



Operating Procedure

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Office of Primary Responsibility Re-entry and Programs Director	

I. PURPOSE

This operating procedure establishes protocols for the operation of facility programs in Department of Corrections facilities and other services provided to the offender population. Provision is made for the establishment and monitoring of Evidence Based programs and Skills Development Programs delivered to offenders.

II. COMPLIANCE

This operating procedure applies to all units operated by the Department of Corrections (DOC). Practices and procedures shall comply with applicable State and Federal laws and regulations, Board of Corrections policies and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

III. DEFINITIONS

Annual Review - A uniform yearly review of an offender's classification, needs, and objectives; the Initial Classification Date (ICD) is used to establish the review date for an offender received on or after February 1, 2006. The Custody Responsibility Date (CRD) is used to establish the review date for an offender received prior to February 1, 2006.

Cognitive Counselor - Manages offenders in a cognitive community; plans, coordinates, implements, and evaluates the institution's approach to offender re-entry within in the cognitive community based on the principles of Evidence Based Practices (EBP)

Community Corrections Facility - A residential facility operated by the Department of Corrections to provide the Detention Center Incarceration program in accordance with COV §53.1-67.8 or the Diversion Center Incarceration Program in accordance with COV §53.1-67.7

COMPAS (Correctional Offender Management Profiling for Alternative Sanctions) - The DOC approved risk/needs assessment which consists of different versions for community corrections and Institutions; COMPAS is a support system for supervision and case-management decisions, a database used in combination with VACORIS, a tool that assesses two critical risks - violence and recidivism and a tool for determining the criminogenic needs that are used to develop case plans and set programing.

Corrections Case Management Counselor - Provides a range of casework management services, programming and guidance for offenders in a correctional facility to enhance the security of the facility and promote offenders' long-term pro-social behaviors.

Counseling Services Program - A structured service or activity facilitated by employees of the DOC or other state agency, qualified volunteers, or contractors, that is offered to address identified criminogenic needs of offenders with the ultimate goal of promoting pro-social, law abiding behaviors.

Evidence Based Practices (EBP) - Correctional decision making derived from research findings about practices proven to change offender behavior thereby reducing the risk for recidivism.

Facility - Any Community Corrections facility or institution.

Institution - A prison facility operated by the Department of Corrections - includes major institutions, field units, and work centers.

Institutional Program Manager (IPM) - The position at each major institution who coordinates program activities, monitors VACORIS for accurate data entry, and ensures programs are being offered with fidelity.

Mandated Program - A program that is required to be provided by the DOC i.e., *Thinking for a Change*, the *Matrix Model Substance Abuse Program*, *Ready to Work*, and *Resources for Successful Living*

Mental Health Services Program - A structured service or activity facilitated by Qualified Mental Health Professionals employed by the DOC or other state agency, qualified volunteers, or contractors, that has been reviewed by the Mental Health Services Steering Committee and approved by the Mental Health Director. The program is offered to address mental health needs of offenders with the ultimate goal of promoting pro-social, law abiding behaviors.

Mental Health Services Steering Committee - A group of selected Qualified Mental Health Professionals that reviews issues as directed by the Mental Health Director

Offender Re-entry Timeline - A plan developed for each offender within the first 180 days of entering a DOC institution and updated at annual review to ensure that the appropriate EBP programs and skill based courses are provided so that the treatment needs of the offender are addressed in chronological order and completed prior to release.

Offender Workforce Development Specialist (OWDS) - A position that facilitates workforce development experiences to prepare incarcerated offenders for re-entry employment

Qualified Mental Health Professional (QMHP) - An individual employed in a designated mental health services position as a Psychologist or Psychology Associate, Psychiatrist, Social Worker (Masters level) or Registered Nurse or an individual with at least a Master's degree in psychology, social work, or relevant human services field with knowledge, training, and skills in the diagnosis and treatment of mental disorders.

Re-entry Senior Probation Officer (Re-entry SPO) - This position serves as a team leader for assigned probation district(s) to coordinate release planning and supervision for offenders re-entering the community from incarceration in state facilities. The position works with the Intensive Re-entry Program Phase 2 - Cognitive Community and participates on local Re-entry Councils. The position also assists with the coordination of family reunification seminars and peer support groups for offenders in the Cognitive Communities at assigned facilities.

Release Tracks - A track that an offender is projected to be on at the time of release which can and may change throughout their incarceration. The release tracks are: Geriatric, Sex Offender Treatment (SORT), Substance Abuse Cognitive Therapeutic Community (CTC), High Security Re-entry Release, Intensive Re-entry, and Work Release/Work Center.

Sex Offender Services or Treatment Program - A structured service or activity that is offered to address specific issues of sex offenders with the ultimate goal of promoting pro-social, law abiding behaviors. Sex Offender Programs must be facilitated by employees of the DOC or other state agency, qualified volunteers, or contractors who are certified as a Sex Offender Treatment Provider or otherwise qualified in accordance Operating Procedure 735.2, *Sex Offender Treatment Services (Institutions)*.

Skills Development Program - A structured service or activity facilitated by employees of the DOC or other state agency, qualified volunteers, or contractors, that is offered to increase offender skills with the ultimate goal of promoting pro-social, law abiding behaviors

Substance Abuse Cognitive Therapeutic Community (CTC) - An intensive, long-term, institution-based treatment program for incarcerated substance abusing offenders; the community defines right living as an integral concept through role modeling and confrontation of unhealthy lifestyles. A hierarchy structure is utilized within the community to create accountability and responsibility for the offender population.

Unit Manager - Position responsible for ensuring the safe, secure, and orderly operation of a particular housing unit or group of housing units under their supervision

Veteran - Anyone who has served in the armed services regardless of length of time or discharge classification

Women's Risk/Needs Assessment (WRNA) - The risk/needs assessment tool sanctioned by VADOC for institutions and community corrections that includes gender-neutral risk/needs information, but also is inclusive of gender-specific factors such as mental health, child/adult abuse and/or victimization, relationship dysfunction, parental stress, and housing safety. Areas of strength such as self-efficacy, parental involvement, family support, and education are also assessed. The WRNA is used to develop gender-responsive case plans and identify programming needs designed to reduce recidivism of female offenders.

IV. PROCEDURE

A. General Treatment Mission

1. The DOC's goal is to promote long term public safety and reduce crime by preparing offenders for success through adequate supervision and the provision of a continuum of services, in collaboration with state and local partners, from the time of the offender's first contact with the DOC through transition and reintegration in the community. (2-CO-4F-01)
2. Each DOC facility will have a treatment department or unit devoted to meeting the case management and programmatic needs of the offenders. Depending on the facility mission and staffing level, the treatment department will coordinate with other service providers such as education, mental health, medical, and recreation to provide a range of services and resources appropriate to the assessed criminogenic needs of offenders. (2-CO-3C-01)
3. The DOC emphasizes the use of Evidence Based Practices (EBP)
 - a. EBPs are focused on reducing offender risk by emphasizing offender behavior change, thereby reducing new crime and improving public safety.
 - b. Operations, programs, and services are founded on a well-established, contemporary body of evidence-based practices for offender management which is designed to complement traditional security tools and incorporates the following:
 - i. Effective communication
 - ii. Identification of offender criminal risks and treatment needs
 - iii. Development of case plan agreements to motivate offender change
 - iv. Establishment of effective incentives and sanctions (see Attachment 1, Cognitive Community Programs Incentives and Sanctions for Intensive Re-entry)
 - v. Provision of programs and services to address criminogenic needs

B. Staffing

1. Each counseling department should be administered and supervised by a qualified, trained person with a minimum preferred qualification of a bachelor's degree in the social or behavioral sciences or a related field. (4-4432)
2. A planned, organized counseling program is provided by Counselors and other persons qualified by either formal education or training. (4-4433)
3. The DOC determines appropriate levels of treatment department staffing. The mechanisms used to determine such staffing levels include: (4-4434)
 - a. Type of offender population served
 - b. Assessed needs of the offender population
 - c. Type of facility
 - d. Legal requirements
 - e. Goals to be accomplished
 - f. The facility's use of a "team" approach and use of paraprofessionals, volunteers, and students also may influence the numbers of professional staff required.

4. Each Intensive Re-entry Program Phase 2- Cognitive Community shall be staffed by at least one Cognitive Counselor.

C. Provision of Services

1. Upon arrival at a DOC facility, each offender is assigned to a Counselor to ensure appropriate supervision and personal contact. This Counselor may be part of a treatment or a unit management team that performs this function. (4-4299, 4-ACRS-5A-07)
2. The Institutional Program Manager (IPM) or other appropriate staff is responsible for ensuring the quality and fidelity of Skills Development Programs as well as ensuring that counseling programs are provided by Counselors or other persons qualified by either formal education or training. (2-CO-4F-01)
 - a. The IPM will conduct fidelity reviews on eight percent of the facility offender population each month using the [Institution Fidelity Review Guidelines](#) 841_F19.
 - b. The IPM should take the following steps to document and follow-up on fidelity reviews.
 - i. Document each case reviewed in VACORIS as an Institutional Fidelity Review note.
 - ii. Review COMPAS assessments for accuracy
 - iii. Establish a file for retaining copies of their work related to the *Fidelity Review* for future reference and to discuss with the Statewide Program Managers and EBP Managers during visits
 - iv. Work with staff (and their supervisors as needed) to resolve and correct the issues they find
 - v. Contact Headquarters staff (i.e., Statewide Program Manager, Statewide EBP Manager, Classification, etc.) as needed to obtain assistance
 - vi. Provide or coordinate necessary training to address ongoing problems
 - vii. Keep the Facility Unit Head or designee informed regarding the status of fidelity reviews
 - viii. Provide feedback to Unit Managers or other supervisors on staff training needs
 - ix. Assist supervisors with employee development plans
3. The IPM will check the programs sections in VACORIS monthly.
4. The IPM ensures that 95% of the offender population has current timeline, COMPAS assessments, and case plans in VACORIS.
5. Counselor Programmatic Responsibilities
 - a. Counseling department staff shall be available to counsel offenders upon request. At least one counseling department staff member shall be on-call at all times to provide crisis intervention services. (4-4435; 2-CO-4F-01)
 - b. Counselors shall be assigned duties that support the facility mission and offender population needs and may consist of facilitating EBP Programs, coordinating/ facilitating Skills Development Programs or any combination of the above.
 - c. Each Counselor is responsible for the case management documentation for each assigned offender.
 - d. A COMPAS Lite, COMPAS Re-entry (All Scales), COMPAS Long-Term (for male offenders with 20 years left to serve) or WRNA assessment will be completed for all offenders within 60 days of their transfer date (as reflected on the transfer screen in VACORIS) into a reception center or other DOC facility for intake from a jail or other non-DOC facility.
 - e. A COMPAS Re-entry (All Scales), COMPAS Long-Term (for male offenders with 20 years left to serve) or WRNA assessment will be completed for all offenders within 180 days of their transfer date (as reflected on the transfer screen in VACORIS) into a reception center or other DOC facility for intake from a jail or other non-DOC facility.
 - i. The COMPAS Re-entry (All Scales), COMPAS Long-Term (for male offenders with 20 years left to serve) or WRNA will be updated (re-assessment) within 30 days, before or after the offender's *Annual Review Date* provided on the offender's *Home Page* in VACORIS. If the annual review date falls within 6 months of the offender's release date, no COMPAS or WRNA is required.

- ii. If an offender refuses to participate in the COMPAS assessment, the Counselor shall complete a COMPAS Basic and submit a Disciplinary Offense Report 119b-Refusal to participate in testing, classification, or re-entry preparation/ Diagnostic, educational, psychological, or other required evaluation in accordance with Operating Procedure 861.1, Offender Discipline, Institutions.
 - iii. The assessment results will be used to establish a viable *Re-entry Case Plan*. (see Operating Procedure 820.2, *Re-entry Planning*)
- f. Administration of COMPAS
- i. Official Record:
 - (a) When a new COMPAS risk/needs assessment is administered upon reception, at a minimum staff must review the offender's most recent presentence investigation (PSI) and complete a Virginia Criminal Information Network (VCIN) records check.
 - (b) Staff must gather information from VCIN, PSI, and other official sources containing criminal history when appropriate, not only offender self-report or interview, to complete the Official Records section of the assessment.
 - (c) If the counselor uses any offender self-reported information that could not be independently confirmed in the calculation of the COMPAS risk/needs assessment (i.e. juvenile record information), the information should be recorded in the *Facility Notes* of VACORIS.
 - ii. Interview:
 - (a) The Interview section of the COMPAS risk/needs assessment must be administered in collaboration with the offender via a semi-structured interview between the Counselor and the offender.
 - (b) Assigned Counselors should always use the administration of this section of the COMPAS risk/needs assessment as an opportunity to establish rapport with offenders, utilize motivational interviewing skills and techniques, and ensure that the questions are understood and answered appropriately by the offender.
 - (c) Hard copies of blank or completed COMPAS risk/needs assessments and alternative screenings must never be given to the offenders.
- g. A *Re-entry Case Plan* for each offender will be developed within 180 days of their transfer date (as reflected on the transfer screen in VACORIS) into a reception center or other DOC facility for intake from a jail or other non-DOC facility and, thereafter, within 30 days, before or after the offender's *Annual Review Date*. The *Re-entry Case Plan* will be based upon the offender's identified criminogenic needs in order to decrease the risk for recidivism and violence, and to ensure the appropriate and efficient use of agency resources.
- h. A Classification Assessment will be completed as provided in Operating Procedure 810.1, *Offender Reception & Classification*, and Operating Procedure 810.2, *Transferred Offender Receiving and Orientation*.
- i. For offenders with Parole Eligibility Dates, a *Facility Parole Board Note* will be completed in VACORIS for inclusion in the *Offender Progress Report*. (4-4304)
- i. The *Offender Progress Report* provides a current and complete history of the offender's performance in the institution and provides for a proposed home plan.
 - ii. Staff shall not make separate and independent recommendations to the Parole Board regarding an offender.
 - iii. The *Offender Progress Report* is available for review by the Parole Board, prior the offender's parole hearing.
- j. The Counselor shall develop an *Offender Re-entry Timeline* for each offender within 180 days of their transfer date (as reflected on the transfer screen in VACORIS) into a reception center or other DOC facility for intake from a jail or other non-DOC facility and update at each annual review period.
- i. The Re-entry Timeline will be based on the results of the COMPAS and designed specifically to address the individual criminal risks and identified treatment needs specific to each offender

- to ensure that appropriate Skills Development Program are completed in chronological order to include which release track is forecasted for that offender. It shall be entered into VACORIS under the note type of *Timeline*.
- ii. Offenders shall be recommended for transfer to the appropriate facility as needed to advance to the next step in their *Re-entry Timeline*.
 - iii. The *Re-entry Timeline* will be updated at each annual review or as events warrant. Each *Timeline* update will be documented in VACORIS under the note type of *Timeline*.
- k. All offenders enrolled in an EBP Program or Skills Development Programs will be documented in VACORIS. The offender's enrollment status will be kept current and accurately maintained at all times. The actual start and end date of the offender's program participation shall be entered under the offender enrollment details section of the *Offender Enrollment Page* in VACORIS.
 - l. The Counselor shall review the offender's work classification during the offender's annual review month and when warranted, assign the offender to the appropriate work classification in VACORIS in accordance with in Operating Procedure 425.1, *Outside Work Assignments*.
 - m. Counselors shall communicate and coordinate with other facility departments as needed to assist offenders in their adjustment to the facility and to advance the facility mission including serving as members of unit management and treatment teams
 - n. Counselors shall communicate with Probation and Parole (P&P) Officers and other resources as needed to assist the offender to prepare for re-entry into the community upon release from a DOC facility.
6. The Chief of Housing and Programs (CHAP) will assign each counselor to a supervisor (i.e., Unit Manager or IPM) who will complete the *COMPAS/Case Plan Fidelity Review* on that counselor. For those facilities that do not have the CHAP/IPM/Unit Manager structure, the counselor's supervisor can make the determinations on how these reviews will be conducted and information collected.
- a. Staff will use the *COMPAS Case Plan Fidelity Review - Institutions 841_F23* to complete three *COMPAS/Case Plan Fidelity Reviews* per counselor every quarter. The same staff member should complete all three reviews for their assigned counselor so they can look for patterns.
 - b. The CHAP will maintain documentation of which *Reviews* were completed and the staff that did the *Reviews* for quarterly facility report purposes.
 - c. Copies of the *COMPAS Case Plan Fidelity Review* will be available to the Statewide Program and Evidence Based Managers when they make site visits.
 - d. The *COMPAS/Case Plan Fidelity Reviews* are not a replacement for the requirement of facilities to complete overall fidelity reviews on eight percent of their population each month, as these reviews contain additional information to review that goes beyond COMPAS.
7. The Institutional Program Manager (IPM) or other appropriate staff will ensure that program sections are accurately entered into VACORIS.
- a. Program Sections will include the program capacity, the maximum number of offenders that can be enrolled in the program section at one time, and the start date and end date for each offering. Most sections will have a beginning and ending date to accurately reflect what is being offered at the facility.
 - b. Only ongoing programs should be entered into VACORIS with a continuous status. Examples of ongoing programs include support groups, Cognitive Therapeutic Communities (CTCs) and the Intensive Re-entry Programs.
 - c. Program sections will be accurately maintained in VACORIS.
 - d. Offenders will be enrolled and removed within a week of the program's start and end dates.
8. Offender Workforce Development Specialist (OWDS)
- a. Teaches employability, money management and career advancement skills utilizing contemporary workforce development materials and ensures that each participant completes a *Re-entry Employment Portfolio*, prior to program completion

- b. Ensures that volunteers and other community resources are trained, orientated, monitored and utilized to augment services (4-4431)
 - c. Secures subject matter expert guest speakers to enhance offenders' knowledge and skill acquisition
 - d. Creates linkages with community agencies and organizations providing post-release offender job development services and employer outreach (4-4431)
 - e. Establishes and operates a "Re-Entry Employment and Resource Center", ensuring access for all offenders preparing for release; equips Center with information on current employment opportunities
 - f. Registers interested offenders with the Virginia Workforce Connection-Virtual One Stop when they are within three weeks of release. (4-4431)
 - i. Offenders must sign the [Virginia Workforce Connection Virtual One Stop Permission](#) 841_F18 authorizing the OWDS to enter their personal information into the Virginia Workforce Connection Virtual One Stop (VWC-VOS) system.
 - ii. Sex offenders who do not have post-release internet restrictions imposed by the Court or the P&P Office are eligible for registration.
 - (a) Sex offenders with post-release internet restrictions imposed by the Court or P&P Office are ineligible for registration.
 - (b) The OWDS will contact the P&P Office that will be supervising the offender and request a review of the offender's court order to confirm there are no special conditions restricting internet usage.
 - (c) The P&P Office will also confirm whether the offender is required to register with the Sex Offender Registry.
 - (d) The OWDS who provides VWC-VOS registration assistance to an offender, who is required to register with the Sex Offender Registry, shall notify the Facility Records Manager.
 - (e) Designated facility staff will complete or update the Virginia State Police Registration Form (SP-236) in accordance with Operating Procedure 735.1, *Sex Offender and Crimes against Minor Registration*.
 - iii. Offenders can register directly with the Virginia Employment Commission (VCE) by mailing a paper copy of the VWC-VOS registration form, available from the OWDS, to VCE, who will enter their information in the VWC-VOS system.
 - g. Initiates, plans, and coordinates annual Employability/ Resource Fairs.
 - h. Links offenders to community workforce development agencies and organizations in their home community. (4-4431)
9. Incarcerated Veterans Groups
- a. All institutions should provide information on veteran-related services offered in the facility and provide information on how to access such services during offender orientation.
 - b. Every institution will permit the establishment of a veterans group for offenders.
 - c. Any offender that wishes to become a member of a veteran group is required to secure a copy of their *Certificate of Release or Discharge from Active Duty* (DD-214). The offender is allowed to possess their own military discharge (DD-214), military medical records, and other documents (other than military identification card) related to their military service.
 - d. Veteran groups should meet at least twice per month.
 - e. All veteran groups should be governed by a constitution and set of by-laws, established by the group's members and approved by the designated veteran sponsor. These documents should include, but are not limited to the following:
 - i. Mission Statement
 - ii. Purpose
 - iii. Membership
 - iv. Responsibilities of group members

- v. Meetings
- vi. Duties of Board members
 - (a) Board member positions include the President, Vice President, Secretary, Sergeant of Arms, and Program Coordinator.
 - (b) The Board will meet with the veteran sponsor twice a month, separately from the regularly scheduled group meeting.
- f. Each veterans group will operate with a designated veteran sponsor.
 - i. The individual selected to serve as the veteran sponsor should be a DOC employee.
 - ii. The veteran sponsor will serve as a liaison between the veterans group, DOC administration and external veteran-related civic organizations.
 - iii. The veteran sponsor is responsible for:
 - (a) Coordinating the group meetings
 - (b) Coordinating the election process and selection of the group's board members
 - (c) Approving the group's constitution and by-laws
 - (d) Ensuring that every group member has a DD-214 (*Certificate of Release or Discharge from Active Duty*)
 - (e) Assist group members with obtaining the necessary forms related to securing veteran benefits, compensation and pension, and/or other eligible veteran-related services if needed.
- g. All veteran groups will be permitted to observe Memorial Day and Veterans Day.
 - i. Light refreshments (i.e. cookies and juice) will be provided by the institutions at these celebrations.
 - ii. The observation of these two holidays does not have to take place on the day celebrated by the nation.
- h. Every veteran group should develop, maintain, and update accordingly a resource guide of various veteran-related services and support agencies for its members. (4-4431)
- i. Every veterans group should include philanthropic practices into its operation. The charity of choice should be determined by the group members and approved by the institutional unit head.
- j. Medical records from the Veterans Administration (VA) received by the institution shall be provided to the offender at no cost. Such medical documentation is pertinent to support the veteran offender's claim for benefits from the VA. If copies are needed to support a claim for benefits, the offender will be provided with such copies at no cost.

D. Access to counseling services

1. Although some counseling services are targeted to address specific criminogenic needs, there may be no discrimination based on an offender's race, sex, color, national origin, religion, sexual orientation, gender identity, age, political affiliation, genetics, veteran status, disability, or political views in making administrative decisions and in providing access to programs or services. (4-4277; 4-ACRS-6B-01; 2-CO-3C-01)
2. The DOC prohibits discrimination on the basis of disability in the provision of services, programs, and activities administered for program beneficiaries and participants. (4-4429) Programs and services are accessible to offenders with disabilities who reside in the facility. (4-4142, 4-ACRS-6A-04)
3. In accordance with its population and mission, each facility provides for staff and offender access to Qualified Mental Health Professionals and other appropriately trained and qualified individuals who are educated in the problems and challenges faced by offenders with physical and/or mental impairments. Certain facilities are designated to meet legal requirements for access and protection of offenders with disabilities and to provide programs designed to educate and assist disabled offenders. (4-4429-1; 4-ACRS-6A-01-1; 2-CO-4F-01)
4. Programming Hours
 - a. COV §53.1-32.1 requires all facilities within the DOC to provide a minimum average of 40 hours per week of programming to incarcerated offenders. Programming may be a combination of work,

education, and programs.

- b. Minimum programming hours for each facility may be addressed in yearly objectives issued by the Chief of Corrections Operations or designee. Each facility, however, shall seek to exceed the minimum requirement and provide as much EBP programming as possible, *Thinking for a Change* (T4C) is a priority. Due to operational missions, schedules, staffing, and space, facilities may vary in the amount of programming hours they are able to provide.
- c. Facility program hours are averaged across the system to determine the DOC's compliance with COV §53.1-32.1. Hours range from orientation programs that may only provide one hour of programming a week to Cognitive Therapeutic Community Programs that are 40 hours per week.
- d. No program should exceed 40 hours per week.

E. Programming Philosophy

1. A facility's programs shall be designed to support its mission, taking into consideration the security level and the offender population's needs, including individual and family counseling, family planning and parental education, and community services. (4-4428)
 - a. Facilities housing female offenders shall provide comprehensive counseling and assistance to pregnant offenders in keeping with their expressed desires in planning for their unborn children. (4-4436)
 - b. All facilities shall provide services related to substance abuse, to include monitoring and drug testing, for offenders with drug and alcohol addiction problems. (4-4437)
2. The DOC makes a distinction between EBP Programs and Skills Development Programs. Skills Development Programs include Reentry Money Smart, Canine Obedience, special seminars and faith based programs. In order for a program to be considered EBP it must meet the following criteria:
 - a. Address 3 or more criminogenic needs
 - b. Be experiential in nature (at least 25% Thinking Reports, Rehearsals, Role Plays, Homework, and Activities)
 - c. Be cognitive based to address criminal thinking
 - d. Incorporate Social Learning
 - e. Have group sizes of no more than 14 participants with 12 being the optimum size
 - f. Have appropriate durations; for residential programs where offenders reside together and meet regularly it must be 6 months or longer. Non-residential programs meet at least an hour per class but no more than two sessions per week, for at least 20 sessions. (*Matrix Model Substance Abuse Program* is an exception based on the program's components that are built to run concurrently.)
 - g. Ensure staff are appropriately trained
 - h. Be proven via independent research to be effective with criminal populations, or be identified as promising based on EBP principles
 - i. Use identified objective measures for evaluations (e.g. *TCU Criminal Thinking Scale*)

F. Program Administration

1. Counseling Services - The Statewide Program Managers guide and monitor program operations. Staff at facilities shall consult the Statewide Program Manager when developing or revising programs. Programs shall not be offered at institutions without an approved [Initial EBP Program Description \(IPD\)](#) 841_F10 or [Initial Skills Development Program Description](#) 841_F11.
2. Mental Health Programs - The Chief of Mental Health Services (CMHS) oversees and directs the implementation and assessment of all Mental Health Services programs.
3. Sex Offender Treatment - The Sex Offender Program Director oversees and directs the implementation and assessment of all Sex Offender programs for facilities.
4. At least annually, facility staff should identify the needs of the offender population to ensure that the

necessary programs and services are available, including programs and services to meet the needs of offenders with specific types of problems. (4-4430; 2-CO-1A-23) Employees shall participate in the formulation of programs to meet identified needs. (4-4004)

G. EBP Programs Development and Approval

1. Prior to implementation, the facility must receive approval for each new EBP Program. The [Initial EBP Program Description \(IPD\)](#) 841_F10 shall be submitted 90 days prior to proposed implementation of the program.
2. Each proposed EBP program, should be documented using the [Initial EBP Program Description \(IPD\)](#) 841_F10:
3. EBP Programs - Counseling Services
 - a. When the DOC mandates a counseling services program, a model [Initial EBP Program Description \(IPD\)](#) 841_F10 will be developed at Headquarters for use at each site. The program will be entered into VACORIS and each facility has 30 days to return the [Initial EBP Program Description \(IPD\)](#) 841_F10 completing the sections specific to its implementation of the program.
 - b. When a facility wants to start a new EBP program that has not been mandated, they must receive approval prior to implementation and the following process must be followed:
 - i. The [Initial EBP Program Description \(IPD\)](#) 841_F10 shall be submitted to the Statewide Program Manager 90 days prior to the proposed implementation of the program.
 - ii. The Statewide Program Manager will review the IPD and consult with the site as necessary. Programs that have a Model IPD are pre-approved and can be added to VACORIS with the signature of the Statewide Program Manager.
 - iii. After completing the review of the IPD, the Statewide Program Manager shall forward the IPD to the Administrator of Case Management for final approval.
 - iv. Once approved, the facility will be notified by the Statewide Program Manager that the program has been entered into VACORIS, so that the facility can create program sections and begin enrolling offenders.
4. EBP Programs - Mental Health Services (Offenders will be enrolled in Mental Health Programs as determined by the QMHP) (2-CO-4B-04)
 - a. Prior to submitting the [Initial EBP Program Description \(IPD\)](#) 841_F10, Qualified Mental Health Professionals (QMHPs) will consult with their immediate supervisor when developing or modifying a Mental Health Services program.
 - b. An EBP Mental Health Services program will address one or more mental health factors (emotional stability, symptom management, medication management, anxiety disorder, coping skills, self-care, impulse control, trauma resolution, mood disorder, personality disorder, family issues, thought disorder, sex offender specific issues, and/ or criminogenic factors).
 - c. QMHPs may contact the Mental Health Services Steering Committee (MHSSC) by sending an electronic message to the *MH Services Steering Committee* mailbox for consultation during the development, implementation, or modification of a program.
 - d. EBP Programs other than sex offender treatment programs which are co-facilitated by Counseling Staff and Mental Health Staff will follow the Counseling Services programs evaluation process.
 - i. The Senior QMHP at the facility will submit the [Initial EBP Program Description \(IPD\)](#) 841_F10 electronically to the appropriate Mental Health Clinical Supervisor (MHCS) for review.
 - ii. Following their review and approval, the MHCS will forward the *Initial EBP Program Description* electronically to the Mental Health Services Steering Committee (MHSSC) for review and approval.
 - iii. Following its review and approval, the MHSSC Chairperson will generate and sign a paper copy of the *Initial EBP Program Description* to be sent to the Senior QMHP.
 - iv. The Senior QMHP will be responsible for obtaining the signature of the Facility Unit Head and

forwarding the *Initial EBP Program Description* to the MHCS who will forward it to the Mental Health Director.

- v. Following their review and approval, the Mental Health Director will maintain the original *Initial EBP Program Description* and forward a copy of the approved *Initial EBP Program Description* to the Senior QMHP as authorization for the facility to begin delivery of the program.
 - vi. The Mental Health Director will be responsible for ensuring that a Directory of Mental Health Services Programs is maintained on VACORIS.
5. EBP Programs - Sex Offender Services
- a. Offenders must be referred to sex offender programming in accordance with Operating Procedure 735.2, *Sex Offender Treatment Services (Institutions)*.
 - b. Any offender currently incarcerated or re-incarcerated for violating probation or parole for a sexual offense must be referred for sex offender psycho-educational services such as the Sex Offender Awareness Program, (SOAP).
 - c. Offenders completing sex offender psycho-educational programming will be screened for participation in sex offender therapeutic programming by a QMHP in accordance with Operating Procedure 735.2, *Sex Offender Treatment Services (Institutions)*.
 - d. For Sex Offender programs, the Senior QMHP or Institutional Program Manager (IPM) will submit the [Initial EBP Program Description \(IPD\)](#) 841_F10 electronically to the Sex Offender Services Steering Committee for review and approval.
 - e. Following its review and approval, the Sex Offender Services Steering Committee Chairperson will generate and sign a paper copy of the *Initial EBP Program Description* to be sent to the Senior QMHP or IPM.
 - f. The QMHP or IPM will obtain the signatures of the Facility Unit Head before forwarding the *Initial EBP Program Description* to the Sex Offender Program Director (SOPD).
 - g. Following their review and approval, the SOPD will forward the *Initial EBP Program Description* to the Mental Health Director.
 - h. Following the review and approval of the Mental Health Director, the SOPD will maintain the original *Initial EBP Program Description* and forward a copy of the approved *Initial EBP Program Description* to the Senior QMHP or IPM as authorization for the facility to begin delivery of the program.
 - i. The SOPD will be responsible for ensuring that a Directory of Sex Offender Services Programs is maintained on VACORIS.
 - j. All offenders who meet the Sex Offender Residential Treatment (SORT) Program Referral Criteria (see Operating Procedure 735.2, *Sex Offender Treatment Services (Institutions)*) must be referred by their Counselor 18 to 36 months prior to release, using a [Sex Offender Residential Treatment \(SORT\) Program Referral](#) 735_F3

H. Skills Development Programs Development and Approval

1. The DOC differentiates between Skills Development Programs and EBP programs. Skills Development Programs aim to improve an offender's skill set, teach life skills, offer support groups or programming that has not been empirically proven to reduce recidivism but offers promise in improving offenders ability to behave in a pro social manner. The DOC monitors and tracks these courses and activities.
2. Prior to implementation, the facility must receive approval for each new Skills Development Program. The [Initial Skills Development Program Description](#) 841_F11 shall be submitted at least 90 days prior to proposed implementation of the program.
3. Skills Development Programs - Counseling Services
 - a. Prior to requesting approval for a Skills Development Program, the facility must meet the following

requirements.

- i. All new arrivals with a score of *Probable* or *Highly Probable* on the “Cognitive Behavioral” scale of COMPAS are enrolled in *Thinking for a Change* within 180 days of entering a DOC institution
 - ii. Offenders who score *Unlikely* on the “Cognitive Behavioral” scale of COMPAS will not be required to complete *Thinking for a Change* unless staff believes in their professional judgement that an override is needed.
 - iii. If the facility is meeting this mandate and the determination is made that there are resources available to offer Skills Development Programs the facility may request approval.
- b. For a new Skills Development Program, the [Initial Skills Development Program Description 841_F11](#) shall be submitted by the facility to the Statewide Program Manager.
- i. The Statewide Program Manager will review the *Initial Skills Development Program Description* to ensure that it meets the objectives outlined above. Programs that have a Model IPD are pre-approved and can be added to VACORIS with the signature of the Statewide Program Manager.
 - ii. After review of the *Initial Skills Development Program*, the Statewide Program Manager shall forward it to the Administrator of Case Management Services and Program Infrastructure (ACMSPI) for approval.
 - iii. After approval, the Statewide Program Manager will communicate to the facility that the program has been entered into VACORIS so that the facility can create program sections and begin enrolling offenders.
4. Skills Development Programs - Mental Health Services
- a. Prior to submittal of the [Initial Skills Development Program Description 841_F11](#), Qualified Mental Health Professionals (QMHPs) will consult with their immediate supervisor when developing or modifying a Mental Health Services program.
 - b. QMHPs may contact the Mental Health Services Steering Committee by sending an electronic message to the “*MH Services Steering Committee*” mailbox for consultation during the development, implementation, or modification of a program.
 - c. Programs facilitated by Qualified Mental Health Professionals (QMHPs), qualified volunteers, or qualified contractors that are offered to improve mental health stability and maximize baseline functioning will be approved and monitored as a Mental Health program.
 - d. Programs, other than sex offender programs, which are co-facilitated by Counseling Staff and Mental Health Staff will be approved and monitored as Counseling Services programs.
 - e. The Senior QMHP at the facility will submit the [Initial Skills Development Program Description 841_F11](#) electronically to the appropriate Mental Health Clinical Supervisor (MHCS) for review.
 - f. Following their review and approval, the MHCS will forward the *Initial Skills Development Program Description* electronically to the Mental Health Services Steering Committee (MHSSC) for review and approval.
 - g. Following its review and approval, the MHSSC Chairperson will generate and sign a paper copy of the [Initial Skills Development Program Description 841_F11](#) to be sent to the Senior QMHP.
 - h. The Senior QMHP will be responsible for obtaining the signature of the Facility Unit Head and forwarding the *Initial Skills Development Program Description* to the MHCS.
 - i. Following their review and approval, the MHCS will forward the *Initial Skills Development Program Description* to the Chief of Mental Health Services.
 - j. Upon approval, the CMHS maintains the original *Initial Skills Development Program Description* and forwards a copy to the Senior QMHP as authorization for the Institution to begin delivery of the program.
 - k. The CMHS will be responsible for ensuring that a Directory of Mental Health Services Programs is maintained on VACORIS.

5. Skills Development Programs - Sex Offender Services
 - a. The Senior QMHP or Institutional Program Manager (IPM) will submit the [Initial Skills Development Program Description](#) 841_F11 electronically to the Sex Offender Services Steering Committee for review and approval.
 - b. Following its review and approval, the Sex Offender Services Steering Committee Chairperson will generate and sign a paper copy of the *Initial Skills Development Program Description* to be sent to the Senior QMHP or IPM.
 - c. The QMHP or IPM will obtain the signatures of the Facility Unit Head before forwarding the *Initial Skills Development Program Description* to the Sex Offender Program Director (SOPD).
 - d. Following their review and approval, the SOPD will forward the *Initial Skills Development Program Description* to the Mental Health Director.
 - e. Following the review and approval of the Mental Health Director, the SOPD will maintain the original *Initial Skills Development Program Description* and forward a copy to the Senior QMHP or IPM as authorization for the facility to begin delivery of the program.
 - f. The SOPD will be responsible for ensuring that a Directory of Sex Offender Services Programs is maintained on VACORIS.
6. Division of Education (DOE) programs are exempted from formal approval for academic, career and technical education, and other educational programs but the Facility Unit Head, Principal, and DOE Regional Administrator should coordinate efforts to ensure that all programming is appropriate for the security level and mission of the facility.
7. Materials to be used in programs without statewide approved curriculum should be reviewed and approved by the IPM or equivalent designated by the Facility Unit Head.
 - a. The Facility Unit Head has authority to determine items approved to enter the facility.
 - i. Digital video discs (DVD's) may be used in educational, treatment, and religious programs. The Facility Unit Head has final authority to review and approve DVD's to be brought into and used in the facility.
 - ii. DVD's are to be reviewed in accordance with *Specific Criteria for Publication Disapproval* (see Operating Procedure 803.2, *Incoming Publications*); not with regards to theological or any other position, but for compatibility with the DOC mission to prepare the offender to become a productive citizen upon re-entry to society.
 - (a) DVD's to be used in institution treatment programs or non-religious activities i.e., NA, AA, or Vietnam Veterans Association will be reviewed by the Institutional Program Manager (IPM) or equivalent designated by Facility Unit Head.
 - (b) DVD's to be used in Educational programs or the library will first be reviewed by a Principal or designee.
 - (c) DVD's to be used in religious services will first be reviewed by the institutional Chaplain.
 - (d) Once the Chaplain or Principal has reviewed a DVD, it is to be taken to the IPM or equivalent designated by Facility Unit Head for approval or disapproval based on their review.
 - iii. Any DVD's which appear to contain gang-related material, symbols, gestures, or threats should be referred to the Institutional Investigator for review. If the investigator determines the DVD contains this type of material, the DVD shall be returned to the IPM for disapproval.
 - iv. If any DVD contains inappropriate or questionable material when reviewed, the DVD shall be disapproved by the Institutional Program Manager.
 - v. If the Principal, Institutional Investigator, or Chaplain disagrees with the IPM's decision for approval or disapproval, the Facility Unit Head or Assistant Unit Head will make the final decision.
 - b. Each institution should maintain a disapproved DVD list, similar to the *Disapproved Publication List* to document the review and the *Specific Criteria for Publication Disapproval*. The *List* should be maintained on the Facility LOP Page in the Virtual Library for viewing by other facilities to aid in consistent application of review criteria.

I. Counseling Services Program Guidelines

1. Intensive Re-entry Programs are offered at designated institutions.
 - a. Offenders should be screened at 36 months prior to release to ensure transfer requests are submitted 18 months prior to release so as to ensure 12 months of participation in the Intensive Re-entry Program for offenders who meet the security level requirement. High Security Intensive Re-entry Programs are operated at selected facilities for offenders who do not meet the security requirements of the lower security levels.
 - b. Intensive Re-entry Program Phase 1 - The Department of Corrections provides re-entry transition services to offenders at intensive re-entry sites throughout the state. The goal of the Intensive Re-entry Program is to prepare the offender for release by removing any potential barriers as well as working with the offender to emphasize all potential assets.
 - i. Offenders with appropriate security levels are transferred to correctional institutions closest to their home.
 - ii. They are enrolled in Phase 1 of the Intensive Re-entry program no later than one year prior to release and provided programming that may include the *Matrix Model Substance Abuse Program*, *Thinking for a Change*, and the *Book Program*.
 - c. Intensive Re-entry Program Phase 2 – Re-Entry Cognitive Community - An intensive institution-based treatment program for incarcerated offenders who are within six months of their release dates.
 - i. The Re-Entry Cognitive Community approach is similar to the Therapeutic Community Program in which each member of the community encourages and assists every other member in the completion of their programming needs.
 - ii. The Re-Entry Cognitive Community focuses mainly on cognitive restructuring and on meeting the special re-entry needs of each participant prior to their release.
2. *Thinking for a Change* - A core EBP program that is implemented at all facilities as a priority. All offenders with a score *Probable* or *Highly Probable* on the Cognitive Behavioral scale of COMPAS should complete this program. Priority shall be given to those within 180 days of arrival at their first permanent assignment.
 - a. Those with five years or less to serve with a score of *Probable* or *Highly Probable* on the Cognitive Behavioral scale of COMPAS shall be enrolled in *Thinking for a Change* if they have not already completed the program, and will participate in on-going bi-weekly peer support groups.
 - b. The remaining population with a *Probable* or *Highly Probable* or above on the cognitive Behavioral scale of COMPAS will be enrolled in *Thinking for a Change* as space is available.
 - c. The *TCU Criminal Thinking Scales* are to be used as the pre and posttest for *Thinking for a Change*. The pre and posttest responses shall be entered into the COMPAS other screening section of VACORIS within a week of the start date and again within a week after the end date.
 - d. The program curriculum shall be delivered as designed.
3. *Aggression Alternative Skills* - This is a cognitive based program using the social skills found in the supplemental material of *Thinking for a Change*. Offenders who score probable or highly probable on the Negative Social Cognition scale of COMPAS meet the eligibility requirements for this program.
4. *Matrix Model Substance Abuse Program* - A core program at all institutions that shall be offered to offenders who score *Probable* on the *Substance Abuse* scale of the COMPAS assessment.
 - a. Priority is given to offenders within two years of release who shall begin this program no less than 18 months prior to their release.
 - b. The program curriculum shall be delivered as designed.
5. *Substance Abuse Cognitive Therapeutic Communities (CTC)* - For offenders in institutions who have medium to high substance abuse treatment needs combined with medium to high cognitive behavioral treatment needs.
 - a. Offender Eligibility Criteria for assignment to a CTC can include the following:

- i. A rating of *Highly Probable* on the COMPAS *Reentry Substance Abuse* Scale combined with a rating of *Highly Probable* on the *Reentry Cognitive Behavioral Scale*
 - ii. A rating of *Probable* on the COMPAS *Reentry Substance Abuse* Scale plus a rating of *Highly Probable* on the COMPAS *Reentry Cognitive Behavioral Scale*
 - iii. Documented history of substance abuse at the discretion of Central Classification Services
 - iv. A Behavioral Correction Program (BCP) Court order
 - v. A Court order to CTC
 - b. Offenders shall enter these programs when within 16 to 26 months of release
 - c. Cognitive Therapeutic Communities are offered at select facilities and will enroll offenders at those facilities who meet the eligibility requirements.
 - d. All offenders referred to the Cognitive Therapeutic Community must receive a formal substance abuse assessment once received at the CTC site
 - i. The assessment must be a standard evidence-based substance abuse screening and assessment instrument approved for use by the Department of Corrections
 - ii. An ICA hearing must be held prior to offender admission into the CTC program, with documentation provided in VACORIS specifying that the offender meets the required criteria.
6. *Ready to Work* - This program is designed to help offenders improve employment and job seeking skills.
7. *Resources for Successful Living* - This program assists offenders with identifying and utilizing resources for successful re-entry.
8. *Security Level 1 Programming* – Offenders at Work Centers perform work activities in the facility and community.
 - a. Work Centers shall make available additional programming as staffing and resources allow.
 - b. *The Road to Success*, a Security Level 1 Re-entry program, will be offered at all Security Level 1 facilities for offenders within 4 months of release. (4-APPFS-2C-04)
9. Reception and Classification Centers Programming - The primary role of Reception and Classification Centers is to provide orientation, assessment, evaluation, and classification to facilitate the initial assignment of an offender to a permanent facility.
 - a. The Core COMPAS Lite, COMPAS Re-entry (All Scales), COMPAS Long-Term (for male offenders with 20 years left to serve) or WRNA assessment will be administered to all offenders completing the intake process at Reception Centers within 60 days from the offender's transfer date (as reflected on the transfer screen in VACORIS) into a reception center for intake from a jail or other non-DOC facility.
 - b. Reception and Classification Centers are not required to provide core programming, however, the needs of the offender cadre shall be considered.
 - i. Core programs shall be available to cadre, if those offenders have not been able to complete the programs at other facilities.
 - ii. Re-entry services shall be made available to cadre offenders.
10. At Cognitive Community sites where the number of Cognitive Community program offenders exceeds the capacity of the *Ready to Work* program, the OWDSs may assess offenders' preparedness levels for employment. The Cognitive Community Team will consider and may approve the OWDS's recommendation for *Ready to Work* exemption. The following factors will be reviewed when an exemption is being considered:
 - a. The Cognitive Community offender has:
 - i. Prepared a quality resume
 - ii. A history of demonstrated employment success in the community or institution
 - iii. Created an appropriate "Conviction Statement" and/or response to the job interview "Big Question" (Have you ever been convicted of a crime?)

- iv. Knowledge of community workforce development resources in the area to which they will be released (4-4431)
 - v. An understanding of the function and value of the Virginia Workforce Connection-Virtual One Stop (VWC-VOS) or a similar internet jobseeker tools
 - vi. Completed a DOC Career and Technical Education program that includes Employability Skills Training
 - vii. Scores *Unlikely* on the COMPAS “Re-entry and Employment Expectations” scale.
- b. The OWDS may also make recommendations to the Cognitive Community Team to exempt offenders who will not be entering the workforce post-release due to a disability or other source of income (e.g. retirement, Social Security, pension). The OWDS should consult with the medical department to learn if there is a high probability that the offender will receive Social Security Disability Income (SSDI) due to their inability to perform tasks required for employment.
 - c. Designated Cognitive Community staff will document in the *Facility Notes/Re-entry Plan* section of VACORIS each Cognitive Community participant who has been exempted from *Ready to Work* program participation, noting those factors that contributed to this decision.

J. Community Corrections Facilities

1. Community Corrections facility programs are designed to meet the specific goals of each facility.
2. Staff should consult with the Statewide Program Managers when developing or revising programs. The approval process for new programs follows that of Counseling Services.
3. Offenders at community facilities will successfully meet the expectations for each of the core program elements in order to be considered for successful completion of the program.
4. Due to dual sentencing, duplicate core program completion should be avoided whenever possible, by substituting secondary program elements when in the best treatment interests of the offender.
5. Secondary program elements may be included in the offender’s individual *Re-entry Case Plan*, based on individual needs of the offender. Failure to meet expectations for each of the assigned secondary program elements may result in the failure of the offender to successfully complete the program.
6. Programming for community facilities includes the following core program elements:
 - a. Transition/Life Skills
 - b. Cognitive Restructuring
 - c. Substance Abuse Education
 - d. Community Work Placement / Community Service
7. Programming for community facilities includes, but is not limited to the following secondary program elements:
 - a. Educational Development (GED) or Literacy
 - b. Substance Abuse Therapeutic Treatment
 - c. Anger Management
 - d. Eliminating Domestic Violence
 - e. Leisure Time Management
 - f. AA/NA

K. Annual Evaluation

1. Each EBP program offered in a facility shall be based on a need identified in the offender population. Programs shall be evaluated using evidence based practices as applicable to determine:
 - a. Was the need met?
 - b. Does the need still exist?
 - c. Can the program be improved?

- d. Did the program meet the success criteria listed in the *Initial EBP Program Description (IPD)*?
- e. Did the evaluation match the approved *IPD*'s evaluation plan?
2. The DOC supports and engages in research activities relevant to its programs, services, and operations. (4-4108, 2-CO-1F-10) Each facility is encouraged to cooperate with research efforts conducted by DOC or other entities approved by DOC to evaluate program fidelity and effectiveness.
3. Evaluation and Reporting - EBP Programs (4-4017)
 - a. The Facility Unit Head shall ensure EBP programs are regularly monitored administratively to maintain appropriate operation.
 - b. The IPM or equivalent staff shall monitor each program to ensure fidelity to the program model.
 - c. The IPM or equivalent staff shall continually monitor each program to ensure VACORIS accurately reflects program activity.
 - d. Using the [Annual EBP Program Evaluation](#) 841_F12, each facility shall conduct a written annual evaluation of each EBP program to determine their contribution to the facility's mission. (4-4107)
 - e. *Annual EBP Program Evaluations* shall be completed on each Counseling Services program. The annual evaluation report period will be from October 1 of the previous year to September 30 of the current year. The evaluation s should be submitted to the Statewide Program Manger no later than November 1st of each year.
 - f. [Annual EBP Program Evaluations](#) 841_F12 will be completed by the Senior QMHP for each Mental Health Services Program and will be submitted to the Mental Health Services Steering Committee by November 1st of each year.
 - g. The IPM or Psychology Associate Senior will review each applicable program in VACORIS and ensure enrollment status, and end dates are accurate in VACORIS.
 - h. Programs other than sex offender programs which are co-facilitated by Treatment Staff and Mental Health Staff will follow the Counseling Services program evaluation process.
 - i. [Annual EBP Program Evaluations](#) 841_F12 will be completed by the Senior QMHP or IPM for each Sex Offender Services Program and will be submitted to the Sex Offender Services Steering Committee by November 1st of each year.
 - j. The Facility Unit Head shall ensure that the responsible person for each program area (Counseling Services, Mental Health Services, and Sex Offender Services) transmits the *Annual EBP Program Evaluations* to the appropriate party which reviews all EBP Programs and Skills Development Programs at the facility.
4. Evaluation and Reporting - Skills Development Programs: (4-4017, 4-4107)
 - a. The Facility Unit Head shall ensure Skills Development Programs are regularly monitored administratively to maintain appropriate operation.
 - b. Using the [Annual Skills Development Program Evaluation](#) 841_F13, each facility shall conduct a written annual evaluation of each Skills Development Programs offered at the facility to determine their contribution to the facility's mission. (4-4107)
 - c. The IPM will review each program's information in VACORIS and ensure enrollment status, and end dates are accurate in VACORIS.
 - d. Programs other than sex offender programs which are co-facilitated by Treatment Staff and Mental Health Staff will follow the Counseling Services program evaluation process.
 - e. The Facility Unit Head shall ensure that by November 1st of each year, the responsible person for each program area (Counseling Services, Mental Health Services, and/or Sex Offender Services) transmits the [Annual Skills Development Program Evaluation](#) 841_F13 to the State Wide Program Manager, Counseling, or Sex Offender program director respectively.
5. Reporting Requirements - The completed annual evaluations will be handled as followed:
 - a. The Statewide Program Managers will produce a summary of Counseling Services and Community Corrections Facility programs and forward those reports to the Regional Administrators and the

ACMSPI.

- b. The Annual Program Evaluations shall be forwarded to the Director of Re-entry and Program Services by April 1 of each year.
 - c. The Mental Health Services Steering Committee will produce a summary of Mental Health Services programs and forward that report to the Chief of Mental Health Services by March 1 of each year.
 - d. The Sex Offender Services Steering Committee will produce a summary of Sex Offender Services programs and forward that report to the SOPD by March 1 of each year.
6. Each facility's programming will be evaluated through triennial audits conducted by the DOC Compliance and Accreditation Unit or American Correctional Association. (4-4017)

L. Program Discontinuation

1. When a facility plans to discontinue a Counseling Services EBP program, and/ or Skills Development Program, the Facility will indicate accordingly by checking the "NO" box (see should this program be continued) in the appropriate section of the [Annual EBP Program Evaluation](#) 841_F12 or [Annual Skills Development Program Evaluation](#) 841_F13
 - a. The form will be sent to the Statewide Program Manager and then to the Regional Administrator.
 - b. Once the form is received by the Statewide Program Manager, the program shall be removed from the facility listing and marked inactive in VACORIS.
 - c. The form is forwarded through the Statewide Program Manager to the Administrator of State Programs and Case Management Services.
2. When a facility plans to discontinue a Mental Health Services EBP program, and/ or Skills Development Program, the Facility will indicate accordingly by checking the "NO" box (see should this program be continued") in the appropriate section of the [Annual EBP Program Evaluation](#) 841_F12 or [Annual Skills Development Program Evaluation](#) 841_F13
 - a. The form will be forwarded to the Mental Health Services Steering Committee, the Mental Health Clinical Supervisor, and the Chief of Mental Health Services.
 - b. Once the form is received by the CMHS the program shall be removed from the facility listing and be marked inactive in VACORIS by the CMHS's' designee.
3. When a facility plans to discontinue a Sex Offender Services EBP program and/ or Skills Development Program, the Facility will indicate accordingly by checking the "NO" box (see should this program be continued) in the appropriate section of the [Annual EBP Program Evaluation](#) 841_F12 or [Annual Skills Development Program Evaluation](#) 841_F13
 - a. The form will be forwarded to the Sex Offender Services Steering Committee and the Sex Offender Program Director.
 - b. The Sex Offender Program Director or designee will remove the program from the facility listing and mark it inactive in VACORIS.

V. REFERENCES

Operating Procedure 425.1, *Outside Work Assignments*
Operating Procedure 735.1, *Sex Offender and Crimes against Minor Registration*
Operating Procedure 735.2, *Sex Offender Treatment Services (Institutions)*
Operating Procedure 803.2, *Incoming Publications*
Operating Procedure 810.1, *Offender Reception & Classification*
Operating Procedure 810.2, *Transferred Offender Receiving and Orientation*
Operating Procedure 820.2, *Re-entry Planning*
Operating Procedure 861.1, *Offender Discipline, Institutions*

VI. FORM CITATIONS

[Sex Offender Residential Treatment \(SORT\) Program Referral](#) 735_F3

[Initial EBP Program Description \(IPD\)](#) 841_F10

[Initial Skills Development Program Description](#) 841_F11

[Annual EBP Program Evaluation](#) 841_F12

[Annual Skills Development Program Evaluation](#) 841_F13

[Virginia Workforce Connection Virtual One Stop Permission](#) 841_F18

[Institution Fidelity Review Guidelines](#) 841_F19

[COMPAS Case Plan Fidelity Review - Institutions](#) 841_F23

VII. REVIEW DATE

The office of primary responsibility shall review this operating procedure annually and re-write it no later than three years from the effective date.

The office of primary responsibility reviewed this operating procedure in February 2018 and no changes are needed at this time.

The office of primary responsibility reviewed this operating procedure in February 2019 and necessary changes have been made.

Signature Copy on File 12/16/16

H. Scott Richeson,
Deputy Director of Programs, Education, and Re-entry

Date

Signature Copy on File 12/21/16

A. David Robinson, Chief of Corrections Operations

Date