



LN J EXECUTIVE 4002

THE JOURNAL OF NIC'S LARGE JAIL NETWORK

- ii **Foreword**
- 1 *You Can Do It:
Putting an End to Pharmacy Cost Increases*
- 6 *Accreditation for Adult Local Detention Facilities:
Moving from Process Measures to Outcome Measures*
- 11 *Got Training? Training as a Strategic Management Tool
for Performance Enhancement*
- 16 *The Sheriff's Office as a Community Resource in a
Hurricane*
- 19 *Inmate Access to Legal Resources & Materials—How
Do We Provide Inmates Access to the Courts?*
- 25 *Urban County Issues in New Jail Planning, Design,
and Transition*
- 33 *Harris County Sheriff's Office Teams with Community
College to Train Inmates*
- 37 *Mission Creep and the Role of the Jail in
Public Health Policy*
- 45 *Multnomah County Model Partnership for Custody and
Health*
- 49 *Strategic Planning: A 10-Step Approach*

Network Mission

The mission of NIC's Large Jail Network (LJN) is to promote the exchange of ideas and innovations among the administrators of the largest jails and jail systems in the U.S.—those having an average daily population of 1,000 inmates.

Network Goals

- To explore issues facing large jail systems from the perspective of those responsible for administering those systems;
- To discuss strategies and resources for dealing successfully with these issues;
- To discuss potential methods by which NIC can facilitate the development of programs or the transfer of existing technology; and
- To develop and enhance the lines of communication among the administrators of large jail systems.

National Institute of Corrections

Morris Thigpen
Director

Virginia Hutchinson
Chief, Jails Division

Richard Geather
Correctional Program Specialist

National Institute of Corrections
500 First Street, N.W.
Washington, D.C. 20001
(800) 995-6423

NIC Jails Division
1960 Industrial Circle
Longmont, Colorado 80501
(800) 995-6429

NIC Information Center
1860 Industrial Circle
Longmont, Colorado 80501
(800) 887-1461

<http://www.nicic.org>

LJN Exchange

Annual Issue 2004

In This Issue

The LJN Exchange is the journal of the Large Jail Network, a practitioner network sponsored by the National Institute of Corrections (NIC) for administrators in jails or jail systems with inmate populations of 1,000 or more. It is published annually, in June. The contents of the articles and the points of view expressed are those of the authors and do not necessarily reflect the official views or policies of the National Institute of Corrections.

To submit an article for publication or to learn more about the Large Jail Network, contact Richard Geather, Correctional Program Specialist, NIC Jails Division, 1960 Industrial Circle, Longmont, Colorado, 80501; (800) 995-6429, ext. 139; fax (303) 682-0469; e-mail rgeather@bop.gov.

The LJN Exchange is prepared by LIS, Inc., NIC Information Center contractor, in cooperation with the U.S. Department of Justice, National Institute of Corrections. For more information, contact Connie Clem, Senior Communications Specialist, NIC Information Center, 1860 Industrial Circle, Longmont, Colorado, 80501; (800) 877-1461; fax (303) 682-0558; e-mail ccllem@nicic.org.

This publication is available online at www.nicic.org/pubs/2004/019689.pdf

- ii Richard Geather, National Institute of Corrections Jails Division
Foreword
- 1 Mike Kalonick, Milwaukee County Sheriff's Office, Detention Bureau
You Can Do It: Putting an End to Pharmacy Cost Increases
- 6 Bob Verdeyen, American Correctional Association
Accreditation for Adult Local Detention Facilities: Moving from Process Measures to Outcome Measures
- 11 Tom Reid, National Institute of Corrections Academy, and Connie Clem, NIC Information Center
Got Training? Training as a Strategic Management Tool for Performance Enhancement
- 16 Michael L. Wade, Henrico County Sheriff's Office
The Sheriff's Office as a Community Resource in a Hurricane
- 19 Mark S. Cacho, Orange County Corrections Department
Inmate Access to Legal Resources & Materials—How Do We Provide Inmates Access to the Courts?
- 25 Barbara Krauth with Michael O'Toole and Ray Nelson
Urban County Issues in New Jail Planning, Design, and Transition
- 33 Jim Albers, Harris County Sheriff's Office
Harris County Sheriff's Office Teams with Community College to Train Inmates
- 37 Donald Leach, Lexington/Fayette Urban County Government
Mission Creep and the Role of the Jail in Public Health Policy
- 45 Timothy Moore, Multnomah County Sheriff's Office, and Gayle Burrow, Multnomah County Health Department
Multnomah County Model Partnership for Custody and Health
- 49 Barry L. Stanton, Prince George's County Department of Corrections, and B. Jasmine Moultrié-Fierro
Strategic Planning: A 10-Step Approach

Foreword

This issue of the LJN Exchange includes a variety of articles on topics that have been addressed at recent Network meetings or requested by Network members for NIC to address here in the journal. Emergency preparedness, jails and public health, jail standards, inmate programs, and staff development and training continue to draw a great deal of interest from the field.

Though the mission of the Large Jail Network continues to be to promote the exchange of ideas and innovation among the administrators of the largest jails and jails systems in the U.S., we recognize that the persons who make up our constituent group of sheriffs, jail administrators, directors of corrections, wardens, chief jailers, superintendents, and administrators by other titles has changed dramatically in recent years. Therefore, we continue:

- To actively seek participation of jail systems who have a great deal to offer but who have not been involved with the Network;
- To assist administrators who are new to their role and new to the Network;
- To seek new and creative ways to identify and meet the needs of the Network and its members; and
- To identify and increase opportunities to open the Network and our meetings to persons and broader issues that relate to the administration and operation of large jails.

NIC neither evaluates nor endorses the material presented in the LJN Exchange; our role is to provide the vehicle for a free and open exchange of ideas and information. It is my belief that the articles contributed by network agencies and others demonstrate a commitment to communicating the jail's role as an effective and major component of the local criminal justice system.

NIC appreciates the important contributions made by LJN members to the planning of the Bureau of Justice Statistics (BJS) 2004 Survey of Large Jails. Since July 2001, BJS has worked with NIC and LJN administrators to identify where additional data are needed to guide decision-making on jail policies and programs. As a result of this collaboration, BJS has developed this survey to gather information on critical issues related to jail operations and inmate management. The survey will supplement and enhance data that are only available every 5 years in other BJS data collection.

*Richard Geaither
Correctional Program Specialist
NIC Jails Division, Longmont, Colorado*

You Can Do It:

Putting an End to Pharmacy Cost Increases

Jt is possible to lower your jail's prescription drug cost! It's not easy, but it can be done. Any jail that doesn't have a comprehensive medical vendor and pays for drugs out of the county treasury can use the following approach to address drug cost issues. Milwaukee County, Wisconsin, used this approach to lower prescription drug costs by 50% over a period of 16 months.

The Milwaukee County Jail books approximately 55,000 inmates per year and, together with the Milwaukee County House of Correction (HOC), has an ADP of approximately 2,500 inmates.

Understanding the Problem

In order to tackle our drug cost problem, we first had to understand it. This was complicated by a total lack of data with regard to drug use. The only thing we knew for sure was how much we were spending.

So, we gathered the data we needed:

- We spent 3 months compiling data on drug utilization by category to understand the dynamics of the prescribing patterns used by our physicians.
- We looked intensely at our booking room process to determine how it contributed to the drug cost problem.
- We looked at differences in patterns of care between the jail and the HOC and from prescriber to prescriber.

by
Mike Kalonick,
Program
Administrator,
Milwaukee County
Sheriff's Office,
Detention
Services Bureau,
Milwaukee,
Wisconsin

What we found was not all that surprising:

- We found that the contract to provide drugs contributed significantly to the problem. Drugs were billed to the county at Title XIX (Medicaid) rates with a filling fee for each new and refilled prescription. The vendor provided the county no assistance in helping manage prescribing practices.
- We found that jail staff automatically carried forward all medication orders that could be verified during the health screen in the booking process. Once an inmate was on a particular medication, the medication was rarely changed to something less expensive.
- We found that psychotropic medications represented 70% of our total drug costs.
- We found that many inmates who did not enter the jail on psychotropics were started on them when they reached the HOC.

Creating a Climate for Change

Knowing what is wrong and knowing how to fix it are often not enough in a jail setting, because jails operate within the political environment of the communities in which they are located. There are often political ties between a provider of drugs or pharmacy services and the sheriff and/or members of the county board. Understanding these ties can be crucial to implementing a plan that will overcome political resistance to change.

In the case of Milwaukee County, the County Board viewed with increasing distaste the health services provided at the jail and HOC. The sheriff had to go to the board every year to ask for supplemental appropriations to fund deficits in inmate health care. In theory, both the sheriff and the board should have been in a mood to embrace any move that might reduce drug costs, but the pharmacy vendor also had significant ties to the board. Board resistance was overcome with intensive lobbying over a 3-month period to gain acceptance of a coherent plan to control pharmacy costs. The lobbying process focused on key board members who became our champions to get our program approved.

Making a Plan

Milwaukee County developed a three-pronged approach to reducing drug costs. It took 8 months to do the groundwork and prepare for implementation. The initial phase of the cost reduction program went into effect in January 2003.

- **Writing a pharmacy RFP.** We prepared a new RFP for pharmacy services. It contained specific language requiring vendors to propose a closed formulary and capitated pricing based on the formulary. Vendors who were unwilling to enter into this kind of agreement were on notice that their bids would be disqualified. Vendors were also prohibited from including fill fees for each prescription as part of their proposals.

- **Modifying agency practices.** We created policies, procedures, and protocols to address over-utilization of non-formulary drugs by physicians and nurse practitioners. The core of this program was a set of drug substitution protocols used in booking to switch inmates at intake from non-formulary to formulary drugs. (As of January 2003 these protocols addressed only non-psychotropic drugs.)

We also developed a two-tiered system of care, in which inmates identified as having serious health problems were provided care outside the sick call system. Additionally, we got out of the sleeping pill, benzodiazepine, and long-term narcotic therapy businesses.

- **Hiring new physicians as needed.** We hired new medical leadership. One of the chief criteria for selection of new physicians was their commitment to work within a managed care program that addressed inmate needs rather than inmate desires.

Overcoming Resistance

Not all obstacles to change are external to the jail. When it came time to implement the program, there were significant internal obstacles as well:

- Some members of the nursing staff recoiled at the prospect of change and tried to make union and state nurse practice issues out of the mandatory substitution protocols. Their objections were overcome with the assistance of the State Board of Nursing.
- Psychiatrists in our facilities were not employees of the sheriff, but of the County Behavioral Healthcare Division. They were adamant that a non-psychiatrist would not have any say in their prescribing practices. (Their stance was the primary reason that psychotropic drug costs were not part of the 2003 initiative.) Psychiatrists employed by the sheriff replaced these physicians in the 2004 budget.
- Inmates and inmate advocates were upset over switching inmates from non-formulary to formulary medication. To overcome their resistance, we placed notices in booking and on all medication carts to explain to inmates the change in policy regarding non-formulary medication. Inmate advocates were invited to identify specific cases in which inmates had been harmed by the change in policy. Fortunately, objections by inmates and their advocates dissipated by the fifth month after implementation.

Focusing on Psychotropics

Phase Two of implementation involved gaining control over psychiatric medication costs. It was impossible initially to implement cost controls over these medications because of opposition from the psychiatrists employed by the county mental health agency. These physicians had to be replaced so we could implement changes in mental health prescribing. The real work on mental health drugs started in November 2003, and implementation of this element of the program began in February 2004.

Our plan for controlling psychiatric medication costs also used a multi-faceted approach.

- We adopted the Texas Medication Algorithms as the official method of treating schizophrenia, serious depression, and bipolar disease. As part of the decision process, it was determined that, as a general rule, only inmates with these major disorders would be treated with psychiatric medication. Inmates with behavioral or adjustment disorders would receive treatment with drugs only under very restricted circumstances.
- We developed a list of preferred drugs to treat these major disorders. The list included two atypical (new generation) anti-psychotic drugs, two SSRI Class antidepressants (both generic), and two generic mood stabilizers. The anti-psychotic drugs were selected on the basis of a review of clinical effectiveness in the literature. One drug, Seroquel, was eliminated from consideration because it had become a drug of abuse in our system. Inmates who were prescribed Seroquel more than once a day were “cheeking” their medication and selling it to other inmates.
- We encouraged the manufacturers of the atypical anti-psychotic drugs to offer incentives to the jail as a way to increase their market share in the community. Both manufacturers responded very well to this encouragement.
- We hired a psychiatric nurse practitioner, who was assigned to the booking room to initiate the changes in approach to treating mental health issues.

The Results Are Still Coming In

In the period between December 2002 and April 2004, Milwaukee County’s overall drug expenditure dropped from nearly \$57/inmate/month to \$28/inmate/month. The 50% reduction in drug cost was achieved in spite of:


- A 30% increase in the number of HIV-positive inmates under treatment;
- Establishment of an on-site dialysis program in which the county is responsible for all drug costs;
- The closing of a mental health walk-in clinic in downtown Milwaukee, which has increased the number of severely and persistently mentally ill inmates in the jail by over 25%.

Summary and Recommendations

We believe that this program can be successfully implemented at any jail. Smaller jails might see cost reductions that are smaller than Milwaukee County's, but even a small reduction in cost is a big advantage over steady year-to-year increases.

Consider the following steps to implement this program in your locale:

- Understand all the components of your cost. This means looking at not only the details of your pharmacy service contract, but the contributions made by policies, procedures, and the prescribing practices of physicians, physician assistants, and nurse practitioners.
- Formulate a specific plan to address each of the cost components identified in the first step. Frame the plan to appeal to the agendas of the political constituencies that must approve it. Identify key players to be lobbied intensively, and ask them to be your advocate with their peers.
- Write an RFP that gives potential vendors very little latitude with regard to how they will price their proposals and deliver service once the contract is awarded. Make the vendor commit to assisting in the program to reduce drug costs through utilization studies, clinical pharmacy services, and complete monthly reports of utilization.
- During the RFP process, address the policy, procedure, and prescribing issues identified in the first step. Doctors are notoriously sensitive about taking instructions from laypersons, but an approach that makes the medical staff part of the effort is usually successful. As a last resort, replace physicians with ones who are more amenable to being part of a managed care delivery system. Involve the nursing staff in developing your new policies, procedures, and practices; creatively use their talents to bring the rest of the staff on board with the program.
- Remember that change is always difficult. Change is even more difficult in jails and prisons than in the mainstream healthcare community. Not every new initiative will work as intended right out of the box. This is not a reason to abandon initiatives but an opportunity to find innovative ways to address concerns. Don't be afraid of making changes to processes once they have been implemented, but understand that it takes at least 90 days for staff to become proficient in working differently. Gather staff feedback over time and after everyone has acclimated himself or herself to the new way of doing business, then meet and make necessary adjustments.

 Our Milwaukee County experience demonstrates that if you do not make inflated claims for cost savings and you exceed the goals set for the cost reduction program, even the most skeptical will embrace the program. In Milwaukee, the County Board members who formed the most significant opposition to making the changes in the pharmacy program became its biggest supporters. *GOOD LUCK!* ■

For more information:

Mike Kalonik
Program Administrator
Milwaukee County
Sheriff's Office
Detention Services
Bureau
949 N. 9th Street
Milwaukee, Wisconsin
53233
(414) 226-7165
MKalonik@milwcnty.com

Accreditation for Adult Local Detention Facilities:

Moving from Process Measures to Outcome Measures

by
Bob Verdeyen,
Director of
Standards and
Accreditation,
American
Correctional
Association,
Lanham, Maryland

Jf “the longest journey begins with a single step,” where and when does it end? I guess the answer depends on where you want to go.

In 1995, Bobbie Huskey, then President of the American Correctional Association (ACA), decided that it was time for ACA to begin the journey of moving the Standards and Accreditation program from process-based practices (measuring what you do) to outcome-based practices (measuring how well you do them). Her reasoning was based on the fact that administrators and managers were facing greater accountability—but diminishing resources. She noted that senior managers were frequently asked to perform tasks that they were incapable of performing or to develop programs they were unsure would be successful. They could not, in either case, defend their conclusions with facts. Using measurable outcomes seemed to be a reasonable solution.

At the time the decision was made, the task seemed relatively uncomplicated. In fact, we started out by attempting to explain to everyone that an outcome measurement might be as simple as counting the number of offenders enrolled in a given program. Well, it didn't take very long for that simple-minded explanation to come to a screeching halt—particularly when it was explained that the example was, in fact, a process measure, something that we were moving away from. Simply put, outcome measures describe the consequences of a program's activities, rather than describing the activities themselves. And, with that explanation, the task immediately took on a whole new perspective and, I might add, offered challenges that I would never have imagined.

Our first task was to identify individuals and organizations to collaborate with us in examining current standards to determine whether they reflected what contemporary detention standards should be. This task took on great importance because ACA had been criticized in the past for apparently replicating prison

standards in the field of adult detention—despite the fact that detention practitioners had in fact played a key role in shaping those earlier detention standards. To ensure that this did not become an issue again, ACA reached out to the National Sheriffs’ Association and the American Jail Association and asked for the names of individuals who could serve as members of an ad hoc committee that would assist us in transitioning from process measures to outcome measures. Both organizations responded with the names of a number of individuals, all of whom were obviously committed to accreditation and willing to devote many hours of their own time to a project that would ultimately and significantly alter the way the profession is evaluated.

Our next task was to conduct a comprehensive review of the existing standards (a term that in the fourth edition has been replaced by “expected practices”) to determine exactly what practices should be defined as the “best” for the profession, both in the context of what the courts have determined to be constitutional and in terms of what practitioners “know” to be the right thing to do. Again, not a very easy task, as each committee member had a slightly different perspective about the importance of a number of expected practices, particularly as the practice was operationalized within the framework of his own individual working environment. However, the one thing that came through loud and clear during this exercise was the need to address some critical issues, including when, and under what circumstances, strip searches should be conducted during the intake process and how to address recent legislative initiatives such as the Prison Rape Elimination Act. Once the committee had determined which best practices should be included in the revised performance-based standards, the focus shifted to developing outcome measures.

We have defined outcome measures as quantifiable (measurable) events, occurrences, conditions, behaviors, or attitudes. Outcome measures are distinct from the activities of a program. For example, counting the number of vaccinations given to detainees is not an outcome measure, but measuring the incidence of disease in the jail population is. Giving vaccinations is an activity (practice) that we believe will improve a detainee’s health (performance standard) that can be measured by the incidence of disease (outcome measure).

Having reached a consensus on what was important, the committee developed a template that must be followed in all future manuals of standard revisions. For the sake of clarity, the following table with descriptions of old and new terms will be included in each manual revision:

NEW Performance-Based Element	Previous Standards Element	Previous Accreditation Element
Standard	None (new element)	None (new element)
Outcome Measure	None (new element)	None (new element)
Expected Practice	Standard	Standard
Comment	Comment	Comment
Protocol	None	Primary documentation
Process Indicator	None	Secondary documentation

As the table suggests, the biggest change in terminology is that what we used to call “standards” have all been termed “expected practices.” The reason for this change reveals the fundamental difference between prior standards and ACA’s new performance-based standards.

ACA’s performance-based standards have several elements, defined below.

- Performance Standards;
- Outcome Measures for each performance standard;
- Expected Practices for each standard;
- Protocols; and
- Process Indicators.

ELEMENT	DEFINITION
Performance Standard	<p>A statement that clearly defines a required or essential condition to be achieved and maintained.</p> <p>A performance standard describes a “state of being,” a condition, and does not describe the activities or practices that might be necessary to achieve compliance. Performance standards reflect the program’s overall mission and purpose.</p>
Outcome Measures	<p>Measurable events, occurrences, conditions, behaviors or attitudes that demonstrate the extent to which the condition described in the performance standard has been achieved.</p> <p>Outcome measures describe the consequences of the program’s activities, rather than describing the activities themselves.</p> <p>Outcome measures can be compared over time to indicate changes in the conditions that are sought. Outcome measure data are collected continuously but are usually analyzed periodically.</p>
Expected Practice(s)	<p>Actions and activities that, if implemented properly (according to protocols), will produce the desired outcome. What we think is necessary to achieve and maintain compliance with the standard—but is not necessarily the only way to do so. Activities that represent the current experience of the field, but that are not necessarily supported by research. As the field learns and evolves, so will practices.</p>
Protocol(s)	<p>Written instructions that guide implementation of expected practices, such as: policies and procedures, post orders, training curriculums, formats to be used such as logs and forms, offender handbooks, diagrams such as fire exit plans, and internal inspection forms.</p>
Process Indicators	<p>Documentation and other evidence that can be examined periodically and continuously to determine that practices are being implemented properly. These “tracks” or “footprints” allow supervisory and management staff to monitor ongoing operations</p>

Some time ago, an administrator of a detention facility was being briefed about the standards and accreditation process, and he was asked whether he had ever considered being part of that process. He responded by asking, "Doesn't that require us to have a bunch of policies and procedures?" When it was acknowledged that it would, he stated, "Well, if I did that, I could be held accountable if we didn't follow the policies." As I pondered his logic, I tried to imagine how any confinement facility could manage offenders and protect staff in a secure environment, relying only on memoranda and, perhaps, word of mouth for guidance and direction. Whether he actually believed that he was better off without policies is not the point, for I believe that we can all agree that having policies, but not adhering to them, is almost as bad as not having any.

Today's administrator must be keenly aware of and able to respond to the demands of a great number of stakeholders. There are the policy makers who insist that "more with less" should be the order of the day, the funding bodies that match outcomes to current and future levels of funding, and the taxpayers who often have a somewhat different perspective on how the profession should incarcerate and manage offenders.

Since 1979, when the first facility earned the recognition of being accredited, the process has emerged as one of the most important improvements in corrections during the 20th century. I suspect that performance-based standards and outcomes may be looked upon as a watershed event for corrections in the 21st century.

The benefits of accreditation are numerous. The process provides the opportunity to assess a facility's strengths and weaknesses, identify obtainable goals, implement state-of-the-art policies and procedures, establish specific guidelines for day-to-day operations, aid in the defense of lawsuits, increase community support, and develop a higher level of staff professionalism and morale. One administrator who participates in the process states that "accreditation is a correctional administrator's most valuable tool for team building." Another believes that the process ". . . helps us all strive for quality at many levels."

In ACA's soon-to-be published *Standards for Adult Local Detention Facilities*, 4th edition, there are 82 expected practices attributed to the Security section. They address issues such as correctional officer/deputy assignments; establishment of shift reports; frequency of patrols and inspections; control of offender movement; use of restraints; control of contraband, tools, keys and equipment; and the use of firearms, chemical agents, and related security devices. Of course, most facilities have already adopted policies and procedures that generally follow the prescribed standards. It is operationalizing the policies, procedures, and practice in the day-to-day management of a program that makes the difference. Evaluating outcome measures on at least a monthly basis gives administrators the opportunity to gauge how effective (or, ineffective, as the facts may suggest) a program or procedure is and provides an opportunity to initiate an appropriate corrective action.

As former ACA President Bobbie Huskey wrote in "Measuring Performance: ACA's New Paradigm in the Making" (*Corrections Today*, August 1996),

Performance-based standards require a fundamental shift in thinking from just counting activities to also measuring outcomes. As one might guess, moving in a new direction isn't easy. Change always is difficult. Nevertheless, it often is said that, "In the end, the only people who fail are those who do not try."

For too long, we've been defined by the courts and by legislators. Until we step up to the challenge of clearly defining what correctional programs are supposed to accomplish and then go about measuring results against outcomes, those outside our profession will hold us to performance measures we feel are unrealistic.

Will the development and implementation of these performance-based standards and outcomes mean the end of our journey? Absolutely not. For even as you read this article, ACA has put in place a group of practitioners who will be examining ways to reach out to administrators of detention facilities that may not have the staff resources or physical plant to meet all the requirements for accreditation, but who are nevertheless eager to engage in a process that will recognize them for their efforts, albeit on another scale. With that in mind, we hope to convey the idea that the bar of excellence in corrections does not necessarily have to be the same height for everyone. ■

Note:

ACA is indebted to the following individuals for their unwavering support and commitment to the Performance-Based Standards project:

- Sandra Bedea-Mueller, Ocean County Department of Corrections, New Jersey.
- Mark Fitzgibbons, Director, Beaufort County Corrections, South Carolina.
- Jerry Frey, Captain, Hampden County Sheriff's Department, Massachusetts.
- Steve Ingley, Executive Director, American Jail Association.
- Tom Faust, Executive Director, National Sheriffs' Association.
- David Parrish, Colonel, Hillsborough County Sheriff's Department, Florida.
- Owen Quarnberg, Utah Sheriffs' Association.
- Blake Taylor, South Carolina Department of Corrections.
- Hal Wilbur (ret.), Broward County Department of Corrections, Florida.

Special recognition is extended to:

- Rod Miller, President, CRS, Pennsylvania, who kept everyone on task and pulled the project together.

For more information:

Robert Verdeyen
Director of Standards
and Accreditation
American Correctional
Association
4380 Forbes Blvd.
Lanham, Maryland
20706
(301) 918-1845
bobv@aca.org

Got Training?

Training as a Strategic Management Tool for Performance Enhancement

Connie Clem interviewed Dr. Tom Reid, NIC Correctional Program Specialist, on training as a tool for strategic management. Tom is on the staff of the NIC Academy and a former Director of the Minnesota Jail Resource Center in St. Paul, Minnesota. Connie is the Senior Communications Specialist at the NIC Information Center and managing editor for the LJN-E. Tom will be briefly talking with the Large Jail Network on this topic at its July meeting in Longmont, Colorado, to discuss his ideas and hear the perspectives of LJN members.

(Connie Clem): What problem most concerns you with jail and corrections training today?

(Tom Reid): My sense is that training is not being used as effectively as it could be. Agencies devote substantial resources to training but may not be getting true benefit from it. Training departments are very good at technically meeting requirements and delivering hours, but they often are less effective at addressing operational issues. Training, by its very nature, is a problem-solving device. It's simply not being used that way.

The same curriculum and same topics keep being delivered year after year for line staff in-service training. This happens for a variety of reasons. Often, it's just a chase for the hours; the success of training is measured by the volume of hours it yields. As a result, staff don't look forward to training, and sometimes they attend training that's not directly relevant to their jobs.

So, what does that boil down to?

Often the administration views training as an "hours machine" that's separate from the operation of the jail. Training has become isolated and disconnected. People go to training and then resume their old behaviors back on the job. But

**Interview with
Tom Reid,
NIC Academy,
by Connie Clem,
NIC Information
Center,
Longmont,
Colorado**

training should be part of the daily operation and management of the facility. We need to bring training back into the fold.

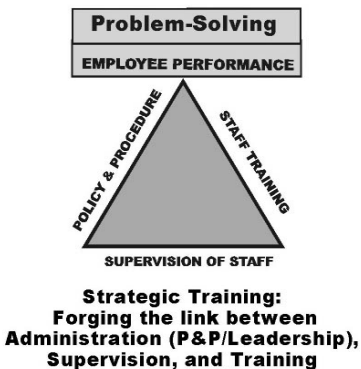
Why should CEOs be concerned?

True performance enhancement requires a partnership between administrative leaders, the chain of command supervisors, and training staff. You know there is a disconnect any time you hear: “Forget what you learned in training; this is how we do it here . . .” Not only does that show the disconnect, but it raises the specter of a liability risk.

We want to change the typical CEO viewpoint to one of recognizing and using training as part of their management strategy for the organization. To help with this, we’ve coined a new slogan: “Training as a strategic management tool.”

CEOs need to be able to tell whether their training department is contributing to true performance management and enhancement or is just getting bogged down in meeting requirements. They need some ideas for assessing their agency’s situation.

I’ve been thinking about making bumper stickers to hand out at AJA: “Strategic Training: Forging the Link Between Administration, Supervision, and Training.” That would be a good reminder.



Is this a pervasive problem, or just an issue in a few agencies?

The message I hear is consistent. Folks coming through my training mostly report they have to deliver so many “mandatory” or refresher training topics each year that they never get to the prescriptive or problem-based training. Meanwhile, the CEOs tell us they can’t see much return on their investment. Well, logically, if the training department can provide only the mandatory or refresher topics, and they do that every year, they may find it difficult to report any true investment return to the boss.

You have to question why training is being done: for outside entities or to truly enhance the organization?

How do training standards relate to all this?

It’s a complex issue. Everybody has external sources that place training requirements on the agency. Requirements come from state jail standards, ACA accreditation, regulatory agencies, POST boards, etc. When your agency is primarily doing training for external rather than internal purposes, the goal of the training is to satisfy someone else’s need.

CEOs need to ask: are we training staff for our own purposes, to meet our own needs, or are we training primarily to meet outside mandates? Of course, training standards reflect some important principles. But when we allow them to dominate—for example, in terms of time, resources, and topics—we lose the true usefulness of our training. We let the standards define what we train in too narrow a way.

I talked about this with the state DOC training directors recently at a network meeting NIC hosted. There was a lot of interest in shaking loose from the training machine that focuses on the same topics, grinds out hours, and in reality turns off when the staff have reached their hourly requirement. The group is actually recommending changes to ACA's training standards this summer to help foster this change, and it will be interesting to see how that goes.

What about needs assessment? Is every facility problem a training problem?

We tend to saddle ourselves with inappropriate training topics. For example, when a significant incident occurs in the jail, there may be a push to “re-train everybody in X” before first looking to see whether the incident was actually due to factors like lack of supervision or unclear policy and procedure instead. If staff know what to do, and know how to do it, it is doubtful that re-training them on what they already know will prevent future incidents. It might, however, make them reluctant to attend training!

As far as training needs assessments, many agencies' assessments are flawed. Too often, trainers send out a list of topics and ask the staff which they need or want for next year. This is like a medical doctor asking you what pills you want before assessing your symptoms. The needs assessment should ask what the problems are. Then, the training department, along with the management team, can determine if training can play a role.

Training can't fix every problem. Training can only provide knowledge and/or skills. If a problem is at least partially due to a true lack of knowledge and skills on the part of staff, training can contribute to the solution. Listen to the symptoms, identify the core problem, and determine whether training can play a role. That's the only way to figure out how to attack the disease.

What kind of process can help agencies address their real training needs?

I don't think any large jail CEO out there is lacking in operational problems. These are routinely surfaced and discussed. To try out the concept of training as a strategic management tool, select one or two issues as a pilot and apply the “training as problem-solving” model with your training department.

Start thinking of training as a management intervention to address a problem. The first step is to analyze the problem and write a comprehensive problem statement for it. You probably will find several different causes for the problem, generally revolving around policy and procedure, staff supervision, and training. Next, form a problem-solving team with people from each of those functions, and have them develop a solution plan.

The plan should be comprehensive—remember, training can only address a lack of knowledge and/or skill. In the real world, the problems are complex and interwoven. It probably won't fix anything if you just do training without combining it with other strategies. The solution has to be a joint effort with leadership, policy, and supervision interventions as well. And, of course, you need to track and measure your impact on the original problem.

Are the issues the same for both new and experienced staff?

New staff present a different problem than existing staff. They report to work with life skills but really don't know the specifics of our business. They need training in the knowledge and skills for successfully performing the core tasks of the job.

The problem analysis for new staff is to study the job and identify the core tasks they need to accomplish: this is job task analysis. The solution becomes a realistic, basic training curriculum that includes classroom content—the “what” and “why” of the job—with a hands-on FTO program: the “how” of the job.

We've often seen a heavy emphasis on classroom or academy training for new employees. That strategy needs to be balanced with an effective FTO program, particularly given the tendency in law enforcement and corrections to hire “hands-on” learners. A formal FTO program really teaches new staff the specific behaviors needed for a post. It's the same thing as ground school and flight school—it gets your new employees ready to fly.

On the other hand, an in-service curriculum for existing staff doesn't come from job analysis. Veteran staff become rusty, take short cuts, or perhaps have developed their own, unique ways of doing things. As a result, operational issues arise. You might see a pattern in your incident reports, or low sanitation scores, or too much contraband getting in. Maybe the staff need better skills or to get more reinforcement of certain skills.

Good in-service training topics for veteran employees are problem-based and come from a written problem statement. Real-world problems have interlinked causes, so in-service training needs to be linked with other kinds of interventions. Your problem-solving team can enhance policy or supervision, too, so your solution represents more than just training. Remember the theme of strategic training: forging the link between administration, supervision, and training.

Not only should in-service training be problem-based, but it should also be more individualized. Staff don't all develop the same bad habits, preferences, or shortcuts. Ideally, a supervisor, in collaboration with training staff, should write an individualized training prescription for each subordinate each year as part of the annual performance appraisal. The agency itself gets “well” as individuals fill their training prescriptions! Then, you can watch your indicators getting better over time.

What can jail administrators do to look at how this is playing out in their facilities?

I would recommend that CEOs first look at the training function and ask a few leading questions:

- Does the goal and measurement of training appear to be hours?
- Are the same in-service topics being delivered for 40 hours every year?
- Are staff required to attend training, even if it's documented that they already possess the knowledge and skills being covered?
- Do staff attend training not directly related to their job function?
- Do mandatory or refresher topics dominate the in-service training plan?

- Do your needs assessments ask staff to choose from a list of training topics?
- Is training defined as only classroom delivery?
- For new employees, is there a balance between classroom/academy and FTO delivery?
- Do supervisors know and support the training objectives with their subordinates?
- Does your agency measure the impact of training on the organization?

Then, perform a more formal programmatic audit based on the answers. Are you getting what you're paying for from the training department? Are there barriers to using training as a strategic management tool?

What should a jail CEO do if he or she thinks training isn't meeting the strategic needs of the agency?

NIC has a program, "Training for Agency Training Coordinators/Directors," that can help jails take back control of their training. We're trying to shift the paradigm of training away from the "hours/mandated topics" paralysis to the "training as a strategic management tool" concept with that curriculum.

However, simply training the training staff won't effect the change. We need to reach upper level management with this message and educate the management team. Ideally, the agency's top people should always be part of the process. At some point, the CEO simply needs to say, "We can't do business this way any longer." The change in training impact will flow from that, and the training staff will appreciate your leadership.

Do you have any "assignments" or suggestions for LJNI members before the July meeting?

No, not at all. Come with an open mind about what is possible in training, and let's start challenging ourselves to use it effectively as a strategic management tool. We can all learn together. ■

For more information:

**Tom Reid
Correctional Program
Specialist
NIC Academy Division
1960 Industrial Circle
Longmont, Colorado
80501
(800) 995-6429, ext. 134
treid@bop.gov**

The Sheriff's Office as a Community Resource in a Hurricane

by
**Sheriff
Michael L. Wade,
Henrico County
Sheriff's
Office,
Virginia**

Warning gave way to reality when Hurricane Isabel pounded the metro Richmond, Virginia, area on September 18, 2003. Advance preparations enabled the Henrico County Sheriff's Office to serve as an important resource center for the entire community during the hurricane in addition to maintaining its primary role of operating the jail while under difficult conditions.

Pre-Storm Planning

In response to warnings, meetings were held several days in advance of the time Hurricane Isabel actually hit the community. The Sheriff and Chief Deputy attended Emergency Operations Center planning meetings and conducted several command staff meetings in preparation for the hurricane. The staff meetings focused on the following major issues:

- **Jail staffing levels.** Maintaining staffing levels at Jail East and Jail West was a paramount concern. I directed relief shifts to report in before the hurricane winds reached 40 miles per hour. Staff on off-going shifts were also asked to remain on location until adequate coverage was assured.
- **Medical and food staff schedules.** Schedules of contract employees (medical and food service staff) were modified in advance to ensure coverage during and after the storm event.
- **Work release inmates.** I arranged to furlough work release inmates from the evening of September 17 until the evening of September 19. (This was later extended to September 21.) Furloughing the work release inmates freed up the work release dayrooms to lodge the shift personnel being held over in the jail.

- **Meals.** Arrangements were made with the ARAMARK Corporation to provide meals to the Emergency Operations Center, the Sheriff's Office Emergency Shelter, and to jail staff.
- **Beds for shelters.** Advance arrangements were made for beds to be delivered from the Jail East warehouse facility to the Emergency Operations Center, the Sheriff's Office Shelter, and the Public Works Woodman Facility.
- **Emergency shelter staffing.** Staffing assignments and schedules were developed to provide security at the seven emergency shelters.
- **Fuel for emergency generators.** Staff were directed to top off fuel tanks for emergency generators. Deputies also charged batteries and flashlights in preparation for power outages.
- **Delivery schedules for essential supplies.** The delivery schedules for prescriptions, medical supplies, and food were advanced to ensure that adequate supplies were on site prior to the storm event and for an extended period after the event. The medical section ordered extra pharmaceuticals and arranged for dialysis patients to receive care before and after the projected storm. Days in advance of the hurricane, bedding and the kitchen were fully stocked.

During the Hurricane

Responsible for the security of six emergency shelters in the county, the Sheriff's Office also opened the doors of both the Jail West and Regional Jail East facilities. Fortunately, only 40 citizens sought shelter the first night. However, as electricity and water were out in a major portion of the county, approximately 400 more people arrived over the following days for meals, showers, and clean water.

Just before the storm hit on Wednesday, September 17, we released 72 work release inmates, telling them to return on Saturday. All 72 returned on time and were tested for drugs. The three who failed were held in jail; the remaining 69 were sent home and told to return on Monday, which they all did. The vacancy of the work release center freed space to house the family members of county employees and jail staff. Two shifts were kept in the jail for 36 hours, and a number of employees brought their families to seek shelter in the jail.

During the storm, all the emergency shelters in the community lost power and were required to go on generator power for several days. At Jail West, generator power was eventually turned on in the early afternoon of the 18th, and then Henrico County and surrounding localities suffered a major blow—the loss of water. We immediately ordered 3,500 water bottles and 20 portable toilets. Deputies took inmates to the restroom on a rotating schedule, depending on the number of inmates at the time. The situation was difficult because it was important to provide a clean restroom for our inmates but also to keep the jail secure.

The inmates did not complain. Prior to the storm, inmates had been notified of how the hurricane would affect them. Deputies informed them that phones could be knocked out, the facility could go on generator power, and that visitation would be cancelled. The inmates' good behavior throughout the storm was noted in the Richmond newspaper. In addition, on the morning of September 20, a Jail East inmate work crew cleared trees on local highways to provide access to the Jail East facility from Interstate 64.

Once water pressure was restored, the Sheriff's Office faced a new challenge—ensuring that the water was clean. Richmond City, which provides water service for the metro area, warned citizens of contaminated water and advised them to boil water for at least 3 minutes before using it. This meant that the jail's cafeteria staff now had to boil water for cooking and cleaning. However, inmates who were allowed in the kitchen lent a hand. The staff served all meals on styrofoam trays with plastic utensils, a total of 2,400 meals at the Emergency Operations Center and emergency shelters.

Counting the Costs

The total cost to the Sheriff's Office from Hurricane Isabel grew to over \$92,000. Staff overtime costs alone were \$67,000.

Henrico deputies logged in over 2,500 hours of overtime, not only in securing the jail but also in manning each emergency shelter and operating the Command Central and Emergency Operations Center (EOC) at the Henrico County Training Center. Deputies distributed beds to the EOC, the employee shelter, the Henrico Department of Public Utilities, and two of the emergency shelters. Jail West also continued to accept new inmates, despite the horrific storm.

Fortunately, there were no major damages to facilities. Only minor leaks and damage to a deputy's car were reported. In the aftermath, inmates began cleaning up the county's Belmont Recreation Facilities and also helped distribute bottled water and ice for storage.

Henrico County discovered the jail as a community resource as a result of Hurricane Isabel. The hurricane made clear the kinds of resources the jail could provide—from our loading docks used to truck many loads of water, to inmate crews that reloaded the water into smaller trucks, to our equipment used for cleaning up debris.

In the end, the entire situation was handled with relative ease. Preparation was the key. We were ready to accept whatever Isabel threw at us. ■

For more information:

Sheriff Michael Wade
Henrico County
Sheriff's Office
P.O. Box 27032
Richmond, Virginia
23272-7032
(804) 501-4571
sheriff@co.henrico.va.us

Inmate Access to Legal Resources & Materials —

How Do We Provide Inmates Access to the Courts?

The question posed in this article's title has challenged correctional administrators for decades. Just when most thought they had it right, the U.S. Supreme Court in 1996 handed down their landmark decision in *Lewis v. Casey*. In that decision, the justices reviewed the "meaningful access to the courts" requirement established in their prior decision in *Bounds v. Smith*. During that same period, Congress passed the Prison Litigation Reform Act. This act places strict regulations on inmate litigation, the most notable being that a prisoner must exhaust all available administrative remedies before filing suit. These two actions together have altered the way law library programs are implemented and maintained today.

We must recognize that there is no one perfect law library access program. Unfortunately, *Lewis* did not provide detailed guidelines for one. However, *Lewis* did define what rights must be provided, and, for corrections professionals who were awaiting change, *Lewis* did not disappoint. The justices clarified that there is no constitutional right to a law library, only a "right of access to the courts." Almost immediately, many administrators across the country took this decision as a green light to eliminate their law libraries altogether.

Such an extreme action should not be taken lightly:

- A recent nationwide survey among large jails showed that 41% have had litigation regarding law library services.
- Even more eye-opening is the fact that 32% of the agencies reporting were under court orders on the issue.

by
Mark S. Cacho,
Law Library
Operations
Officer,
Orange County
Corrections
Department,
Orlando, Florida

History of *Lewis v. Casey*

The right of access to the courts for inmates was established in 1977 in *Bounds v. Smith*:

[T]he fundamental constitutional right of access to the courts requires prison authorities to assist inmates in the preparation and filing of meaningful legal papers by providing prisoners with adequate law libraries or adequate assistance from persons trained in the law.

Lewis v. Casey was originally a class action lawsuit brought by Arizona state prisoners. Following a 3-month bench trial, the district court held that the plaintiffs had been denied access to the courts and ordered system-wide changes. The court identified a number of systemic deficiencies related to the law libraries system and found specific prison practices deficient in regard to illiterate prisoners and prisoners in “lockdown.”

In 1996 the U.S. Supreme Court reversed the lower court’s judgment and held that the “success of [the plaintiffs’] systemic challenge” to the adequacy of the Arizona prison law libraries “was dependent on their ability to show widespread actual injury, and that the court’s failure to identify anything more than isolated instances of actual injury renders its findings of a systematic *Bounds* violation invalid.” The Court reasoned that “*Bounds* did not create an abstract, freestanding right to a law library or legal assistance,” and therefore, “an inmate cannot establish relevant actual injury simply by establishing that a prison’s law library or legal assistance program is subpar in some theoretical sense.” Rather, “the inmate must...go one step further and demonstrate that the alleged shortcomings in the library or legal assistance program hindered his efforts to pursue a legal claim.”

Establishing a *Bounds* injury requirement is no easy task for inmates. The *Lewis* court explained, “[T]he *Bounds* injury requirement for an inmate’s claim of denial of access to the courts is not satisfied by just any type of frustrated legal claim; *Bounds* does not guarantee inmates the wherewithal to transform themselves into litigating engines capable of filing everything from shareholder derivative actions to slip-and-fall claims; rather, the tools it requires to be provided are those that inmates need in order to attack their sentences, directly or collaterally, and in order to challenge conditions of confinement. Impairment of any other litigating capacity is simply one of the incidental (and perfectly constitutional) consequences of conviction and incarceration.”

As might be expected, the core holding of *Lewis*, and particularly the actual injury requirement, now present a significant impediment to an inmate’s effort to prove deprivation of the right of access to the courts. Does this mean we can totally eliminate inmates’ access to legal resources and materials? Of course that answer is no, but we can and should continue to improve the legal access services we already provide.

ACA Legal Access Standards

The American Correctional Association (ACA) has dealt with this sensitive issue for many years and has adopted the following legal access standards for agencies seeking accreditation:

Access to Courts: 3-ALDF-3E-01 / *Written policy, procedure, and practice ensure the right of the inmate to have access to courts.*

Comments: The right of access to the courts minimally provides that inmates have the right to present any issue, including the following: challenging the legality of the conviction or confinement; seeking redress for illegal conditions or treatment while under correctional control; pursuing remedies in connection with civil legal problems; and asserting against correctional or other government authority any other rights protected by constitutional or statutory provisions or common law. Inmates seeking relief are not subjected to reprisals or penalties because of the decision to seek such relief.

Access to Counsel: 3-ALDF-3E-02 / *Written policy, procedure, and practice ensure and facilitate inmate access to counsel and assist in making confidential contact with attorneys and their authorized representatives; such contact includes, but is not limited to, telephone communications, uncensored correspondence, and visits.*

Comments: Facility authorities should assist inmates in making confidential contact with attorneys and their authorized representatives; these representatives may include law students, special investigators, lay counsel, or other persons who have a legitimate connection with the legal issue being pursued. Provision should be made for visits during normal facility hours, uncensored correspondence, telephone communications, and after-hours visits requested because of special circumstances.

Access to Law Library: 3-ALDF-3E-03 / *Written policy, procedure, and practice provide that inmates have access to legal materials if there is not adequate free legal assistance to help them with criminal, civil, and administrative legal matters.*

Inmates have access to paper, typewriters or typing service, and other supplies and services related to legal matters.

American Association of Law Libraries

The American Association of Law Libraries (AALL) has been in existence since 1906, but, surprisingly, many in the corrections community have never heard of it. The organization has been committed to serving inmates and prison law libraries since the early 1970s. To fulfill this mission, it has undertaken a variety of projects, including publications, consultation activities, and official representation for related organizations.

The AALL publication, *Recommended Collections for Prison and Jail Law Libraries*, has frequently been cited in litigation focusing on inmate access to the courts. In addition, the association has a standing special interest committee on Law Library Service to Institutional Residents (www.aallnet.org/sis/srsis/lisirhome.html) and an online database where institution residents can locate local law library services (www.aallnet.org/sis/srsis/llsp/).

American Civil Liberties Union

Mention the American Civil Liberties Union (ACLU), and many correctional administrators become defensive. I must admit that was my reaction when AALL invited my colleague and me to speak on a program panel that included David Fathi, Staff Counsel for the ACLU National Prison Project (www.aclu.org/Prisons/PrisonsMain.cfm). Even more intimidating was the fact that Mr. Fathi was co-counsel for the plaintiffs in the *Lewis v. Casey* case. The Orange County Corrections Department (OCCD) law library system was to be explained and discussed in this program.

The program's main topic was "Prison Law Librarians and AALL, Five Years After *Lewis v. Casey*." Though many challenging issues and topics were discussed, Fathi confirmed our position that OCCD was moving in the right direction. In his appreciation letter to OCCD Chief Timothy P. Ryan, he stated, "The hands-on, real world perspective Officers Mark Cacho and William Jackson brought to the panel was extremely valuable. I was impressed both with the law library program, and by the knowledge, initiative, and dedication shown by these officers. I hope that they and their program will continue to enjoy your full support."

Elements of an Exemplary Law Library Access Program

An exemplary inmate law library access program must demonstrate compliance with the following principles:

- The program must provide inmates the tools necessary to challenge the legality of their conviction or confinement; seek redress for illegal conditions or treatment; and pursue remedies to address their civil legal matters.
- The program must have a clear and specific purpose, stated in a formal mission statement.
- The program must have specific and measurable goals and objectives.
- The program must be effective, efficient, and creative in addressing the legal information needs of inmates.

In addition, if ACA accreditation is desired, then ACA's legal access standards must be adopted into the agency's policies and procedures.

OCCD's Law Library Access Program

The mission of the Orange County Corrections Department Law Library is to secure all offenders' constitutional right to access the courts by providing a law library access program that enhances meaningful access to legal resources, materials, and services.

After the *Lewis* decision, OCCD modified its law library program into what it is today. It is a centralized system with one extensive legal collection at the main facility. All satellite facilities and inmates who are classified special risk are served via the Inmate Legal Material Request Procedure. Three certified correctional officers with formal legal training serve a population of approximately 3,500 inmates.

By using mediated electronic and online research, the law library provides current, accurate, legal information in a cost-effective and efficient manner. This approach reduces the expense in terms of both money and space for purchasing most new court reports. Our program provides timely service to all inmates, regardless of their location, and eliminates the need to establish extensive legal collections at every residential facility.

The law library is a member of AALL and is actively involved with AALL's Law Library Service to Institutional Residents special interest committee. This membership and committee affiliation give our staff an opportunity to gain invaluable knowledge, skills, and resources necessary to fulfill our mission. Attending AALL's annual conference also gives us exposure to the latest technologies and trends in legal information gathering. The expertise we acquire helps to reduce our agency's costs. It also allows us to bring back vital legal information resources for the entire department, not just the inmate population. These and other activities assist in creating an environment that enhances an inmate's access to the courts, while also allowing for a meaningful and educational experience for classified offenders who choose to visit the law library physically. The law library has numerous self-help materials, and a number of legal software companies have recruited OCCD to enroll in their pilot programs relating to inmate legal research.

For example, one new product is the law library research unit, TSTLL, developed by Touch Sonic Technologies, Inc. (www.touchsonic.com/index.php). This unique technology includes a hardware unit and a complete system of monitoring, maintenance, and service to deliver a complete law library to inmates. The key is the use of a shatter-proof touch screen that allows users, even those with no computer experience, to research every type of legal data that must be available to inmates. This type of law library investment may not meet your agency's needs, but it is an example of the valuable tools that are available.

The Value of an Investment

You may assume that an exemplary law library program is beyond your agency's available budget. At OCCD we have found that since we modified and implemented our program, the law library budget is now less than when the library first began operations. This cost reduction has resulted from applying the efficiencies learned through our various activities.

As mentioned earlier, there is no textbook formula for a perfect and flawless law library program. What works for one agency may not work for others. However, correctional administrators who are committed to supporting a progressive and proactive law library program can reap far more rewards than they ever anticipated. ■

Resources

Information contained in this article has been obtained in part from the following sources, which are highly recommended for those researching the subject.

Caselaw and Statute

Bounds v. Smith, 430 U.S. 817 (1977).

Lewis v. Casey, 518 U.S. 343 (1996).

Prison Litigation Reform Act—Section Titled, "Suits by Prisoners." 42 USC § 1997(e).

Articles

Karen Westwood, "Meaningful Access to the Courts and Law Libraries: Where Are We Now?" 90 Law Libr. J. 193 (1998).

Peter Hobart, "The Prison Litigation Reform Act: Striking the Balance Between Law and Order," 44 Vill. L. Rev. 981 (1999).

Margo Schlanger, "Inmate Litigation," 116 Harv. L. Rev. 1555 (2003).

Joseph Gerken, "Does *Lewis v. Casey* Spell the End to Court-Ordered Improvement of Prison Law Libraries?" 95 Law Libr. J. 49 (2003).

American Association of Law Libraries 2002 Conference Program, "Breaking Connections or Making Connections—Prison Law Librarians and AALL Five Years After *Casey v. Lewis*." To order program, contact Mobiltape at 1-800-369-5718 or on-line at www.mobiltape.com/search.asp. Utilize SKU#02AALL-E6.

For more information:

Mark S. Cacho
Law Library Officer
Orange County
Corrections Department
P.O. Box 4970
Orlando, Florida 32802
(407) 836-3325
Mark.Cacho@ocfl.net

Urban County Issues

in New Jail Planning, Design, and Transition

This article summarizes a report on an NIC Cooperative Agreement between the NIC Jails Division and consultants Michael O'Toole and Ray Nelson. The purpose of the cooperative agreement was to determine if NIC should revise any of its existing jail planning programs or develop new programs to meet the needs of large urban jurisdictions. The study summarized here was designed to identify the need for programs or materials to assist local officials in these large jurisdictions in the planning, design, construction, and transition into new or expanded jail facilities.

A major program initiative of NIC's Jails Division has been its facility-development continuum of services. Services include community meetings and local system assessment; formal training programs on planning of new institutions, managing jail design and construction, and transitioning to a new facility; and related ad hoc technical assistance. Because of their potential for long-term positive impact on local jail operations, these programs (under various titles) have been a major part of the Jails Division's program plan for about 25 years.

Most jurisdictions that participate in these programs have jails with rated capacities of less than 250 inmates. Very few large jurisdictions with "mega-jail" systems have taken part in the facility development programs, and no specific planning, design, and transition materials have been developed for this group. This is significant, because this group of jails, although relatively few in number, holds over 40% of the nation's jail inmates. Many of these jurisdictions do request and receive NIC technical assistance on an ad hoc basis to address specific facility-development issues.

For the past 10 years, the NIC Jails Division has sponsored the Large Jail Network (LJN), which is composed of sheriffs and detention/correctional administrators from jurisdictions with average daily jail populations greater than 1,000.

**Summary
by
Barbara Krauth,
from a report by
Michael O'Toole
and
Ray Nelson,
Jail Consultants,
Denver,
Colorado**

At its inception, there were about 50 jail systems in this category; currently, there are more than 150. One of the primary purposes of the LJN is to share information and experiences for the collective benefit of the members. Because the Large Jail Network is, by definition, the target population for the project undertaken through this cooperative agreement, the study authors relied on LJN members to provide information for this project.

Methodology

In the initial phase of the project, the study authors developed and distributed a brief questionnaire to LJN member jurisdictions. The questionnaire was designed to identify which jurisdictions had an ongoing jail construction project or had recently completed one.

The jurisdictions that responded positively were then asked to complete a more lengthy and detailed survey instrument. The format of this second survey was based on the components of the facility development process (FDP), originally developed for the State of California by Farbstein/Williams & Associates in their *Corrections Planning Handbook* series. The FDP has historically been the basis for the Jails Division's continuum of programs now titled "New Jail Planning."

The purpose of using the FDP as the basis for the questionnaire was twofold. First, it would enable the authors to identify problems and issues in specific phases of the facility development process. Second, it would allow them to cross-tabulate issues against each other and against the respondents' assessment of their projects' success. Because of the relatively small size of the target group, the consultants also solicited direct commentary from the respondents.

After analyzing the responses received, the project team developed an interim set of findings and recommendations and selected a small group of interested respondents to review and comment on them. The respondents were asked to comment on each item on the list and to recommend modifications, additions, and/or deletions. This process went through two iterations and resulted in a rank-ordered list of problem areas in the facility development process. The final rank-ordered list developed as a result of this process provided the basis for the initial recommendations to NIC that are summarized here.

In descending order of importance, the following problem areas were identified by the study:

- Mission Statements
- Contracting for Consultant Services
- Functional Programming
- Site Evaluation and Site Selection
- Schematic Review
- Transition Teams
- Maintenance Programs.

Findings and Recommendations

1) Mission Statements. Survey results indicated that mission statements were either not developed or not reviewed as part of most completed jail construction projects. Clearly, this was not the result of a lack of information on the importance of developing vision statements, mission statements, and goals and objectives. Most administrators of large jail systems are aware of the value of establishing vision and mission statements and goals prior to embarking on a major planning effort.

Instead, reviewers saw the lack of mission statements as a symptom of a lack of any meaningful pre-architectural planning efforts in most jurisdictions. Understanding how and why large jail projects often get under way without a major pre-architectural planning effort may also explain the lack of development of vision statements, mission statements, and goals and objectives to provide direction to the planning, design, construction, and transition process.

Reviewers also pointed to the problem of identifying and reaching the target audience for NIC Jails Division jail planning initiatives directed to large jurisdictions. It is clearly important to get key players and representatives from the major executive departments on board early in the process—including fiscal planning (budget), planning, zoning, urban development, and public safety (fire and police). In addition, there should be representation from the courts and the prosecutor's office. Finally, various service agencies—public, private, and non-profit—provide services directly or indirectly to the jail and its inmates, and their ability to do so is often affected by up-front planning and design decisions.

In smaller jurisdictions, NIC's community meetings and local system assessment process—along with easier, often informal, and direct lines of communication between local agencies and service providers—makes the pre-architectural process easy to establish and get under way. In larger systems, on the other hand, the size and complexity of the overall organizational structure make these methods impractical and ineffective. Nevertheless, there is a need for broad-based input in the pre-architectural planning phase. Continuing dialog and collaboration throughout the facility development process are also essential to the success of any project.

Recommendation: *NIC could determine precisely what groups constitute the appropriate target audience for jail planning in larger jurisdictions. Possible sources are various associations of elected officials and the professional associations of persons with interests or responsibilities related to jail planning, construction, and operations. Reaching the target audience early may promote better pre-architectural planning.*

In addition, most very large jurisdictions have staff who are experienced in various phases of the facility development process. NIC might offer a session, in conjunction with LJN meetings or other events, that targets these staff members. Programs could be marketed using titles such as "Updates on Jail Planning Strategies" or "Jail Planning and Design Issues for Metropolitan Areas."

2) Contracting for Consultant Services. Almost all respondents identified a need for additional consultants as part of their project. Nearly half were not sure if specific criteria were used to evaluate and hire consultants. A smaller but still significant number indicated they had no formal procedures for managing and overseeing the work of consultants once they were hired.

Some reviewers suggested that the problems with consultant contracting were, like mission statement problems, rooted to some degree in a failure to identify early in the process the kinds of specialized assistance that would be required—that is, a lapse in pre-architectural planning.

Most jurisdictions, particularly larger ones, have procurement divisions or procurement specialists and a formalized procedure to ensure competition in the procurement process. These procurement specialists generally rely on the department requesting the consulting services to develop a statement of work for the requested services. However, it is impossible for a contracting specialist to draft a good statement of work based on minimal information and unclear objective measures received from requesting departments.

The study authors believe that the current weaknesses in contracting for consultants lie in requesting departments' deficiencies in drafting a Statement of Work:

- Lack of overall knowledge, skill, and ability to prepare a performance-based statement of work on the part of the jail staff;
- Lack of knowledge about the basic tasks, timelines, and deliverables for the various consultant services that are necessary to develop specific performance-based statements of work;
- Lack of knowledge concerning available consultant pools and steps to take to pre-qualify consultants for specific requests for proposals (RFPs) and requests for quotes (RFQs); and
- Lack of knowledge concerning free or partially subsidized services available through universities or federal, state, or local governments or national and local philanthropic organizations.

All of this information exists. The challenge is to make people aware of its importance and to have it available to those who need it in a form they are comfortable using. As in the discussion on mission statements, the contracting issue is not about the availability of information, but an unfamiliarity with the jail planning process and the timelines and responsibilities within that process.

Recommendation: *Clearly, it is not for NIC to recommend the kinds of consultant services that might be needed in specific projects, nor is it appropriate to attempt to train individuals to be contracting officers. The recommendation here is for the development of a brief instructional manual and some formal guidelines on developing performance-based statements of work. Performance-based statements of work are beneficial for both the agency and the contractor. Agency staff are forced to come to consensus on*

what they expect from a particular consulting activity and the form in which they expect to receive it. The contractor benefits by having clear, specific directions that include measurable indicators of overall performance.

Such a monograph would be a useful tool not only for the facility development process, but also for contracting for services in general. If this material is made readily accessible, a brief monograph with an annotated resource list and bibliography would suffice. It will not guarantee perfect statements of work, but it could help to prevent most of the major problems that appear to exist with non-performance-based statements of work.

In addition, NIC could include a series of checklists for each of the more common types of consultant services used in the facility development process. These could be one-sheet information pieces.

3) Functional Programming. Nearly 30% of the questionnaire respondents indicated they did not perform some or all of the various pre-architectural programming functions. Another 10% were unsure whether these functions were performed. Some had questions about whether there was a difference between a “functional” program and a “space” program.

This finding was not too surprising, as jurisdictions often do not do any programming until an architect has been brought on board. In many instances, the programming done by the architect is an architectural space program, not a functional program. A space program articulates the size, types, and features of the spaces needed in the facility. A functional program, on the other hand, articulates the specific activities that take place in these spaces, translating process scenarios into functional program statements.

Although most architects try to develop some sort of functional narrative as part of the process, their decision-making is sometimes based more on their own past experiences than on current client input. The problem when this occurs is that jurisdictions are hiring architects to develop design solutions without any well-articulated problem statements, that is, functional narratives.

A functional narrative not only informs the development of the design solution; it also provides the basis for evaluating the design solution and developing detailed scenarios. Functional narratives are the initial nexus between design and operations. As they are developed, refined, and modified, functional narratives become the basis for developing a facility’s operational manuals and transition training materials.

Recommendation: *NIC could develop a monograph that not only explains the nature and purpose of functional narratives in informing the schematic design process, but also describes how the development and refinement of the functional narrative mirror the design development process. When agencies see how this process develops, they will be more likely to understand the importance of developing functional narratives.*

4) Site Evaluation and Site Selection. The major issues in any large facility development process are site, size, staffing, and funding. Each is ultimately a political decision made by county commissioners, city councils, mayors, or county executives. The most political of these issues is site selection, yet the site selection process requires a considerable amount of technical evaluation and staff input. For a variety of reasons, consultants may be asked to perform some of the technical site evaluation tasks, but their advice is still only input into what is ultimately a political decision. Staff and consultants do not make site selections.

It is important to understand the boundaries between the technical and the political. *Site evaluation* is a technical effort to separate the workable sites from the unworkable ones. In this process, all potential sites are evaluated and rated against a pre-established set of criteria. Some of these criteria may be socio-political in nature—e.g., existing zoning limitations, public transportation access, etc.—while others may be more technical and operational.

Site selection, however, is a political process to select a site from among those determined through site evaluation to be workable. It is a mistake to use the site evaluation process, either deliberately or naïvely, to encroach on the political prerogatives of those responsible for the final site selection.

Recommendations: *NIC has developed good materials on site selection and site evaluation. However, the responses to the questionnaire indicate that a monograph on the nature of the site evaluation and selection processes, including roles and responsibilities, would be useful. The inability to distinguish between site selection and site evaluation still appears to be an issue.*

5) Schematic Review. Schematic review provides a significant decision point in the planning/design continuum. It involves the planning team's review of the architect's first set of drawings, or schematics. The purpose of this review is to verify that the proposed design will in fact support all aspects of the functional program. If changes in the design or the functional program are needed, they can be identified and agreed to at this point without disruption or added cost.

However, responses to the questionnaire indicated that up to 20% of the respondents did not evaluate the design solution against earlier planning efforts such as functional programs; nearly 25% did not revise or update staffing plans or operational budgets based on a final schematic review. These numbers may reflect the fact that many jurisdictions did not have functional narratives to use in evaluating the schematic design solutions. In any event, the responses indicate that the main purposes and major benefits of the schematic review process are being missed.

The schematic plans should reflect the design solution that provides for the most efficient implementation of the functional narratives. Adjustments are often required in both the functional narratives and the schematic design. However, at sign-off, both the design and the functional narrative should have been updated, and detailed scenarios for each operational function should have been finalized and tested against the design.

Before moving into the design process, the jurisdiction can improve its estimates of construction costs and, more importantly, get a reasonably accurate estimate of annual operating expenses for the facility as designed. Schematic review can answer two key questions:

- 1) Can we afford to build and operate as designed? and
- 2) Do we want to proceed as planned, or do we want to modify the proposed design and operational plan?

With an effective schematic review, the project team can confirm that the jurisdiction's specific requirements are being met. Without a detailed schematic review, the project team cedes control of the construction effort and outcome to the architect. The jurisdiction will be subject to a major funding outlay in either case. However, the project will cost significantly more if the jurisdiction tries to make changes later in the process. The cost of changes after final schematics can escalate exponentially.

Recommendation: *This issue is significant enough to warrant a special monograph that outlines a process to determine the adequacy of the schematic solution and its fidelity to the functional and space program. The monograph should also reference, or include, methods to develop staffing plans and operating budget estimates. (NIC has recently revised and updated its Staffing Analysis Workbook for Jails and has recently published a series of monographs on the budget process.)*

6) Transition Teams. The questionnaire responses did not indicate any problems directly related to transition teams, although some of the problems noted at the end of the questionnaire could logically be attributed to transition team issues. NIC and others have developed a considerable amount of very good material on the transition process, and nearly all of it is readily available through the NIC Information Center.

Recommendation: *There is no specific recommendation here. NIC has developed considerable material on transition and transition issues.*

7) Maintenance Programs. Everyone knows that jails are operated 24 hours a day, 7 days a week, 365 days each year. What do not appear to be clearly understood, however, are the implications of this fact. Courthouses and government buildings are generally open 9:00 to 5:00, Monday through Friday. Schools are in session fewer than 200 days a year for 8 to 10 hours a day. What this means is that the normal wear and tear on a jail facility is about four times that of other public buildings and about six times that of a school. Put another way, a 5-year-old jail has experienced the same, normal wear and tear as a 20-year-old public building or a 30-year-old school. These numbers are often compounded in jurisdictions where jails are regularly operating in excess of their design capacity.

Although about a third of respondents indicated that they did not initiate any comprehensive maintenance programs during transition or on occupation, two

types of maintenance programs should actually be in place. First is one that performs the regular, recommended, scheduled, preventive maintenance on the installed equipment. The second relates to the maintenance of the “systems” themselves and involves life cycling of components and periodic upgrades. These are separate but equally important functions. Maintenance programs are probably the most neglected part of the facility development continuum. They are also one of the most important.

Recommendation: *Material exists on computerized maintenance programs, but little is in the public domain, making it problematic for NIC use. NIC could develop a monograph outlining the importance of the early and aggressive implementation of both types of maintenance programs.*

Key Findings

This study has suggested that NIC consider developing additional strategies to provide information and assistance to large urban jails on a number of specific facility planning issues. Information and assistance must reach team members at the point when it is most useful to them and most effective for the project, and it must be provided in accessible forms.

The key issues to be addressed are:

- Identifying the appropriate audiences toward whom resources and programs should be targeted. In a large, urban jurisdiction this typically includes elected officials who oversee the jail and those from the funding authority, as well as a relatively large group of people in specialized, professional, civil service, non-elective positions.
- Fostering an awareness among project team members of the importance of early, pre-architectural planning.
- Helping elected officials, project team members, and others to understand the specific tasks involved in a structured pre-architectural planning process. By giving focused attention to these tasks, the jurisdiction will reap tangible benefits in terms of both control over the project’s cost and optimal functionality of the new jail facility. ■

For more information:

Richard Geather
Correctional Program
Specialist
NIC Jails Division
1960 Industrial Circle
Longmont, Colorado
80501
(800) 995-6429, ext. 139
rgeather@bop.gov

NIC Resources

Available online or from the NIC Information Center:

- Guidelines for Developing a Criminal Justice Coordinating Committee
- Jail Resource Issues: What Every Funding Authority Needs to Know
- Jail Crowding: Understanding Jail Population Dynamics
- Jail Design Guide: A Resource for Small and Medium-Sized Jails
- Jail Design Review Handbook
- Jail Facility Site Evaluation and Selection
- Jail Planning and Expansion: Local Officials and Their Roles
- Preventing Jail Crowding: A Practical Guide
- Staffing Analysis Workbook for Jails

Harris County Sheriff's Office Teams with Community College

to Train Inmates

The Harris County Sheriff's Office (HCSO) cooperates with Houston Community College (HCC) to provide educational classes to inmates in county jail facilities. HCC instructors provide vocational job training, literacy, and GED classes to approximately 700 male and female inmates a day at four separate facilities. This comprehensive educational system is focused on helping inmates to achieve entry-level job skills in the shortest possible time.

The underlying philosophy of the program is that once participating inmates are equipped with the necessary life and professional skills, a reduction in recidivism will be the inevitable result. HCSO and HCC are now in their 30th year as partners in education.

Workforce training classes offered by HCC include:

- Offset printing;
- Auto mechanics;
- Heating and refrigeration;
- Auto paint and body;
- Basic construction;
- Welding;
- Leather craft;
- Floor and wall covering;
- Upholstery;
- Building maintenance;
- Consumer electronic; and
- Culinary arts;

as well as others.

**by
Captain Jim
Albers,
Inmate Affairs
Division,
Harris County
Sheriff's Office,
Houston,
Texas**

Students who complete the 11-week training program receive a certificate of completion, which certifies that they have achieved a marketable job skill.

In Adult Basic Education (ABE) classes, the curriculum includes reading, writing, math, science, and social studies. HCC does educational achievement testing using the Test of Adult Basic Education (TABE) with new students for placement purposes and to participating students on a 90-hour cycle to measure progress.

All ABE courses are organized to prepare students for the GED test. Students who have fulfilled the requirements are eligible for GED testing at least once a month. Our inmate student pass rate for the GED exam has averaged an extraordinary 70%. Students who pass the GED examination participate in a formal graduation ceremony.

First Jail to Be Certified in Inmate Education

Recently, the Harris County Sheriff's Office became the first county jail in the nation to become nationally certified in inmate education. The Correctional Education Association (CEA) completed its audit of our facilities in February 2004, and the Inmate Education Program passed 100% of the required standards. Our cooperative effort with HCC sets new standards for inmate education.

History of the program. The Harris County Sheriff's Office established the Inmate Education Program in 1973. This was in response to a Texas Commission on Jail Standards mandate to offer all qualified inmates a chance to obtain some form of education to prepare them for life after their release from jail.

Beginning in 1973, at the request of former Harris County Sheriff Jack Heard, HCC began teaching ABE and GED classes under the Adult Literacy Grant. In 1976, HCC was asked to provide some vocational courses at the Harris County Detention Center in Humble. Initially, a limited number of classes were offered in makeshift classrooms in hallways, and staff from both institutions improvised strategies for obtaining materials, equipment, textbooks, and other items needed to create a viable project.

Beginning in 1983, in addition to ABE, GED, and ESL classes, vocational course offerings were requested for a newly opened facility, and course offerings were then further expanded to include another facility.

Flagship facility. A recently opened educational facility, located at 4627 Crites Street, represents the flagship of the HCSO Inmate Education Program. Inmates are now bused from jail to the Crites Street location every day.

Preliminary discussions about this facility began in early 1997. Architectural plans were submitted for approval later that year and formally approved in 1998. During this period, an 18,000 sq. ft. section of warehouse previously used for file storage was cleared to make way for the substantial renovation that was to

follow. Construction began in the fall of 1999. It was completed in December 2000, and classes began in January 2001.

What occurred during those 2 years was remarkable. It was a fully committed and collaborative effort involving the Harris County Sheriff's Office, Harris County Facilities and Property Management, and the Houston Community College at a cost of more than \$2 million.

The Program Today

Since its inception, the program created by the partnership between the Harris County Sheriff's Office and HCC has grown into one of the largest departments in the college. We now enroll approximately 3,500 inmate students each year.

The program is also one of the largest and most successful county jail inmate educational campuses in the nation. HCSO supplies a director, assistant director, clerical assistants, and educational deputies for security, along with classroom space and some materials. The community college provides equipment, classroom instructors, a program coordinator, and a full-time counselor.

An alternative educational program is also available for juveniles certified as adults. After surveying all the school districts surrounding Harris County, administrators came to the consensus that any juvenile, whether currently enrolled in school or not, would become a resident of Houston upon being booked into the Harris County Jail system. Therefore, the responsibility of educating the inmate belongs to the Houston Independent School District (HISD). These offenders are served through HISD's alternative education program, which is responsible for all juveniles up to the age of 17 who are unable to attend regular classes. A representative from the alternative education program at HISD is sent to our jail facilities to coordinate these students' educational programs.

Program Benefits

The Inmate Education Program not only allows taxpayers to reap benefits from their tax dollars, it also opens an opportunity for an inmate to return to society with productive social skills.

Another goal of the project was to develop programs that produce income to help offset expenditures associated with educating inmates. This approach enables inmate students to experience real-world training in a production-oriented environment and provides them with socially accepted work skills. Our partnership with the community college has clearly produced a win/win scenario for both the citizens of Harris County and the inmates. The printing class, for example, is structured so that all county agencies, including the Sheriff's Office, can receive high quality printing services at a fraction of the cost charged by outside vendors.

Some other classes are structured to provide services strictly for the Harris County Sheriff's Office. These include the upholstery class, which repairs furniture, and the basic construction class, which produces a wide variety of cabinets,

shelves, stands, and wood products for the Sheriff's Office. The leather craft class repairs most of the officers' professional equipment.

An Opportunity for Change

The Harris County Sheriff's Office, under the leadership of Tommy Thomas, reflects a commitment to strong law enforcement, crime control, and fiscal responsibility. Inmate education is seen as a means of achieving positive behavioral change within a conservative philosophical framework.

Rehabilitative efforts in county jails have often been controversial. Many people believe that criminals should not be given opportunities equal to the average citizen. The Harris County Sheriff's Office, however, believes otherwise. The core belief underpinning the Sheriff's Office policy on inmate education is that qualified inmates need to have opportunities to develop the necessary professional and life skills to re-enter the "free world" as productive citizens.

Participants in inmate programs are not "coddled," as some believe. Students are expected to qualify for the privilege of attending class and, equally important, to remain enrolled. Solid discipline is at the heart of the Inmate Education Program.

If students do not demonstrate a positive and cooperative attitude, they are dropped from the class immediately. Punctuality, courtesy, respect for others, and good manners are considered essential requirements for participating in the program. No college degrees or special "frills" are included, and the educational program places responsibility on each student for his/her success.

If an individual chooses to take advantage of these opportunities, the likelihood of his or her future success is greatly improved. ■

For more information:

**Captain Jim Albers
Inmate Affairs Division
Harris County
Sheriff's Office
701 N. San Jacinto St.
Houston, Texas 77002
(713) 755-8415
J_Albers@itc.co.harris.tx.us**

Mission Creep

and the Role of the Jail in Public Health Policy

Mission creep is the process by which an organizational mission's methods and goals change gradually over time. In military terms, mission creep describes a common phenomenon in which forces are committed to achieve a limited objective, but then find themselves drawn into expanding both the size and the nature of the intervention, supposedly to support the original objective. Mission creep also is the tendency for an agency to accumulate more and more goals as time progresses. More often than not, mission creep has a negative impact on organizational resources.

In a 1997 article on mission creep, Keith Drury states:

In press conferences, media types like to ask Presidents about "mission creep." That's when a particular military mission is gradually expanded to include tasks beyond the scope of the original mission. For instance, during "Operation Restore Hope," the U.S. military wound up re-training Somali police on how to direct traffic, though it was well beyond the task of the initial mission. When "mission creep" occurs the mission gradually expands, becoming broader and more massive than first intended.

In "Three Decades of Mission Creep: The 'Do More With Less' Well Has Run Dry," James D. Hessman details mission creep that has occurred in the United States Coast Guard (USCG). According to Hessman:

The last three decades have seen a massive workload increase, in scope as well as numbers, across the entire spectrum of Coast Guard missions and responsibilities. It is that three decades of mission creep, unprecedented in Coast Guard history, that gives the Semper Paratus service its most difficult challenge. In the field of national defense, for example, USCG duties and responsibilities have grown exponentially at a

**by
Donald Leach,
Administrative
Officer,
Division of
Community
Corrections,
Lexington/
Fayette Urban
County
Government,
Lexington,
Kentucky**

time when the Navy and the nation's other armed services have been steadily shrinking in size.

Further, Hessman sees mission creep as having a long-term effect on the mission of the Coast Guard. As Hessman puts it, government must "...recognize that the service will continue to carry out all of its missions to the maximum extent permitted by its limited resources. But they also recognize that, because those resources are so limited, a reduction in overall workload will soon be not just probable but mandatory."

And as USCG Commandant Adm. James M. Loy put it in speaking about streamlining initiatives that he implemented, resulting in a net fiscal savings to taxpayers, "We accomplished these savings without cutting services. We're proud of that effort—but frankly, I think the 'do more with less' well has run dry."

Mission creep affects other institutions as well. It is a common occurrence in many public education systems. In Vin Suprynowicz's March 2003 article for the *Las Vegas Review-Journal* on mission creep in public schools, he quotes Mike Antonucci, director of the California-based education research firm, the Education Intelligence Agency:

"In public education, mission creep is a common occurrence," Mr. Antonucci finds. "Since children learn better when they are well-fed, the schools feed them. In the same way, schools provide transportation, counseling, child care, health services, security, etc., every one of which may be very worthwhile and important activities. The problem? Soon these 'support' functions require support of their own and before long the school district is no longer a school district, but a social services center. Education—the original mission—loses primacy."

The demand to 'do more with less' is one that jail administrators have also come to know all too well. The loss of focus on the primary mission is the effect of mission creep on jails, so we need to bring that mission back into focus and examine current "creep" trends.

Jail Goals and Mission

"Mission-based management" is an administrative methodology for managing the risks associated with operating a modern detention facility. Businesses typically have a mission and articulated goals, often posted in a conspicuous place in order to be visible to its customers and employees. As jail administrators, we need to be clear about our mission to our customers and employees. Mission-based management is based on an agency mission with articulated goals and objectives intended to measure the accomplishment of the mission. Our mission should not be confused with the mission of law enforcement. Instead, our mission borrows heavily from business management concepts such as Total Quality Management, continuous quality improvement, or performance-based management.

Put in its most basic form, the jail mission is: “To protect the public and institutional safety through the incarceration of adult offenders in institutions that meet statutory and constitutional standards of care and provide program opportunities intended to reduce re-incarceration.” Mission-based management is basically a business model for operating a jail. At its heart is risk management.

I don’t think anyone would disagree that these correctional risk management goals are:

To Protect:

- *Public safety* (by addressing the threat of violence while in the community and the threat of escape)
- *Institutional safety* (by addressing the threat of violence while inside the institution and the threat of escape).

To Provide:

- *Constitutional level of care* (which includes medical and mental health care)
- *Program opportunities* to reduce recidivism.

The concept of “program opportunities” means operating programs that keep offenders occupied, because this keeps operational costs down. In one jail in Pennsylvania, television and books (except for religious materials) were not allowed by the governing prison board. They then wondered why there was a 68% turnover among staff. The jail administrator got creative and, behind the backs of the prison board, rolled in TVs as rewards for good behavior and also passed out magazines. This approach helped him gain control of the jail, as he gave the offenders something to occupy their time. To borrow from a common expression: “Idle hands are the devil’s workshop.” Offenders without structured distractions will create their own distractions, often to the detriment of the physical plant, staff, or other offenders.

Meeting our obligation to protect involves separating the violent and the non-violent (predators and prey) via good, objective jail classification systems, imposing movement protocols and structures to prevent escapes, and developing methods to block contraband entry. Meeting our other obligations means providing constitutional levels of care so that we identify the immediacy of need for medical and mental health care and creating programs to modify offenders’ behavior while in custody.

The Need for Services

Over the past 200 years jails have seen significant mission creep. Sometimes you know it is happening, and sometimes you don’t.

Mission creep has occurred throughout jail history. In the earliest days, “gaols” housed offenders until they were punished, then later jails began to house

offenders as *part of* punishment. Later, with the advent of the Civil Rights movement and a greater awareness of individual rights, jails had to provide for medical needs. This requirement was then expanded to include services for mental health needs. Finally, jails have developed programs to address rehabilitative needs. All of these additions to the jail's mission have a cost associated with them. The question is, "Can we bear the costs of carrying out *all* of these goals?"

One of the jail's goals is the provision of medical care comparable to that which can be accessed in the local community. There has been plenty of case law to stipulate this. Case law is pretty clear that we must provide care for acute, serious, and chronic medical and mental health needs. The question is, how do you accomplish this with the least expenditure of resources while meeting constitutional minima?

In our jurisdiction, we put our resources toward the immediate, serious, and chronic care needs of our offenders. All newly arrested offenders are triaged at the time of intake for "immediacy" of needs. More information is gathered as they undergo a more in-depth booking screening in which they are queried about their medical and mental health needs. We do not routinely conduct a 14-day assessment of all new offenders as many facilities do (and certain standards would call for). Unless they have been identified during the triage or booking screening process as having an immediate, serious, or chronic need, offenders will not routinely see a physician. We let them tell us if they need care through the sick call processes to which all offenders have access.

Theoretically, an offender can enter the facility without any medical or mental health needs being identified through triage or booking screening, be placed in a housing unit, never get sick or submit a sick call request, and be released without ever having come into contact with the medical staff. In this way, we target our expenditure of medical resources toward offenders who have acute, serious, or chronic medical and mental health needs, and we avoid the costs of assessing otherwise healthy people.

Mission Creep and the Real World

Mission creep has been affecting jails for some time. Some of it is self-imposed; some is imposed by others. As jail administrators, we all recognize that we must deal with certain realities, including the reality that there are constitutional minima we must meet as well as federal and state laws. There are state standards that we must also try to follow. We must also keep political considerations in mind. All of these realities have an impact on shaping the jail's mission, and they often have the effect of creating mission creep. But sometimes we need to stop, sit back, reflect, and say, "Do we really need to be doing that task?"

Accreditation is an example of self-imposed mission creep. Accreditation in and of itself is a great thing, but it can be very expensive from both a monetary and legal perspective. Why should a jail adhere to an artificial standard that will cost money to implement when there is only enough money to carry out essential functions? And why create a "liberty interest" by instituting standards (such as

X, Y, and Z) that are higher than those mandated through current case law (only X and Y)? This approach creates unnecessary litigation risk exposure and resource expenditures. Perhaps meeting constitutional minima is an alternative to accreditation. We will certainly give offenders constitutionally mandated treatment, but we will not respond to artificially inflated standards. Many accreditation agencies are in the business of making money. We need to remember that we are in a business too, and our stockholders are the taxpayers. But once we have achieved accreditation, we have “raised the bar” for meeting our mission.

As part of mission creep, jails have become mental health institutions. Beginning in the 1960s through the '80s, there was “de-institutionalization” of the mentally ill, which called for putting them into community-based treatment. However, there was insufficient funding for community-based treatment, so it was not really possible. The result was that, by July 2002, there were more mentally ill people in jails and prisons than in hospitals. The Los Angeles County Jail is the nation’s largest mental health institution. Is that part of the jail’s mission? Mission creep is clear in the form of jail mental health care in lieu of community-based treatment.

Serving as the community’s mental health institution has the following implications for the jail:

- Increased need for mental health separations;
- Increased mental health staffing;
- Increased length of stay;
- Increased costs of psychotropic medications, especially “designer drugs”; and
- Increased costs associated with a new mission.

Our obligations are increasing, but our budgets are diminishing. In short, anything can be done for a dollar. But are the taxpayers willing to pay for it? In jail mental health care there are increasing discussions about transitioning the offender into community-based treatment. Accomplishing this involves providing psychotropic medications to “bridge the gap” between release from custody and entry into the community-based treatment program. For some facilities this gap is as wide as a 14-day supply, and entry into some community-based treatment programs can take 4 to 6 weeks. Should a jail extend the provision of medication to cover this wide a gap? And how do we as administrators ensure that the offender is taking the medications during this gap? Or are we willing to assume compliance with the medication regimen? Are the taxpayers willing to pay for it?

The real world is what your taxpayers are willing to pay for, while the ideal world includes all the great things we would like to do in corrections.

A few years ago, I met with a staff member of the Netherlands Consulate General’s office. His perspective was that we in the U.S. are “barbarians” for the way we treat those in jails and prisons. He said that in the Netherlands they rehabilitate offenders, not merely punish them. I then visited the Penitentiare Inrichtingen Over-Amstel (Amsterdam Remand Center) and met with the jail

administrator, Mr. C. Boeij. He was not very different from any jail administrator I had met in the States, and his facility was not much different from any direct supervision facility I have visited here. He felt that they didn't rehabilitate anyone, although he did praise his offender work programs. In my experience, Hennepin County, Minnesota has better programs, and the program in Holland was simply make-work. My point is that the Consulate General's representative had an ideal vision of what they accomplished, but the real world situation was very different.

Should the Jail Be a Public Health Agency?

Today, jails are increasingly being tasked with providing public health functions. Taking on elements of the public health agency's mission is another example of "raising the bar" for meeting the jail's mission. As the budgets for public health agencies become constrained, there are calls for jails to take over some of these functions, and this brings up critical questions that jail administrators must answer:

- Does the jail have a role in public health policy?
- Should we be addressing issues that might better be left to the local public health department?
- How does this affect the mission of the jail?
- What resources will we need to accomplish this new mission?
- Are we expected to "do more with less" in order to accommodate these new tasks?

The argument for the jail's role as a public health agency focuses on the following elements:

- The jail is a microcosm of the local community.
- Most offenders have had minimal contacts with medical care providers.
- Jail offenders are a captive public health population.
- Offenders will eventually be released from the jail back into the community.
- Jail populations have a high incidence of contagious disease, such as tuberculosis, sexually transmitted diseases, Hepatitis B, HIV/AIDS, MRSA, influenza, and SARS.

There are also a number of practical arguments against assuming a public health function, such as:

- Jails have a high turnover in population.
- There are large numbers of repeat offenders.
- There is a lack of follow-up on release; we don't do long-term transitions.
- Resource expenditures continue to grow—for physical plant, staff or service providers, supplies and equipment, and unfunded mandates.

Taking on the public health role is really a question of money. Although it might be a good thing to do, it is really a resource decision. It is an expansion of the jail mission. If mandated—and especially if unfunded—it becomes mission creep with a significant budgetary impact.

Managing Risks of Contagion and Exposure

We are being told to cut medical costs. In this context, how do we manage resources based on the core mission of the jail?

Our current medical practices in Lexington include the following:

- Intake triage;
- Booking screening;
- Medical assessments;
- Sick call requests;
- Immediacy assessments;
- Isolation of carriers;
- Treatment for chronic and seriously ill; and
- Referral to external providers.

As mentioned previously, an offender can spend time in our jail and never see a medical provider. The opposition to taking on public health functions is simply one of resource limitations. We cannot afford to do more because we continue to be hit with unfunded mandates from both the state and federal levels. Although there is growing funding for law enforcement (especially after 9/11), it has not filtered down to the local jail level. As jail resources become strained, a more precise identification of the tasks essential to fulfill the core mission of the jail needs to be undertaken.

To protect ourselves in the future, are we going to limit our physical contact with offenders? Will we take ever-greater precautions in handling offenders, including the use of face masks, gloves, fluid-impermeable uniforms, and self-contained breathing apparatus? If we believe that the risk of contagious disease is that serious, we will need all these things.

Consider the response of jails to the SARS threat in 2003. The McHenry County Jail, located near Chicago and O'Hare International Airport, issued bulletins to the staff and made surgical masks available to officers. They required non-American detainees to complete questionnaires on where they had been, focusing on areas where exposure to SARS was likely, even though none exhibited any SARS symptoms. Detainees' body temperatures were monitored daily.

Who can argue that these precautions were not a reasonable response to the SARS threat? But did the jail provide the same precautions during the last flu season—especially considering that the supply of influenza vaccine ran below critical levels and that a large number of people die annually from influenza? It is as easy to take the flu home to the family as SARS. Where do we stop? Many jails test offenders for tuberculosis, but it usually takes 3 days to find a positive. What about the exposure time? Should we not take reasonable precautions against TB as well?

My point is that when there is contact, there is a chance of contagion. How will we cut down exposure? If we take on a public health role, we have to acknowledge greater levels of staff exposure and a wider range of types of exposures and then take the necessary steps to identify, isolate, and manage the problem. Are we willing to assume the costs of such a high level of management? Do we have enough isolation spaces in our facilities to make the necessary separations until we know the offender does not pose a health risk? Do we have the funds for more medical assessments? What about the employee issues?

There is a balancing act between the risks associated with identifying many of these public health concerns and allocating the resources to manage them, and the risks associated with not identifying these concerns. Will jails acquiesce to mission creep by taking on more and more public health functions?

In addition to protecting public safety from the threat of violence and the threat of escape, will we also take on the role of protecting our communities from a threat to public health? If so, who will pay for the services?

Sources

The Corrections Professional. "As SARS Threat Subsides, Jail Analyzes Precautions." *The Corrections Professional* 9(1), August 22, 2003, p. 10.

Drury, Kenneth. 1997. "Thinking Drafts: Mission Creep." www.indwes.edu/tuesday/ymca.htm.

Hessman, James D., ed. 1998. "Three Decades of Mission Creep." *Seapower*, September 1998, www.navyleague.org/seapower/three_decades_of_mission_creep.htm.

Hessman, James D., ed. 1998. "The 'Do More With Less' Well Has Run Dry." *Seapower*, September 1998, www.navyleague.org/seapower/three_decades_of_mission_creep.htm.

Suprynowicz, Vin. 2003. "Full-Service Social Agencies?: Mission Creep—Larger School Districts Tend to Veer 'Off Task'," *Las Vegas Review-Journal*, www.reviewjournal.com/lvrj_home/2003/Mar-16-Sun-2003/opinion.

For more information:

Donald Leach
Senior Administrative
Officer
Division of Community
Corrections
Lexington/Fayette
Urban County
Government
600 Old Frankfort Circle
Lexington, Kentucky
40510
(859) 425-2612
DonL@ifucg.com

Multnomah County

Model Partnership for Custody and Health

The Multnomah County Sheriff's Office in Portland, Oregon, operates four direct supervision correctional facilities with an operating capacity of approximately 1,700 inmates. In a relationship that has existed over the last 30 years, the medical and mental health needs of inmates have been addressed through a partnership between the Sheriff's Office and a division of the County Health Department called "Corrections Health." This partnering agreement is unique in a number of ways, all of which help the two divisions of county government provide quality, consistent service to those who come into custody in the local corrections system.

This partnership has been successful because of a number of factors.

- **Joint management teams**—Both at the individual facility and the Sheriff's Office levels, the joint management of operations is key to building a successful program. The model for this cooperation is set by the elected sheriff and appointed director of health being involved in joint policy setting and budgeting.

As critical policy decisions are being made surrounding mental health treatment and other high-liability areas in the community, the full engagement of the highest-ranking officials in both departments is key. This relationship has survived as leadership teams have transitioned in both divisions.

- **Teamwork at all levels**—The Sheriff's Office and Corrections Health leadership meet regularly at various levels of the organization to assure shared vision, mission, planning, and implementation of procedures. The Director of Corrections Health participates at the command level to share program direction and policy review. Jail commanders and health facility

by
Tim Moore,
Chief Deputy,
Multnomah
County Sheriff's
Office,
and
Gayle Burrow,
Director,
Corrections
Health,
Multnomah
County Health
Department,
Portland,
Oregon

managers attend regular meetings to ensure that jail operations are coordinated among the various programs. Health care representatives are members of safety committees to monitor compliance with all safety and environmental regulations.

Multidisciplinary teams from custody, health, and programs review the status of mentally ill inmates to make sure there is a joint plan for while they are in jail. Joint participation of health and custody staff occurs in annual deputy training and orientation of new employees, where roles and responsibilities are clearly defined to all staff working in the jail setting.

- **Clear role definition**—By making clear that the role of the Corrections Division is to provide a safe, secure, and humane corrections environment, and the role of Corrections Health is to provide medical, mental health, and dental services to those incarcerated, we provide clear overall policy direction that translates onto the jail floor. Sheriff's Office facility commanders are not involved in clinical judgment calls, and the managers of the Health Division are not involved in the security management of the facility. The health program works with custody to support the safety of employees, community, and staff while delivering needed health care. The arrestees who come to jail today have committed more serious crimes and are sicker, older, and more likely to be mentally ill or female than in the past.

Another benefit of the clear role definition is that the recruitment, hiring, supervision, and policy direction for all medical staff are conducted by career health care professionals. The health care staff are employed by the Multnomah County Health Department and report entirely to that department. The Sheriff's Office works jointly on security clearances and a limited number of personnel issues surrounding the security of the institution.

- **Joint behavior management planning for high needs inmates**—A multi-disciplinary team is involved in the overall management of inmates with acute medical or mental health needs. Inmate management plans and their implementation are useful for both medical and corrections staff. Confidentiality agreements are part of the team approach, which assures privacy of health information and the ability to develop joint plans to care for inmates with multiple needs.
- **Shared funding**—Budgetary support for the Corrections Health budget, by design, comes from the elected sheriff and the appointed health director. The joint management teams of the facilities and the overall agencies often make critical joint budget decisions. As local policy decisions are made about the type and numbers of jail beds to be operated, the resources for medical and mental health care are included in the sheriff's operational budget planning.

Partnership Outcomes

A number of positive outcomes have arisen out of this unique partnership between Corrections Health and the Sheriff's Office. Some examples include:

- **Program accreditation**—All health care programs in our local correctional facilities are currently accredited through the National Commission on Correctional Health Care (NCCHC). The decision to pursue and maintain the accreditation was made jointly by the Health Department, THE Sheriff's Office, and the County Attorney's Office. We have found the standards and compliance auditing done through this process to be key in developing defenses to inmate claims.
- **Mental health therapeutic milieu**—Through continued team interactions, we jointly manage two dorms of moderate acuity mentally ill offenders. Until this innovative approach was developed in 1999, these inmates were managed in single-cell environments, which did not yield the positive outcomes we are experiencing from this new model. Dedicated health, custody, and counseling staff manage these units to stabilize inmates and provide educational and release planning activities.
- **Aggressive management of suicide risk inmates**—Teams of practitioners from both the Health Department and Sheriff's Office craft management plans for the identification of, services for, and housing of suicide risk inmates. This aggressive approach has resulted in no suicides in custody in the four corrections facilities in the past 4 years.

The major reason for this huge success is the multi-disciplinary team environment, from the facility commanders to the line staff performing the work. Communication, both in writing and verbally, cements the plans that guide all staff in inmate management that includes methods of interacting, housing, managing behavior, and tracking court activities. The proactive identification of high-risk inmates prevents emergencies and poor outcomes.

- **Hospice for inmates passing away in custody**—An interdisciplinary task force created a hospice model for inmates who will be dying in custody. This compassionate model duplicates many of the features of hospice care in the community, but it takes place in our medical infirmary. Care plans include outside hospice workers coming into the jail and coordination with family members to be a part of the dying process. The ongoing management of inmates facing serious illness and death is accomplished in the multi-disciplinary team environment.
- **Joint risk assessment and management strategies**—With the assistance of the County Attorney's Office, we have developed risk management strategies for managing high needs inmates, whether the needs fall in the medical or mental health fields. We have found that this leads to outcomes that have minimal liability as a result of clear definitions of mission and roles. The quality improvement program

monitors high volume, high risk areas of care delivery in order to make corrective action plans.

- **Positive team climate within facilities**—Undoubtedly the single greatest benefit to the institutions in this model is the positive team environment that it creates. When staff are clear about their roles and understand that cooperation and teamwork are essential, the public gets a great product for its tax dollar. We are able to provide safe, secure, humane housing of inmates in facilities that are commanded by a Sheriff's Office leader but managed by a professional, multi-disciplinary team. This arrangement results in a strong mission of safety for all staff and inmates based on mutual respect and the understanding of professional roles and responsibilities.

Partnership and Pride

The trend discussed nationally in all corrections and corrections health publications is the public health and custody partnership that must occur in all our facilities. It takes "us all" to run safe jails and manage the multiple needs of the inmates coming to us. Working together has brought teamwork and pride to those working in the Multnomah County Jail system. ■

For more information:

Tim Moore
Chief Deputy
Multnomah County
Sheriff's Office
501 SE Hawthorne Blvd.
Portland, Oregon 97214
(503) 988-4409
timothy.moore@mcso.us

Strategic Planning: A 10-Step Approach

This article gives an overview of how the Prince George's County Department of Corrections built a successful strategic management team. It also summarizes the basic steps involved in developing an ongoing strategic management process. The strategic leadership process summarized here began in 1997 and continues as an ongoing management team process.

Many organizations purport to have a strategic management plan (SMP), but most do not have an ongoing strategic management process that is guided by an explicit and achievable plan. From an organizational perspective, strategic planning is a systematic process that enables management to clearly define and achieve its goals. Strategic management allows for strategic planning to unfold, and it guides the organization through responsible, accountable, and measurable management techniques.

Through our experience in the department, we have determined that there are 10 general areas that strategic management should consider. We also recommend using a 10-step approach to addressing those general areas of concern.

The 10 general areas are:

- 1) Administration
- 2) Operations
- 3) Risk Management
- 4) Technology/Information Systems
- 5) Training
- 6) Customer Services/Public Relations
- 7) Current Trends
- 8) Political Realities
- 9) Assessment
- 10) Timely Intervention (action plans, implementation).

by
Barry L. Stanton,
Director,
Prince George's
County
Department of
Corrections,
Upper Marlboro,
Maryland
and
Dr. B. Jasmine
Moultrié-Fierro

The “10-Step Approach” includes the following:

- 1) Assess the organization's operations.
- 2) Determine the needs of the agency/department.
- 3) Establish a clear vision.
- 4) Select a strategic management team, receive input, and evaluate shared ideas.
- 5) Agree on the critical challenges faced by the agency/department to be addressed.
- 6) Develop action steps.
- 7) Identify available resources.
- 8) Establish timelines for implementation.
- 9) Develop assessment tools for the evaluative process to determine goal achievement.
- 10) Implement an ongoing strategic management process.

Background

In November 1997, Barry L. Stanton became the Director of the Department of Corrections for Prince George's County, Maryland, and was charged with the task of improving overall service delivery and operations for the agency. Many of the operational issues seemed insurmountable when Director Stanton arrived. Fiscal constraints, apparent complacency, and lackluster morale seriously undermined operations. There appeared to be a general apathy in supervisors' responses to problems, a resistance to change, and a general lack of interest in employee development. Director Stanton's managerial challenges were clear.

Prince George's County is located in the center of the state of Maryland, with the affluent community of Upper Marlboro the county seat; African Americans comprise two-thirds of the more than 805,000 residents. The Department of Corrections facility is a multi-level jail housing a mixed inmate population of juveniles, females, and adult males. The average inmate population is 1,164, down by approximately 300 inmates since 1997. Slightly over half of the inmates have been committed on felony charges; the average length of stay is 37.8 days. The department has 538 employees—402 sworn correctional officers and 136 civilian employees.

During Director Stanton's first year, we recognized an immediate need to improve operational service delivery through more productive employee output. In addition, there was a need to provide a concise roadmap for the future direction of the department by developing achievable visions and goals. In response, we developed an organizational process that creates the basic foundation for producing a useful strategic management plan. We also implemented the strategic management process that is highlighted in this article.

Phase 1: Assessing the Situation

- *Step One: Assess the organization's operations.*
- *Step Two: Determine the needs of the agency/department.*
- *Step Three: Establish a clear vision.*

We recognized that implementing some strategic management and planning processes could address many troubling organizational and operational issues. We began outlining a variety of visionary ideas and then identified the tasks that needed to be performed to improve operations and increase overall department morale. We then collected relevant information about the department and similar correctional facilities from various sources, including county employees, community leaders, peers, similar organizations, and state and local officials.

After compiling and analyzing the information, we confirmed that the Prince George's Department of Corrections needed a strategic management plan.

Phase II: Developing a Team

- *Step Four: Select a strategic management team, receive input, and evaluate shared ideas.*

Originally, about 15 employees were selected to participate in the SMP team. Selections were based on employees' interest and their ability to analyze; to share and integrate information; to interact on a team; to think "out of the box"; to voice strongly held opinions in a diplomatic manner; to follow directions; to work with competing project demands; and to deliver a quality product on time. We also considered employees' years of experience and level of responsibility in the department. We then chose a chairperson to help coordinate the strategic management planning process.

At the kick-off meeting, teams were familiarized with the purpose of strategic management planning as well as the commitment required to participate. The ground rules for working collectively throughout the entire SMP process were developed at this initial meeting.

Phase III: Orientation, Training, and Brainstorming

- *Step Five: Agree on the critical challenges faced by the agency/department to be addressed.*
- *Step Six: Develop action steps.*
- *Step Seven: Identify available resources.*
- *Step Eight: Establish timelines for implementation.*

Phase III of the initial strategic planning process consisted of a series of orientation meetings, which provided SMP training and offered an opportunity for brainstorming the critical issues facing the department. The four training modules covered an overview of the purpose and usefulness of strategic management

and planning, definitions relevant to strategic management processes, a discussion of who and what is involved in developing an achievable plan, SMP templates for developing the SMP document, and timelines for completing the first strategic management plan within 6 months.

The SMP team met at least weekly during the first 6 months to develop the department's first strategic planning document. Initially, the meetings focused on brainstorming sessions to identify the most critical challenges facing the department, their impact if unaddressed, and what resources were available to respond successfully to each critical issue. In addition, the team also developed the department's mission statement, guiding principles, and other administrative goals for the coming year. The team also agreed to develop goals on an annual basis and to update or modify goals annually.

The SMP team decided to address some important challenges, such as overtime issues, staffing, training, and employee accountability. The SMP team was divided into subgroups, with each subgroup assigned one topic. The group was to research the topic and present a written document that offered a resolution to the problem, including resources. Each subgroup's team leader was responsible for reporting the group's progress during every SMP team meeting. Each subgroup was also charged with submitting its final written drafts to the director in accordance with the agreed-on timeline. The Director was responsible for working directly with the SMP facilitator to pull together the strategic planning document.

The entire SMP team met for a final review of the document during an offsite, all-day retreat. Once the final stamp of approval was given by the SMP team, the facilitator worked with Director Stanton and his staff to produce the final document, and the director then gave final approval for the document's production and distribution.

Phase IV: Implementation, Evaluation, and Reporting

- *Step Nine: Develop assessment tools for the evaluative process and to determine goal achievement.*

The first strategic management plan was submitted to the Prince George's County Executive, who approved it for implementation. The approved document was distributed to the Corrections Department's managers, who were directed to present it to key staff and assign responsibility for its timely implementation.

An implementation team, comprised of the SMP chairperson and five other SMP members, is currently responsible for ensuring that the key action steps presented in the SMP document are fully implemented, evaluated for goal achievement, and modified as needed. Each quarter, the team submits written SMP updates, including recommendations for needed changes, to the director. Evaluation is based on the degree of successful implementation of the actions related to each goal.

Phase V: Continuation of the SMP Process

- *Step Ten: Implement an ongoing strategic management process.*

Over the years, the SMP team was expanded to about 40 department employees in top and mid-level management positions. Although managers were the principle SMP team participants, they were responsible for gathering input from their subordinates throughout the SMP process.

Director Stanton participated in all but one of the SMP team meetings. This was critical to the success of the SMP process. The director's involvement should be an important consideration whenever an organization undertakes strategic planning. When the organization's leader fully participates as a "change agent" throughout the process, employees are more likely to buy in and participate in organizational change than if the process occurs without the top leader demonstrating full and visible support.

Today, the Department of Corrections continues to evaluate and update its SMP document annually to coincide with the department's budget process. The SMP document precedes the submission of the department's annual proposed budget, thus facilitating a smoother budget approval process. Notably, the department continues to receive most, if not all, of its requested budgetary funding—primarily as a result of the presentation and clarity of its strategic management plan.

Throughout the entire strategic planning and management process, adjustments must be made to the plan and to the department's operations. The SMP team chair is responsible for ensuring that as new members are added to the SMP team, they are fully oriented to the SMP process and the expectations for full participation. Review orientations are given at each of the annual SMP kick-off meetings, through in-service training programs, and at the correctional officers' training academy.

Identifying needed changes is simplified when a systematic planning process is used. Managers and supervisors are encouraged to use strategic management skills and techniques to solve the critical challenges they face. They are also encouraged to use the department's training unit to deliver updated, current information that will improve the skills and productivity of the entire staff.

Finally, managers and supervisors in leadership roles are encouraged to use the 10-step systematic approach described here to find viable, strategic leadership solutions to critical organizational challenges. As a by-product of the process, the organization benefits significantly from employees' increased understanding of the organization's vision, mission, goals, expectations, congruency of outcomes, and team cohesion.

Strategic Management Planning: Key Principles

It is important to remember the following points about strategic planning:

- Strategic planning is a systematic, fluid, dynamic approach that is evaluated, modified, and updated at least annually.
- Strategic planning is a useful management tool that guides the agency toward successfully achieving its goals.
- Strategic management planning helps to justify the use of and requests for resources, and thus must be integrated into the annual budget process.
- The strategic management plan must receive final authorization from appointing authorities prior to being implemented.
- Strategic management planning must flow through a complete cycle (from development to implementation to evaluation).
- Strategic management planning must include measurable, realistic goals.
- Strategic management planning builds teamwork and consensus through a collaborative process.
- Strategic management planning changes and improves systems, organizational behavior, expectations, and organizational culture.
- Employees must be part of the strategic planning process and kept informed regularly as changes occur in the plan and in their work situation.
- The selected strategic management team must have leadership skills, experience, interest, tenacity, and focus. ■

Barry L. Stanton is the Director of the Prince George's County Department of Corrections, and has served in leadership/management positions in the criminal justice field for over 24 years. Dr. B. Jasmine Moultrié Fierro, a management consultant specializing in organizational interventions and change management, has over 23 years' experience in providing strategic leadership solutions and developing organizational restructuring processes. She worked with Director Stanton as his executive facilitator for more than 6 years. Together, they worked to restructure the Department of Corrections through several years of strategic interventions.

For more information:

Barry L. Stanton
Director
Prince George's County
Dept. of Corrections
13400 Dille Drive
Upper Marlboro,
Maryland 20772
(301) 952-7014
blstanton@co.pg.md.us