
Policy Number: 204.005
Title: General Population Offender Programming – Facilities
Effective Date: 5xx/18xx/2610/16/18

PURPOSE: To provide quality programming that targets criminogenic and responsivity needs, skills incarcerated offenders with appropriate skill training, and other quality facility programming to incarcerated people.

APPLICABILITY: Adult correctional facilities Minnesota Department of Corrections, All adult prisons

DEFINITIONS:

Cognitive behavioral interventions program – individual or group interventions designed to help people recognize and change harmful thinking patterns, beliefs, and behaviors that lead to criminal activity. These interventions focus on cognitive restructuring (teaching clients to identify and challenge distorted or risky thoughts), skill building (developing problem-solving, decision-making, and coping skills), and behavioral change (encouraging prosocial behavior and replacing harmful habits with constructive actions), and include evidence-based practices as defined in Policy 610.010. a structured program that helps people learn how to identify and change the unfavorable or antisocial thought patterns that have negative influences on their behavior and emotions. – Examples of programs in the Minnesota Department of Corrections (DOC) include “Decision Points;” “Thinking for a Change;” “Moving On;” “Habilitation, Empowerment, Accountability Therapy” (HEAT); and “Cognitive Behavioral Intervention (CBI) Employment.”

Effective Interventions – evidence-based interventions aimed at addressing the criminogenicie needs of incarcerated people based on the principles of risk, need, and responsivity for justice-impacted populations.

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Effective interventions committee – a committee of DOC staff who are trained in the principles of effective interventions (risk, need, and responsivity for justice-impacted populations) and who review new proposals and requests for providing programming to incarcerated people.

Evidence-Based practices (EBP) – See policy 610.010 “Statewide Evidence-Based Practices Training, Coaching, and Quality Assurance.”

Evidence-promising program – a program that includes principles of effective interventions in its programming curriculum but has not been validated through research to reduce recidivism.

Evidenced based – programs that have been researched and are proven to be effective at reducing recidivism.

Institutional management program – a structured group, program, or service which has a curriculum that does not use the principles of effective intervention; however is important to offer for out-of-cell time and for meeting other needs of incarcerated people such as creative expression or physical activity.

Recidivism reduction program (RRP) – a program that is proven to reduce ~~have an impact on~~ recidivism for justice-impacted people according to published research. Recidivism reduction programs include such examples as cognitive behavioral programs as determined through the effective interventions committee, substance use disorder treatment, sex offense treatment, “EMPLOY,” “Prison Fellowship Academy” (PFA), earning a secondary degree, and earning a post-secondary degree.

Responsivity program – a structured program designed to target a responsivity need identified through the ~~Minnesota Rehabilitation and Reinvestment Act (MRRRA)~~ comprehensive assessment process.
~~Program – a plan of things done in order to achieve a specific result; a facilitated curriculum that is consistently delivered on a regular basis, has a targeted population, addresses a risk and a need, has measured outcomes, has specific admission and discharge criteria, and is evidence-based.~~

~~Promising program – based in research, but has not been validated.~~

PROCEDURES:

- A. The DOC reviews new programs using the principles of effective intervention for corrections programs. If a DOC staff member or community program/partner requests a new program be delivered to incarcerated people, the following review process will be offered:
1. A person submitting a proposal for a new program should be directed to the DOC’s public website to submit an application: Doing Business with the DOC/Department of Corrections (mn.gov).
 2. The evidence-based practices (EBP) unit staff or designee score the proposal using best practices.
 3. If the proposed program fills an identified gap in programming for the incarcerated population or scores within a threshold of evidence-promising practices, the proposal will be submitted to the effective interventions committee for further review.
 4. The effective interventions committee reviews new proposals monthly to assess the need, available resources, and program alignment and determines whether the program should be implemented. Facility administration, caseworkers, and other identified stakeholders will be contacted for input as needed.
 5. Recommendations for implementation of a new program are shared with facility warden(s)/designee(s) ~~operations~~ and appropriate shared management teams to determine the capacity to deliver the program.
 6. The effective interventions committee determines whether a recommended program meets the definition of recidivism-reduction, ~~evidence-promising, or~~ institutional management, ~~or responsivity.~~

7. Corrections program directors work with the program proposers to complete an Implementation Plan (attached) identifying, staffing, resources, fidelity monitoring, and sustainability. Implemented programs are subject to review identified in Procedure C of this policy. Completed Implementation Plans should be sent to the EBP unit director or designee who will review and approve for implementation.
8. The EBP Unit supports corrections program directors in the implementation of approved programs.
9. The effective interventions committee chair or designee e-mails program representatives to notify them when a proposal is not recommended for implementation, and documents the decision that in the SmartSheet. A new program proposal may be resubmitted every six months for programs that were not recommended.

~~A. — may have facility specific programming available to incarcerated offenders. Facility offender programs and offender pilot projects must be analyzed and evaluated annually to determine their contribution to the department's mission, values, vision, and goals.~~

~~B. — There are three tiers of programming provided at facilities: evidence based, promising, and institutional management. Programming provided for by this policy must be evidence based, address offender criminogenic needs, address a level of service/case management inventory (LS/CMI) domain, or reduce recidivism with effective interventions as identified through DOC assessment tools. Additional programming may also include support groups, volunteer, contractor, and life skills programs. Programming provided for by this policy includes examples such as:~~

- ~~1. — Parenting programs;~~
- ~~2. — Restorative justice programs;~~
- ~~3. — Offender transition circle programs;~~
- ~~4. — Offender canine training programs;~~
- ~~5. — Family healing programs;~~
- ~~6. — Recreation (leisure time) programming; and~~
- ~~7. — Conflict resolution and mentor programming for offenders.~~

~~C. — Any new programs must go through the following review process:~~

~~1. — Staff must complete the DOC Program Proposal (attached) and obtain appropriate signatures.~~

~~2. — The Program Proposal must be forwarded to the Transition from Prison to Community (TPC) Steering Committee — effective interventions chairperson.~~

~~3. —~~

~~5. —~~

~~6. — The effective interventions subcommittee must review and assign the appropriate programming tier, making recommendations if necessary.~~

~~4. — The form is sent to the warden for the warden's review, who makes the decision to approve or deny the program.~~

~~5. Completed forms are returned to the requestor. All program approvals must be entered on the TPC iShare site. All proposals must be tracked on the TPC iShare site.~~

~~6. Staff may appeal decisions by sending a request for review to the TPC Steering Committee. The TPC advisory board must determine the final decision.~~

B. Cognitive behavioral programs will be provided consistently to general population incarcerated people at all correctional facilities.

1. Facilitators of cognitive behavioral programs must be trained and certified to deliver the program.

2. Facilitators in conjunction with facility corrections program directors should ensure cognitive programming is provided to incarcerated people following the prioritization matrix in Risk and Needs Program Priorities (attached).

C. DOC staff must review facility programs provided to the general population at each facility to determine each program's contribution to the department's mission, values, vision, and strategic goals, as well as their fidelity to curriculum and program delivery.

1. Corrections pProgram directors (CPDs) at each facility must ensure that every program has an assigned staff person responsible for completing assigned to complete the following scheduled reviews:

a) Recidivism reduction programs (RRPs) managers must be reviewed annually (see attachment B)

b) ~~Evidence promising and~~ institutional management programs must be reviewed once every two years (see attachment C).

c) Review forms must be submitted to the EBP director or designee for review.

2. The CPD must submit requests for full program evaluations or assessments of all recidivism reduction ~~and evidence promising~~ programs to the EBP director or designee at least once every five years (see attachment D).

D. Corrections program directors ensure that approved and implemented programs are listed accurately in the master Minnesota DOC program list used to assist staff and incarcerated people in case planning.

INTERNAL CONTROLS:

A. Annually, DOC staff people responsible for each facility's programming review all programs and program components (including associated attachments) ~~for in terms of~~ accuracy, program objectives, costs, and relation to the department's overall philosophy and goals. Corrections program directors must submit the program reviews to the evidence-based practices director and retain the program evaluations according to the retention schedule. ~~Based on this assessment, annual goals must be identified and incorporated into each program. The information must be available to staff upon request.~~

INTERNAL CONTROLS:

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~~responsible for each facility's offender programming reviews all programs and program components (including associated attachments) for accuracy, program objectives, costs, and relation to the department's overall philosophy and goals. Program managers must retain the program evaluations according to the retention schedule.~~

STATE CORRECTIONAL FACILITY SECURITY AUDIT STANDARDS: None

ACA STANDARDS: None

REFERENCES:— Minn. Stat. §§ [241.01](#) and [244.03](#)

Policy 100.010, "Mission, Values, Vision, and Goals of the Department of Corrections"

Policy 203.0151, "Cognitive Behavioral Programming"

Policy 402.300, "EMPLOY Program"

REPLACES: Policy~~Division Directive~~ 204.005, "Offender Programming – Facilities,"
10/16/181/3/17.

All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: ~~Recidivism Reduction Program Review (204.005B) (Public pdf of 204.005B)~~

~~Other Program Review (204.005C) (Public pdf of 204.005C)~~

~~Five-Year Program Assessment Request (204.005D) (Public pdf of 204.005D)~~

~~Risk and Needs Program Priorities (204.005E) (Public pdf of 204.005E)~~

~~New Program Implementation Plan (204.005F) (Public pdf of 204.005F)~~

ATTACHMENTS: ~~Program Proposal (204.005A)~~

~~Tip Sheet (on the Transition from Prison to Community – Effective Interventions iShare site)~~

APPROVALS:

~~Deputy Commissioner of Corrections, Facility Services~~

~~Deputy Commissioner, Community Services~~

~~Assistant Commissioner, Facility Services~~

~~Assistant Commissioner, Operations Support~~

Instructions

204.005LL, "Foster Dog Program"