new policies and procedures and monitor progress. We found that while the department implemented policies and procedures to supervise offenders according to risk, it did not set up an adequate plan for assessing adherence to them or identifying needed changes over time. For example, the DOC has policy and procedure for completing risk assessments and referring to the Montana Incentives and Interventions Grid (MIIG) in officer response to offender behavior. However, we found risk assessments were not always integrated into case management, and officers were not always able to fully utilize the MIIG. Our work found needed improvements to policy and procedure, quality assurance, and training. Our work also found the department needs to evaluate and validate its risk assessment tools, and evaluate and revise the MIIG.

### Risk Assessment Results Need to Be Integrated Into Case Management

Research consistently indicates improved offender outcomes and public safety when assessing offenders' risk to re-offend using a validated tool, targeting criminal risk factors, and concentrating interventions and programming on higher-risk offenders. This, in turn, decreases the financial burden to state spending on public safety, victim support, and corrections. Using the criminogenic risk factors from the assessments to tailor supervision strategies is key to improving offender outcomes. If officers do not incorporate the results of the assessments in their supervision strategies, Montana will not see the improved offender outcomes and cost savings that were intended. The Montana Legislature recognized this when developing Justice Reinvestment (JRI) legislation and specifically required risk and needs assessment results be integrated into supervision contact standards and case management. PPD procedure describes case management as including all aspects of supervision, from completing risk assessments to developing case plans and supervision strategies.

## Officers Were Not Consistently Using Assessment Results in Case Management

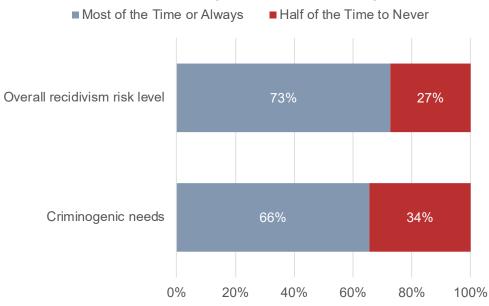
Data analysis and interviews with deputies and supervisors indicated that officers complete offender risk assessments overall. However, we found officers did not consistently incorporate the results of the risk assessments into case management to tailor supervision to recidivism risk. In addition to interviews with PPD management, supervisors repeated this concern in the officer survey. Thirty percent of supervisors who responded to our survey described their officers' performance using risk assessments for effective case management as poor.

Field officers also reflected on this issue. We asked officers how often they referred to the recidivism risk level and criminogenic needs when making case management decisions for offenders. Figure 6 shows responses from officers to this question.

Figure 6

A Substantial Number of Officers Indicate They Refer to Risk Assessment Results

Half the Time or Less When Making Individualized Case Management Decisions



Source: Compiled by the Legislative Audit Division from officer survey data.

As the figure shows, over a quarter of officers reported they did not usually refer to the recidivism risk level from the risk assessment in case management decisions. Over one-third of the officers did not usually refer to criminogenic needs from the risk assessment. This indicated officers were not consistently incorporating the risk assessment into their case management strategies.

## Case Management Tools and Policy Do Not Provide Enough Guidance for Officers

Case plans are traditionally holistic tools used to tailor supervision strategies to offenders' individual risk and needs, including matching the offender to appropriate services, discussing meaningful incentives and interventions, and developing goals. PPD policy indicates officers should target primary risk factors identified from the risk assessments in case planning with the offender. However,

the current case plan does not include formal structure and guidance for doing so. Currently, the case plan is a single goal sheet that is primarily offender driven. This case plan tool does not tie risk assessment results into supervision strategies and does not have the elements needed to integrate risk assessments effectively into the case plan. This was reflected in officer survey responses. Figure 7 shows how officers rated the usefulness of the case plan document in supervising according to recidivism risk.

Supervision Tools

50%

27%

17%

Not at all useful Slightly useful Moderately Very useful

useful

Figure 7

Source: Compiled by the Legislative Audit Division from officer survey data.

As the figure shows, half of the officers found that the current case plan tool was ineffective for supervising offenders according to recidivism risk. Many officers also noted during office visits that these goal sheets were duplicative, as offenders are also asked to provide goals on the back of their required monthly reports to officers.

### Other States Case Plans Are More Formalized

During the audit, the three states we interviewed conducted more formalized case planning, including guidance on using risk assessments in supervision. These states also use a case plan document that includes more structure for embedding elements of criminogenic needs. Wyoming and Missouri indicated the case plan should consist of discussion and documentation of what interventions and incentives would be meaningful for the offender while under supervision. Arkansas' offender management system generates an initial supervision plan based on risk factors from an offenders' risk assessment, which is then further developed by the officer. We found Montana needs more formalized case planning and training to ensure officers are adequately integrating recidivism risk into case management.

## Quality Assurance to Track Risk Assessment Use in Case Planning Is Underdeveloped

Another reason we found for officers not sufficiently integrating risk assessments into case management was a lack of quality assurance for this activity. While the DOC has a Quality Assurance Unit, it focuses on facilities and programs. The department indicated the unit could not provide the quality assurance needs for PPD. Currently, PPD conducts some of its high-level quality assurance work. For example, PPD has a mechanism for assessing the completion of risk assessments and notifications of conditional discharge from supervision. However, it does not have a robust process for assessing officers' integration of risk assessments into case management. The primary mechanism for assessing case management is case audits. Case audits are conducted by direct supervisors who manually review three offender case files for each of their officers quarterly. However, we found these case audits do not serve as effective checks on the use of the risk assessment in case management. For example, supervisors

and regional deputy chiefs were not aware how often officers did not complete case plans. In our officer survey, 56 percent of officers reported they do not regularly (more than half the time) complete case plans for offenders who need them (Figure 8). Some (10 percent) indicated they never complete them for offenders.

Figure 8

Most Officers Completed Case Plans With Offenders Who Needed
One Half the Time or Less



Source: Compiled by the Legislative Audit Division from officer survey data.

This demonstrated that case audits were not an effective quality assurance activity for ensuring risk assessments are adequately integrated into case management.

### Officers Lack Confidence in the Effectiveness of the Risk Assessment

Another reason for risk assessments not being incorporated into case management is that some officers did not believe the risk assessment was effectively predicting recidivism. Buy-in from individuals most responsible for implementing new policy is often key to successful outcomes. We found officers completed assessments as required by PPD. However, many officers did not believe in the usefulness of the risk assessment as a tool to supervise offenders effectively. For example, in our officer survey, about

Figure 9

Most Officers Find Risk Assessments Were Only Slightly or
Not at All Useful Supervision Tools



Source: Compiled by the Legislative Audit Division from officer survey data.

62 percent of officers indicated they found the assessment not useful or only slightly useful to supervise offenders according to recidivism risk (Figure 9).

In interviews and during office visits, officers reported concerns about the effectiveness of the assessments at predicting recidivism risk, particularly for some types of offenders. The assessment tools used by

DOC have been validated in other states to predict recidivism risk. The DOC has not yet evaluated the effectiveness of risk assessments in predicting recidivism for offenders in Montana because an external review by the University of Cincinnati Corrections Institute identified quality issues with completed risk assessments. Based on these results, they are working on establishing a reliable pool of risk assessments. Once this is complete, the DOC should validate the risk assessment specifically for Montana offenders, evaluate its effectiveness in predicting recidivism, and communicate these results to officers. Communicating the results to officers should increase officer buy-in on the risk assessment to better incorporate risk into their supervision strategies.

#### **RECOMMENDATION #4**

We recommend the Department of Corrections strengthen the inclusion of offender risk assessment results in officer case management strategies by:

- A. Revising current case plan, policy, and procedures,
- B. Establishing quality assurance methods to monitor officer performance,
- C. Providing annual refresher training to officers, and
- D. Evaluating and validating risk assessments for Montana's offender population and communicate results to stakeholders.

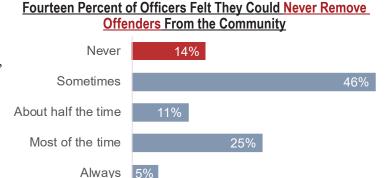
### Officers Did Not Fully Utilize the MIIG

Use of the MIIG is an essential means for supervising offenders according to recidivism risk. Officers should use the least restrictive, meaningful interventions first before using more intense interventions. We found, overall, officers used the MIIG, and most find it an effective tool for supervision. In our officer survey, 97 percent of officers reported they used the MIIG most or all of the time to select interventions to respond to offender behavior. The same percentage indicated they used the least restrictive, meaningful intervention first. However, audit work found officers did not fully utilize the MIIG in two ways. First, they could not provide swift and meaningful interventions at times and second, underutilizing incentives for high-risk offenders.

### Officers Were Sometimes Unable to Provide Jail Interventions

We found that officers in many areas of the state faced significant restrictions on their ability to fully utilize the options of the MIIG, particularly in using jail time as an intervention. Officers use short jail sanctions as intermediate interventions, often to interrupt escalating bad offender behavior before a new offense or revocation. In survey responses, roughly 18 percent of officers disagreed that they could

provide swift interventions to offender violations, noting jail space was the main reason. Officers from some areas in the state reported being unable to use any sort of jail intervention for offenders, including when they thought the offender posed an active risk to public safety. Almost 14 percent of officers felt they could never remove offenders from the community when they posed a public safety threat, while nearly half felt they could only sometimes do so (Figure 10).



Source: Compiled by the Legislative Audit Division from officer survey data.

We found these responses were statistically significant to the supervising office, with officers in communities including but not limited to Billings, Missoula, and Polson frequently reporting difficulty removing offenders from the community.

### There Are Consequences When Officers Cannot Put Offenders in Jail

As indicated in research cited by the American Probation and Parole Association, imposing swift and meaningful interventions, combined with more frequent use of incentives, promotes compliance and positive behavior among probationers and parolees. To fully realize lower recidivism rates and to decrease future costs to the state, officers need be able to utilize the MIIG to respond fully to offender behavior. The implications of officers being unable to swiftly utilize some parts of the MIIG, particularly jail interventions, are daunting for community safety. There are also inefficiencies and other consequences when officers cannot put offenders in jail. For example, officers in some communities regularly drive offenders long distances to other counties to place an offender in jail, wasting officer time and resources. Officers reported that offenders in some communities know they will not go

to jail until they are arrested for a new felony, so they do not make any effort to participate in their supervision.

## Legislative Caps on Reimbursement Rate Decreased County Willingness to Take DOC Offenders

Officers believed there were two main reasons for being unable to place an offender in jail. The two most frequently reported reasons in the officer survey were: 1) there was no room in the jail or holding facility (37 percent) or 2) the jail or other facility had space but would not accept a DOC offender for another reason (36 percent).

In every legislative session since 2017, the legislature passed language in House Bill 2 incentivizing DOC with extra funding for the directors' office to keep the daily counts of state inmates in county jails at or below 250 offenders, including short-term jail holds. This aimed to help with jail overcrowding. PPD leadership report this limit is difficult to maintain due to current population needs and challenges in moving offenders into facilities, but they do not let it be the reason offenders deemed a public safety risk stay in the community. According to officers, lack of jail space is still a contributing problem to being able to use jail holds. An additional reason cited by officers for jails not accepting DOC offenders is that the legislature capped the daily rate paid by the DOC for jail stays at \$69 a day per inmate. Some counties find this rate too low to recoup the costs of housing an offender. While we found these reasons contributed to officers' inability to use some intervention options, more study is needed to determine whether statutory change could fully fix the issue without other unintended consequences.

#### Conclusion

Statutory changes, including the cap on rates for jail stays, contributed to limiting PPD officers' ability to fully utilize the MIIG, and limiting ability to supervise to risk.

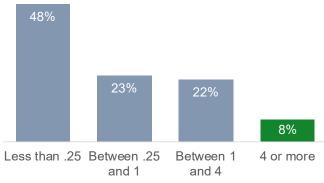
## Officers Underutilize Incentives, Particularly for Higher-Risk Offenders

While it is important for officers to access appropriate interventions, incentives are equally as important. The American Probation and Parole Association suggests that positive reinforcements should outnumber interventions. Some research suggests ratios as high as four-to-one incentives to interventions are most effective. Research has particularly pointed to incentives' power to improve supervision outcomes for higher-risk offenders.

Through data analysis and a survey of offenders, we found officers appeared to underutilize incentives, particularly for higher-risk offenders. Overall, our data analysis of recorded incentives and interventions in OMIS in 2020 noted that officers did not record incentives as frequently as best practices would encourage. It showed that offenders received less than one incentive per intervention. Almost half of the officers gave more than four interventions per one incentive in 2020, and few gave more incentives than

Figure 11

Only 8% of Officers Met or Exceeded the Goal of Four or
More Incentives Provided Per Intervention on Average



Number of Incentives Provided per Intervention Source: Compiled by the Legislative Audit Division from OMIS data.

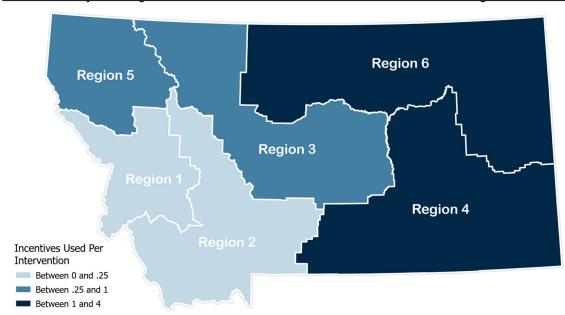
interventions. Figure 11 shows the percentage of officers within various ratios of incentives to interventions.

As the figure shows, only about 30 percent of officers gave more incentives than interventions. Very few officers (about 8 percent) gave out at least four incentives for every one intervention. Use of incentives was inconsistent across the state. As seen in Figure 12, no regions met or exceeded four incentives provided per intervention, and only two provided more incentives than interventions. Total average incentives provided per intervention ranged from .13 in Region 1 to Region 6 recording 3.31. Differences were most significant between

supervising offices, ranging between zero to over six incentives per intervention given on average by officers. Only two supervising offices had officers averaging over four incentives provided per intervention.

Figure 12

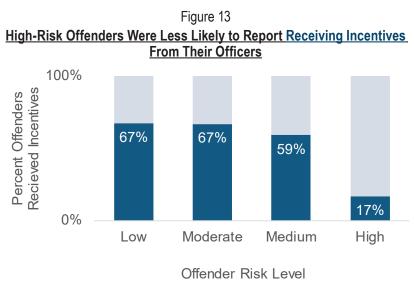
Officers in Only Two Regions Provide More Incentives Than Interventions on Average to Offenders



Source: Compiled by the Legislative Audit Division from OMIS data.

Using OMIS data, we examined how incentive use varied by offender risk level and found no significant differences across risk level. This is contrary to what one would expect when following best practices. One would expect higher-risk offenders to receive both more interventions and more incentives. This is because lower-risk offenders should be better able to self-correct than higher-risk offenders and require fewer incentives and interventions. In our survey of offenders, we asked offenders

if they received any intervention or incentive over the previous six months. Results found that higher-risk offenders were more likely to receive interventions, as one might expect, but were less likely to receive incentives. Figure 13 shows the percentage of offenders who reported receiving an incentive within the previous six months by risk level.



Source: Compiled by the Legislative Audit Division from officer survey data.

While 67 percent of low-risk offenders reported receiving incentives, only about 17 percent of high-risk offenders said the same. This demonstrated the underuse of incentives for higher-risk offenders.

### Some Options on the MIIG Did Not Reflect Current Field Practices

In addition to underuse of incentives, we observed that the MIIG did not accurately reflect field practices. For example, in 2020 there were many incentives and some interventions on the MIIG that were rarely used, such as Day Reporting which requires the offenders make daily contacts with a contracted service. Other incentives, such as approving additional chaperones for sex offenders, were never used. Almost all incentives used were verbal praise, the lowest-level incentive. Officers also noticed the MIIG included guidance for some subsequent interventions for continued behavior to be lower intensity than initial interventions. We also found some option names on the MIIG were outdated. If the MIIG does not reflect current field practices, it increases confusion by the officers using it and could limit the extent to which officers can effectively use the MIIG to respond to offender behaviors.

### DOC Implemented the MIIG Without an Evaluation Plan

The American Probation and Parole Association states the importance of including an evaluation plan when implementing a formal response grid, such as the MIIG. The purpose of an evaluation plan is to assess adherence to the grid and to determine if its use is having the desired effect on offender outcomes. Information regarding staff noncompliance can be used to inform revisions to the grid and to target training efforts. The DOC implemented the MIIG without a formal evaluation plan. As a result, it has not identified, monitored, or responded to officer use of incentives relative to interventions

or targeted training to improve performance. While the department has minimally revised the MIIG since its inception, a more comprehensive evaluation and revision of the MIIG is necessary.

### **RECOMMENDATION #5**

We recommend the Department of Corrections develop processes for ongoing maintenance and evaluation of the MIIG, including making necessary revisions and targeting training efforts.

# Chapter IV – Data Integrity to Monitor & Evaluate Supervision to Risk

### Introduction

The Department of Corrections (DOC) houses offender and supervision data in its home-grown, module-based Offender Management Information System (OMIS). Accurate data collection in OMIS is necessary to monitor whether officers supervise offenders according to recidivism risk and evaluate whether supervision practices effectively improve offender outcomes while protecting public safety. Our audit found that DOC practices and OMIS structure hindered the complete and accurate entry of information by officers within the Probation and Parole Division (PPD) for offenders on community supervision. We found the department needs to improve OMIS by identifying data needs and making data entry easier for officers. The department should also evaluate whether OMIS is meeting the needs of the department long-term. The success of the recommendations in the previous two chapters will depend on the ability of the department to make these improvements.

### Probation and Parole Has a Data Integrity Problem

We identified extensive errors and inconsistencies in PPD data entry practices. These were identified during data review for analysis, observation of officers entering data, and discussions with officers regarding data entry practices. Some examples of data entry errors and inconsistencies include:

- Some officers never marking revocations as interventions.
- Continued use of obsolete check boxes for indicating whether the officer used an incentive or intervention.
- Inconsistent recording of offender and collateral contacts, such as texts or emails.

We identified several reasons for these data integrity issues in OMIS, which we discuss in the following sections.

## The OMIS User Interface Design Is Not Conducive to Easy Data Entry by Officers

In surveys, interviews, and office visits, we frequently heard from officers regarding the difficulty in entering data into the system to complete daily tasks. To observe data entry, we conducted a usability study of OMIS. This study presented a series of data entry tasks to four officers of different backgrounds across the state to complete in a test environment in OMIS. We found that underdeveloped user interface in OMIS contributed to inconsistent data entry during the usability study. OMIS required officers to enter data elements into many different areas for a single event, some repetitively. The interface was also difficult to intuitively navigate, required unnecessary input elements, and had inadequate means to ensure meaningful features of a contact event were captured. Additionally, we noted many instances in which data must be entered into OMIS, retyped into other PDF forms to generate court documentation, printed, signed by the officer and offender, and then reuploaded into OMIS and a shared drive. These factors contributed to duplicative work and increased risk for incorrect or incomplete data entry and data loss.

## Current OMIS Change Request Process Does Not Meet Organization Needs

As another contributing factor to data integrity issues in OMIS, we identified an inefficient process for making changes to the system. Department staff indicated the OMIS change request process did not meet the needs of either IT or program staff. The most recent change request process required requests to go through two different governance committees and multiple different ticketing systems before being assigned to a developer. Because of the number of steps and different levels of approval required to make changes, the process was slow and not transparent to those requesting the changes. As a result, program staff sometimes appealed directly to programmers to prioritize changes significant to their function. Requested changes could not be made promptly due to changes to the system needed to address legislatively-required data collection and reporting. Additionally, once approved, a change was added to a long queue of other change requests, further delaying the process. Compounding the issue was high turnover in the department's IT division.

The process to make change requests should efficiently move requests through an approval process and then be actively prioritized. Project management staff should work with those tasked with governance of the system, program leaders, and IT to maintain, group, and prioritize the change request list.

### Front-End User Needs Should Be Prioritized

Over the years, the department has not prioritized front-end user experience within OMIS. Resources have been prioritized to respond to legislative changes and reporting, resulting in reduced data entry quality and persistent data integrity issues. Small changes could improve the officer user experience in OMIS. However, the most beneficial changes to the system to improve ease and consistency of data entry would require embedding front-end user workflows, increasing front-end validation, and decreasing duplicative entry. These are more substantive changes that will affect multiple system areas at once and will need to be planned accordingly. To effectively complete these changes, DOC project management, IT, and program staff will need to work together to identify workflow needs and develop a road map to prioritize and coordinate the work.

### DOC Needs to Be Able to Use Probation and Parole Data

Collecting data through routine processes, ideally through electronic information systems, is one of the key steps outlined by the Council of State Governments for probation organizations seeking to reduce recidivism. Data should include necessary elements to measure adherence to processes and program performance. Our observations in the field indicated the DOC did integrate some methods to track data in OMIS but missed some key variables. In addition to the data entry errors and inconsistencies described above, we found ways in which the DOC did not collect information as intended or in a usable manner within OMIS. Some areas in which this was noticeable include:

- OMIS MIIG categories did not always reflect the wording of the MIIG, including outdated language and duplicative categories for some responses,
- No method of marking if an intervention was upgraded or downgraded due to mitigating or aggravating circumstances,
- Until February 2022, the DOC did not track the offender behavior precipitating an intervention,

- No consistent means for officers to mark whether conditional discharge paperwork was filled out to indicate offenders were eligible or ineligible in a way that could be collected for analysis, and
- No method of marking outside of chronological notes if an offender was put on a lower level of supervision after a judge denied a conditional discharge.

Once data is identified and collected, it should be used to monitor practices in the field and determine whether these practices have the intended effect on offender outcomes. Until recently, the primary means for quality assurance in PPD was case audits. These audits are not data driven and instead, rely on supervisors to use a checklist to manually review electronic and paper records. This format makes it difficult for these audits to identify major patterns of data entry errors. Until the recent creation of a Caseload Health Dashboard, much of the data entered by officers were never used for quality assurance purposes. Even with the dashboard, larger patterns in data entry errors are difficult to identify.

## The Department Needs to Determine if OMIS Meets Its Needs Long-Term

System structure, change process inefficiencies, and past turnover in the IT development team led to a large backlog in changes to OMIS and an inability to meet user needs. Additionally, these factors contributed to widespread data entry errors and inconsistencies that hindered the department's ability to collect and analyze PPD data efficiently. Some of these issues can be addressed in the short-term with OMIS changes and the OMIS change request process. However, the DOC needs to address these issues long-term. Because of the challenges associated with managing a homegrown, module-based system and increasing challenges in recruiting and retaining IT staff, the department should assess whether OMIS will meet the needs of the department long-term.

#### **RECOMMENDATION #6**

We recommend the Department of Corrections:

- A. Review and update OMIS to ensure community supervision data collection needs are met.
- B. Establish a process for strategically prioritizing OMIS change requests,
- C. Develop a plan to improve ease and consistency of data entry by embedding user workflows, decreasing duplicative entry, and increasing front-end data validation, and
- D. Evaluate and plan for long-term offender management information system needs for the department.

DEPARTMENT OF CORRECTIONS

Department Response



### Greg Gianforte, Governor | Brian M. Gootkin, Director

March 22, 2022

Angus Maciver Legislative Auditor Office of the Legislative Auditor State Capitol, Room 160 Helena, MT 59620-1705 RECEIVED
March 28, 2022
LEGISLATIVE AUDIT DIV.

RE: Performance Audit of "Montana's Probation and Parole Practices: Supervising According to Risk"

Dear Mr. Maciver:

The Department of Corrections has reviewed the Performance Audit completed by the Legislative Audit Division. We are pleased that the recommendations validate the work already been done within the Probation and Parole Bureau to modernize our community supervision work to conform to national best practices. We understand this work requires continuous process improvement and our dedicated probation and parole staff and leadership look forward to working toward the important public safety goals outlined below.

Our Responses and Corrective Actions Plans for each recommendation are as follows:

Recommendation #1: We recommend the Department of Corrections identify means to simplify the assessment and reassessment process without decreasing effectiveness at predicting recidivism risk.

Response: We concur.

Corrective Action: In consultation with the University of Cincinnati Corrections Institute, the department's Quality Assurance Bureau is working on quality assurance planning to ensure efficacy of the risk/needs assessment tools and efficiency in their administration. Once the quality assurance assessment process is firmly in place, the department will norm the nationally validated tool for the Montana population. The department has long identified the need for booster training for all employees across the Public Safety Division in both the MORRA and the WRNA assessment tools. Through our ongoing partnership with UCCI, we have identified areas of focus to assist the evaluators in being more efficient in conducting reassessments. Due to COVID-related travel restrictions on UCCI staff, this work was significantly delayed and will now begin the summer of 2022, when UCCI will conduct Train the Trainers trainings for department staff on both instruments.



Recommendation #2: We recommend the Department of Corrections:

- A. Decrease caseloads for nonspecialized officers below 70 offenders,
- B. Identify and implement options to decrease the administrative requirements of low-risk, nonviolent, and nonsexual offenders, and
- C. Decrease the amount of paper processes and signatures required outside of the OMIS

Response: We concur.

**Corrective Action:** The department has already taken significant steps toward this recommendation. The department is currently using regional administrative caseloads in 2 of the 6 regions. The remaining 4 regions will implement administrative caseloads within the next year. The addition of 10 Probation and Parole officers to various regions has further reduced caseloads. Probation and Parole leadership is evaluating case load distribution to ensure efficiency and that officers are supervising to risk level.

Probation and Parole leadership continues to identify supervision processes that can be simplified and decrease paperwork. As this report was being finalized, the bureau no longer requires signatures on Intervention Hearings, and has decreased Hearing Summaries by utilizing the report ability.

Additionally, the department is moving forward with a request this budget cycle to procure a new offender management system that will be designed for ease of use and decreasing duplication of data entry and other processes.

Recommendation #3: We recommend the Department of Corrections develop a method in its caseload health dashboard to easily identify offenders who have exceeded average days expected by risk level since last offender and collateral contact.

Response: We concur

**Corrective Action:** The Public Safety Division will work with IT to continue to improve the functionality of the Officer Health Dashboard.

Recommendation #4: We recommend the Department of Corrections strengthen the inclusion of offender risk assessment results in officer case management strategies by:

- A. Revising current case plan, policy and procedures,
- B. Establishing quality assurance methods to monitor officer performance,
- C. Providing annual refresher training to officers, and
- D. Evaluating and validating the risk assessments for Montana's Offender population and communicate results to stakeholders.

**Response:** We concur.

**Corrective Action:** The Public Safety Division has already identified and is working on amending the case management procedure which includes case planning. Once this policy is amended, additional and continuous training for all staff will follow.

Phone: (406) 444-3930

Fax: (406) 444-7909

www.cor.mt.gov

Phone: (406) 444-3930

Fax: (406) 444-7909

www.cor.mt.gov



We are committed to enhancing quality assurance methods to monitor officer performance which includes case audits. The division will continue to ensure that these are accomplished on a quarterly basis. In addition, training will be provided on an ongoing basis to supervisors to monitor officer performance.

As the department brings in Train the Trainers for the assessments and refresher training begins, this will start the process of ensuring quality assurance with assessments to norm the validated assessment tools for Montana. In its recent reorganization, the department created a section supervisor of quality assurance within Probation and Parole. This work unit is responsible for training, quality assurance, and continuous process improvement in the areas of risk assessments, case management, supervising to risk, and other core probation and parole supervision functions.

Recommendation #5: We recommend the Department of Corrections develop processes for ongoing maintenance and evaluation of the MIIG, including making necessary revisions and targeting training efforts.

Response: We concur.

Corrective Action: Statute requires the department to review the MIIG every 5 years. The department has reviewed and updated the MIIG once since the statute passed in 2017. The initial revision was based on feedback from stakeholders. Probation and Parole leadership is currently in the process of reviewing and enhancing the MIIG with the expected final adjustments to be completed by August 2022. We are currently in the process of obtaining staff feedback. Prior to implementation, staff will be given updated training. Beginning in 2023, we will review the MIIG annually. Staff and other stakeholders will be provided an opportunity annually to provide feedback or suggested changes to the MIIG.

Recommendation #6: We recommend the Department of Corrections:

- A. Review and update OMIS to ensure community supervision data collection needs are met,
- B. Establish a process for strategically prioritizing OMIS change requests,
- C. Develop a plan to improve ease and consistency of data entry by embedding user workflows, decreasing duplicative entry, and increasing front-end data validation, and
- D. Evaluate and plan for long-term offender management information system needs for the department.

Response: We concur.

Corrective Action: Probation and Parole will continue to work with IT to enhance OMIS data entry processes for end users. We are committed to making the change process and data entry process more efficient. As stated above, the department is moving forward with a request this budget cycle to procure a new offender management system that will be designed for ease of use and decreasing duplication of data entry and other processes.

Respectfully submitted,

Brian M. Gootkin, Director