DEPARTMENT OF CORRECTIONS

Policy Number:	**620.020**
Title:	**Adult Supervision Case Planning Policy**
Effective Date:	**7/1/26**

PURPOSE: The purpose of this policy is to establish standardized guidelines for assessment-driven, collaborative case planning across all community supervision agencies in Minnesota. The goal is to ensure fair, equitable, effective, and consistent supervision practices that focus on identified criminogenic and behavioral health needs for moderate-, high-, and very high-risk individuals, promoting behavior change, reducing recidivism, and enhancing public safety.

APPLICABILITY: All Community Supervision Agencies (Community Corrections Act (CCA), County Probation Officer (CPO), and Minnesota Department of Corrections (DOC)).

DEFINITIONS:

Case Plan – guides the corrections practitioner and the client toward the accomplishment of action steps and goals. The plan targets criminogenic needs and should be written, time- and goal-driven, and dynamic in nature.

Case Planning – a collaborative, structured framework designed to reduce a client's risk of reoffending by building skills through cognitive behavioral interventions addressing a client's criminogenic needs. Unlike monitoring compliance with conditions, case planning is an evidence-based practice that supports behavior change through a sequence of connected steps. An agency's case planning framework includes processes such as engagement, assessment, normative feedback, focus and alignment, goal setting, on-going skill practice, and transition.

Cognitive Behavioral Interventions (CBIs) – 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 people 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).

Criminogenic Needs –attributes that directly contribute to an individual's likelihood of engaging in future criminal behavior and that can be changed through interventions. (Examples include the ability to cope with life's stressors in a healthy way, the ability to identify positive peers, ability to make good decisions.)

Evidence-Based Practices (EBP) – strategies and techniques proven through rigorous empirical research to reduce recidivism, such as motivational interviewing, case planning, targeting more interventions to higher-risk individuals and less intervention to lower-risk individuals, targeting an individual's thinking and behaviors through skill building, personalizing the approach for the best outcomes, and engaging community support.

Incentives – reinforcements, tangible, or intangible, to encourage prosocial behavior (for example, certificates, reduced reporting requirements, early discharge requests).

Interventions – structured strategies, services, and skill-building activities designed to reduce criminogenic needs, support behavior change, and promote successful outcomes while on supervision.

Level of Service/Case Management Inventory (LS/CMI) – a validated assessment tool used to determine an individual's risk of recidivating, identify circumstances and behaviors that increase or mitigate risk (needs and strengths) indicating targets for intervention, and to identify specific responsivity factors for an individual.

Responsivity – individual characteristics that can affect an individual's response to interventions, such as motivation, cognitive abilities, mental health, and learning style.

1. General Responsivity – Justice involved individuals are more successful when they have a professional alliance with their agent and more success when the agent uses cognitive behavioral interventions to building skills targeting the individual's criminogenic needs.
2. Specific Responsivity - The individual's specific situation and characteristics must be considered with client interventions. Some of many such considerations are a client's learning style, motivation, abilities, and cultural context.

Risk-Need-Responsivity (RNR) Model – a framework supported by extensive research, comprised of principles guiding effective client rehabilitation. Key principles include directing more intervention to higher- risk individuals and less intervention for lower risk individuals (Risk Principle); targeting criminogenic needs through case planning and intervention (Need Principle); and tailoring interventions to an individual's learning style, motivation, and abilities (Responsivity Principle).

Sanctions – accountability measures to address undesirable behavior (for example, effective disapproval, sanctions conferences, review bench warrants, probation violations).

PROCEDURES:

A. General Policy

All applicable clients must be engaged in case planning that is assessment-driven, targets criminogenic needs, and is responsive to individual strengths and barriers. The process must align with the risk-need- responsivity (RNR) model and utilize the CSTS platform for documentation and ongoing updates. The process must be a joint effort between the probation officer and the client to maximize the likelihood of success.

B. Mandatory Case Planning

1. Agents must case plan with all clients under supervision who are assessed as high- and very high-risk. Agents are encouraged to case plan with clients who are assessed as medium-risk.

2. For all cases in which a case plan is required, a case planning process must be used and documented at each planned client visit.

C. Documentation

Agencies and agents must use and document an evidence-based case planning process that incorporates initial and on-going processes, including:

1. Initial appointment;
2. Assessment appointment;
3. Focus and alignment appointment;
4. Goal setting appointment;
5. Ongoing skill practice appointment; and
6. Transition appointment.

D. Assessment-Driven Approach

1. Case plans must be based on a current validated risk and needs assessment, (for example, Level of Service/Case Management Inventory (LS/CMI)), and/or an appropriate tool (for example, Dynamic Risk Assessment for sex offense specific individuals).

2. The assessment guides identification of criminogenic needs, prioritization of intervention targets and intensity of supervision.

E. Alignment with the RNR Model

Case plans must align with the RNR model as follows:

1. Risk Principle – The level of supervision and interventions must match the client's risk level (that is, people who are lower risk should have less supervision and fewer interventions while people who are higher risk should have more intense supervision and more interventions).

2. Need Principle – Focus must be on attributes that directly contribute to an individual's likelihood of engaging in future criminal behavior.

3. Responsivity Principle- Both general and specific responsivity must be considered.

F. Responding to Client Behavior

1. Responses to client behavior must be purposeful, consistent, and directly tied to the individualized case plan. Interventions, incentives, and sanctions must reinforce prosocial behavior, reduce undesirable behavior, and strengthen client motivation. All responses must be, or have the ability to become, evidence- based, proportionate to the behavior, and applied with fairness, consistency, and consideration of client circumstances.

2. Agencies must evaluate responses to ensure evidence-based application and equity.

G. Integration with CSTS

1. A case planning process must be documented and updated within the CSTS system (Case Plan Module).

2. CSTS must be used to record assessments, interventions, goals, action steps, progress notes, and indicators of success or progress.

3. Staff must be trained in CSTS functionality relevant to case planning and documentation.

H. Roles and Responsibilities

1. Agents: Develop, monitor, and update case planning in CSTS in collaboration with clients.

2. Supervisors: Ensure compliance with policy, provide oversight, and review case planning for quality assurance.

3. Administrators: Ensure staff training, provide system support, and develop and follow an evidence-based implementation plan and policy adherence across the department.

I. Quality Assurance and Review

Supervisors must conduct periodic audits of case planning in CSTS to ensure fidelity to this policy. Agencies must collect and analyze data on key metrics related to case planning, such as the number of open case plans by risk level, frequency of updates, percentage targeting specific needs (criminogenic vs. non- criminogenic), types of interventions used, and completion of action steps. This data will be used to inform continuous quality improvement efforts.

STATE CORRECTIONAL FACILITY SECURITY AUDIT STANDARDS: None

INTERNAL CONTROLS:

A. Case planning is documented in CSTS.

B. Supervisors conduct periodic audits of case planning.

C. Community supervision agencies report appropriate information as requested in their comprehensive plans.

REFERENCES: Minn. Stat. § 401.17, subd. 3(a)(3) and (6).

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

ATTACHMENTS: None

APPROVAL:

Commissioner of Corrections