



FY 2016-2017

COMMUNITY JUSTICE PLAN

FOR

WICHITA COUNTY

COMMUNITY SUPERVISION AND CORRECTIONS DEPARTMENT

JUDICIAL ENDORSEMENT(S)

Robert P. Brotherton

Name (type or print)

Signature of Administrative Judge/02/18/2014

(Designated to represent District and County Court-at-Law Judges in Judicial District)

or

Include Signatures and Signature Dates of all District and
County Court-at-Law Judges in Judicial District

COMMITMENT TO PLAN

The Community Justice Council and Community Supervision and Corrections Department are committed to our Community Justice Plan and the use of alternative and intermediate sanctions as set forth in the plan. We are dedicated to the protection of the community and the (re)habilitation of the offender, and we support the full use of progressive sanctions which will assist us in achieving those results.

Community Justice Council

Signature of Community Justice Council Chairperson/02/18/2014

Judge Robert P. Brotherton

Title (if elected/appointed state/county/city/school district official)

P.O. Box 179

Mailing Address

Wichita Falls, Texas 76307

City/ Zip Code

940-766-8213

(Area Code) Daytime Telephone

Wichita County CSCD

Signature of Director/02/18/2014

**LIST OF COMMUNITY JUSTICE COUNCIL MEETING AND MEMBERS CONTACT
INFORMATION:**

Texas Government Code, § 76.003 and 509.007 and Texas Administrative Code, § 163.25

MEETING HELD ON THE FOLLOWING DATE TO APPROVE -THIS CJP:

Meeting held on February 18, 2014 in the 30th District Courtroom chaired by Judge Robert Brotherton.

MEMBER'S NAME: JUDGE ROBERT BROTHERTON, CHAIRMAN

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS, 76301

MEMBER'S NAME: JUDGE GREG KING

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: JUDGE GARY BUTLER

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: JUDGE WOODY GOSSOM

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: MAUREEN SHELTON, DISTRICT ATTORNEY

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: SHERIFF DAVID DUKE

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: JIM RASMUSSEN, PUBLIC DEFENDER

MAILING ADDRESS: 600 SCOTT ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: MITIZI BROTHERTON, COURT ADMINISTRATOR

MAILING ADDRESS: 900 SEVENTH ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: SENATOR CRAIG ESTES

MAILING ADDRESS: 2525 KELL STE. 302 WICHITA FALLS, TEXAS 76308

MEMBER'S NAME: REPRESENTATIVE JAMES FRANK

MAILING ADDRESS: 1206 HATTON RD. WICHITA FALLS, TEXAS 76302

MEMBER'S NAME: CURTIS PITCHFORD, PAROLE

MAILING ADDRESS: 3100 FIFTH ST., STE. 118 WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: RODDY ADKINS, EXECUTIVE DIRECTOR HFC

MAILING ADDRESS: 500 BROAD ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: LINDA KALSKI

MAILING ADDRESS: 4500 HOLLANDALE WICHITA FALLS, TEXAS 76308

MEMBER'S NAME: TED PADDOCK

MAILING ADDRESS: 3400 TAFT BLVD. WICHITA FALLS, TEXAS 76308

MEMBER'S NAME: MANUEL BORREGO, CHIEF OF POLICE

MAILING ADDRESS: 610 HOLLIDAY ST. WICHITA FALLS, TEXAS 76301

MEMBER'S NAME: DR. JOHN FROSSARD, WFISD SUPERINTENDENT

MAILING ADDRESS: P.O. BOX 97533 WICHITA FALLS, TEXAS 76307

MEMBER'S NAME: MAYOR GLEN BARHAM

MAILING ADDRESS: P.O. BOX 1431 WICHITA FALLS, TEXAS 76307

MEMBER'S NAME: KIRK WOLFE, JUVENILE PROBATION

MAILING ADDRESS: P.O. BOX 1470 WICHITA FALLS, TEXAS 76307

MEMBER'S NAME: MARGARET ROGERS

MAILING ADDRESS: P.O. BOX 179 WICHITA FALLS, TEXAS 76307

MISSION STATEMENT

The Wichita County Adult Probation Department is committed to making the communities of Wichita County safe by encouraging offenders on community supervision to make amends to the community and victims, by motivating offenders to change their lives and be law abiding and by supervising offenders to comply with the conditions of probation.

LONG RANGE GOALS

1. The Wichita County CSCD will continue to implement “Evidence Based Practices” to maximize the use of funding and resources in the supervision of individuals placed on community supervision.
2. The Wichita County CSCD will focus on caseloads addressing high risk and high need offenders on community supervision and will continue to provide intensive supervision to sex offenders, felony drug and alcohol offenders and offender with identified mental illnesses.
3. The Wichita County CSCD will continue to seek to identify cognitive based programs that utilize evidenced based practices in the local community and increase referrals to these programs.
4. The Wichita County CSCD will continue to implement “Motivation Interviewing” to focus on the use of officer skills to motivate offender change.

PROGRESSIVE SANCTIONS COMPONENTS IN THE CJP

1. An evidence-based assessment process that includes risk and needs assessment instruments and clinical assessments that support conditions of community supervision or case management strategies.
The Wichita County CSCD uses validated instruments to assess offender risk and needs. Reference 3.01 of the Wichita County CSCD Policy and Procedure. In addition to these validated instruments the Mental Health grant caseload uses a mental health assessment to determine eligibility per grant conditions. Reference section 12.07 of the Wichita County CSCD Policy and Procedure pages 1 and 2.
2. Reduced and specialized caseloads for supervision officers, which may include electronic monitoring or substance abuse testing of defendants.
Wichita County CSCD has four specialized caseloads supervised by individual officers. Reference in the Wichita County CSCD Policy and Procedure section 12.05 for the Sex Offender caseload; section 12.06 for the Substance Abuse caseload which includes a Felony DWI caseload and SAFFP caseload; section 12.07, page 3 for the Mental Health caseload.
3. The creation, designation, and fiscal support of courts and associated infrastructure necessary to increase judicial oversight and reduce revocations.
The Wichita County CSCD has an agreement with the courts through a judicial review process to address collection of delinquent fees. Reference in the Wichita County CSCD Policy and Procedure section 3.14; the department uses progressive sanctions and incentives approved by the courts. Reference in the Wichita County CSCD Policy and Procedure section 3.09-A.
4. Increased monitoring and field contact by supervision officers.
The Wichita County CSCD has specific office and field contacts requirements for all caseloads based on risk and needs. Reference in the Wichita County CSCD Policy and Procedure section 3.03, page 2 and 3. In addition the Mental Health grant caseload has specific supervision requirements per grant

requirements. Reference section 12.07, pages 3 and 4 of the Wichita County CSCD Policy and Procedure.

5. Shortened terms of community supervision, with increased supervision during the earliest part of the term.

The Wichita County CSCD through the use of risk/needs assessments and reassessments and supervision plans differentiates supervision of offenders. Reference section 3.01 and section 2.02 of the Wichita County CSCD Policy and Procedure. In addition the Mental Health grant caseload has a specific plan to address this issue. Reference section 12.07, pages 5 and 6 of the Wichita County CSCD Policy and Procedure.

6. Strategies that reduce the number of technical violations.

The Wichita County CSCD has strategies to reduce the number of technical violations resulting in revocations. Reference section 3.09 and 3.09-A of the Wichita County CSCD Policy and Procedure. In addition the Mental Health grant caseload has a specific plan to address the issue. Reference 12.07, page 4 of the Wichita County CSCD Policy and Procedure.

7. Improved coordination between courts and departments to provide early assessment of defendant needs at the outset of supervision.

Reference section 5.01 of the Wichita County CSCD Policy and Procedure.

8. Graduated sanctions and incentives, offered to a defendant by both the departments and courts served by the department.

The Wichita County CSCD uses progressive sanctions and incentives approved by the courts. Reference section 3.09 and 3.09-A in the Wichita County CSCD Policy and Procedure.

9. The use of inpatient and outpatient treatment options, including substance abuse treatment, mental health treatment, and cognitive and behavioral programs for defendants.

The Wichita County CSCD uses available treatment resources. Reference the Wichita County CSCD Policy and Procedure sections 3.07; 3.07-A; 3.07-B; 3.07-C; 3.07-D. In addition the Mental Health grant caseload has a specific plan to address the issue. Reference section 12.07 of the Wichita County CSCD Policy and Procedure.

10. The use of intermediate sanctions facilities.

The Wichita County CSCD aggressively utilizes ISF placements. Reference the Wichita County CSCD Policy and Procedure sections 3.10 and 3.09-A.

11. The use of community corrections beds.

The Wichita County CSCD utilizes various types of community correction beds/treatment facilities. Reference the Wichita County CSCD Policy and Procedure sections 3.10 and 3.09A.

12. Early termination strategies and capabilities.

The Wichita County CSCD implements legislative mandates regarding early terminations and time credits. Reference the Wichita County CSCD Policy and Procedure sections 3.20 and 3.20-A.

13. Gang intervention strategies.

The Wichita County CSCD does not have a gang intervention strategy.

14. Designation of faith-based community coordinators who will develop faith-based resources, including a mentoring program.

The Wichita County CSCD does not have a faith-based community coordinator.

PROGRESSIVE SANCTIONS MODEL

Progressive Sanctions are structured, incremental responses to technical violations by offenders on community supervision. The use of progressive sanctions used in a timely manner holds the probationer accountable and encourages change.

The goal of the progressive sanction plan is to:

- a) Maintain public protection and foster rehabilitation by holding probationers accountable for their behavior;
- b) Ensure that probationers face uniform and consistent sanctions that correspond to the seriousness of behavior;
- c) Permit flexibility in the response to the probationer's behavior to the extent allowed by law;
- d) Encourage the use of creative sanctions in appropriate situations; and
- e) Improve community supervision planning and resource allocation.

To use the plan, a probation officer matches the level of the violation to the corresponding level of sanction. The officer may choose one or more of several sanction options at each level. The officer uses his/her best judgment in applying the appropriate sanction(s). Officers may enhance violations and sanctions to a higher level due to:

- a) The repetition of the violation;
- b) The supervision risk level of the offender;
- c) The offender being supervised on a specialized caseload.

Incentives are structured, incremental responses to compliant probationer behavior on supervision. The incentives used in a timely manner reward offenders for compliance and encourage offender change. The goal of incentives is to maintain public protection and foster offender rehabilitation.

SANCTIONS

Level 1 Sanctions	Written or Verbal Reprimand
	Letter of apology from the defendant to the officer or Judge
	Ineligible for a travel permit for 45 days
	Submit job search documentation
	Participate in AA/NA
	Attend an education class
	Increased Reporting
Level 2 Sanctions	Increased Reporting
	Ineligible for a travel permit for 60 days
	Submit a budget and payment plan to the officer
	Letter of apology from the defendant to the Judge
	Outpatient substance abuse treatment
	Additional CSR hours
	Attend and complete job education program at TWC, DARS, or Region IX
	Submit job search documentation
	Participate in AA/NA
	Attend an education class
	Increased AA/NA attendance
Increased UA's	
Submit a copy of most recent filed income tax return to officer	
Level 3 Sanctions	Weekends in jail
	28 day in-patient substance abuse treatment
	Submit a copy of most recent filed income tax return to officer
	Attend an education class
	Ineligible for a travel permit for 90 days
	Increased Reporting
	Administrative Hearing with supervisor
	Outpatient substance abuse treatment
	Letter from supervisor
	Electronic Monitoring
	SCRAM
	Submit job search documentation
	In-Hom Alcohol Detection Device
	Attend 90 AA/NA meetings in 90 days
Deny computer access (sex offenders)	
Participate in SOT study group (sex offenders)	
Return to a specialized program operated by the CSCD	
Level 4 Sanctions	Apply additional terms of the Agreed Modification/update Agreed Modification
	Administrative Hearing with supervisor
	Ineligible for a travel permit for 120 days
	Electronic Monitoring
	SCRAM
	Jail time
	State Contracted ISF
	In-Hom Alcohol Detection Device
	TTC Relapse (SAFPP caseload)
	Re-enter the Sex Offender Treatment program operated by the CSCD (sex offender)
	Suspension of Chaperone Program (sex offenders)
Polygraph (sex offenders)	
Judicial Review	
Complete an Agreed Modification with the defendant	
Level 5 Sanctions	File Violation Report recommending:
	-extension of probation and case be adjudicated (if deferred)
	-30 - 180 days in jail
	-CCF:
	restitution center
	intermediate sanctions facility
	SATF (substance abuse treatment facility)
	-SAFPP (substance abuse felony punishment facility)
	-SAFPP Relapse
-Shock Probation	
-Boot Camp	

TABLE I VIOLATIONS

	High Risk Probationer				Low Risk Probationer			
	1st	2nd	3rd	4th	1st	2nd	3rd	4th
Failure to pay fees (i.e., fine, court costs, probation fees, special program fees, restitution)	1	2	3	4	1	2	3	4
Failure to work community service hours	1	2	3	4	1	2	3	4
Failure to attend Alcohol/Drug Education Classes	1	2	3	4	1	2	3	4
Failure to work suitable employment (when applicable)	1	2	3	4	1	2	3	4
Failure to support Defendants	1	2	3	4	1	2	3	4
Failure to attend and complete court ordered classes (i.e., Anger Management, Cognitive Class, VIP, GED, etc)	1	2	3	4	1	2	3	4
Failure to designate your current place of residence	1	2	3	4	1	2	3	4
Failure to report for monthly Office Visit	1	2	3	4	1	2	3	4
Buying, selling, possessing, or consuming an alcoholic beverage or any substance for the purpose of intoxication	1	2	3	4	1	2	3	4
Entering an establishment where alcoholic beverages are sold	1	2	3	4	1	2	3	4
Failure to submit to a Breath analysis or Urinalysis	1	2	3	4	1	2	3	4
Positive Urinalysis or BAC	1	2	3	4	1	2	3	4
Failure to avoid persons/places of disreputable character	1	2	3	4	1	2	3	4
Confirmed non-compliance with Ignition Interlock	1	2	3	4	1	2	3	4
Failure to install Ignition Interlock, Electronic Monitoring or SCRAM	1	2	3	4	1	2	3	4
Non-compliance with EM or GPS	1	2	3	4	1	2	3	4
Failure to avoid contact with the victim in probated case	1	2	3	4	1	2	3	4
Possession of a firearm or prohibited weapon	1	2	3	4	1	2	3	4
Failure to report at Jail Commitment or Community Corrections Facility	4	5			4	5		

Treatment Condition-Violation: Actively in treatment, awaiting placement, or in aftercare

Failure to attend AA/NA meeting	2	3	4	5	2	3	4	5
Failure to participate in assessment and testing	2	3	4	5	2	3	4	5
Positive Urinalysis or BAC as treatment requirement	2	3	4	5	2	3	4	5
Failure to attend VIP as directed	2	3	4	5	2	3	4	5
Failure to participate and complete out patient counseling	2	3	4	5	2	3	4	5
Failure to participate in aftercare program	2	3	4	5	2	3	4	5
Failure to participate and complete in-patient treatment	3	4	5		3	4	5	
Termination from CCF Program due to non-compliance	5				5			

TABLE II VIOLATIONS

	Sex Offender				DWI Probationer				SAFPF Probationer			
	1st	2nd	3rd	4th	1st	2nd	3rd	4th	1st	2nd	3rd	4th
Failure to pay fees (i.e., fine, court costs, probation fees, special program fees, restitution)	1	2	3	4	1	2	3	4	1	2	3	4
Failure to work community service hours	1	2	3	4	1	2	3	4	1	2	3	4
Failure to attend Alcohol/Drug Education Classes	1	2	3	4	2	3	4		2	3	4	
Failure to work suitable employment (when applicable)	1	2	3	4	1	2	3	4	1	2	3	4
Failure to support Dependents	1	2	3	4	1	2	3	4	1	2	3	4
Failure to attend and complete Court ordered classes (i.e., Anger Management, Cognitive Class, VIP, GED, etc.)	2	3	4		2	3	4		2	3	4	
Failure to designate your current place of residence	2	3	4		1	2	3	4	1	2	3	4
Failure to report for monthly Office Visit	2	3	4		2	3	4		2	3	4	
Buying, selling, possessing, or consuming an alcoholic beverage or any substance for the purpose of intoxication	1	2	3	4	2	3	4		2	3	4	
Entering an establishment where alcoholic beverages are sold	1	2	3	4	2	3	4		2	3	4	
Failure to submit to a Breath analysis or Urinalysis	2	3	4		2	3	4		2	3	4	
Positive Urinalysis or BAC	2	3	4		2	3	4		2	3	4	
Failure to avoid persons/places of disreputable character	1	2	3	4	1	2	3	4	1	2	3	4
Failure to attend/complete Specialized Program/Termination from Specialized Program (i.e., Sex Offender, DWI, SAFPF, MHMR)	5				5				5			
Confirmed non-compliance with Ignition Interlock	1	2	3	4	2	3	4		2	3	4	
Failure to participate in assessment and testing	1	2	3	4	1	2	3	4	1	2	3	4
Failure to install Ignition Interlock, Electronic Monitoring or SCRAM	2	3	4		2	3	4		2	3	4	
Confirmed non-compliance with SCRAM	1	2	3	4	2	3	4		2	3	4	
Non-compliance with EM or GPS	2	3	4		1	2	3	4	1	2	3	4
Non-compliance with sex offender computer monitoring	2	3	4									
Failure to comply with no contact clause	1	2	2	4	1	2	3	4	1	2	3	4
Failure to follow special Sex Offender rules or conditions	2	3	4									
Failure to stay away from child safety zone	2	3	4									
Possession of a firearm or prohibited weapon	1	2	3	4	1	2	3	4	1	2	3	4
Failure to report at Jail Commitment or Community Corrections Facility	4	5			4	5			4	5		

Treatment Condition-Violation: Actively in treatment, awaiting placement, or in aftercare

Failure to attend AA/NA meeting	1	2	3	4	3	4			3	4		
Positive Urinalysis or BAC as treatment requirement	2	3	4		3	4			3	4		
Failure to participate and complete out patient counseling	2	3	4		3	4						
Failure to participate in aftercare program	2	3	4		3	4			4			
Failure to participate and complete in-patient treatment					4							
Termination from CCF Program due to non-compliance	5				5				5			

Graduated Incentives Table		
Qualifiers	Incentives	Explanation
Obtain and maintain steady, consistent employment for 3 months	Verbal praise	Def maintains employment for 3 consecutive months and provides check stubs
Obtain and maintain steady, consistent employment for 6 months	Certificate/recognition from supervisor	Def maintains employment for 6 consecutive months and provides check stubs
Obtain and main steady, consistent employment for 9 months	5 CSR hours	Def maintains employment for 9 consecutive months and provides check stubs-this incentive is only given out once throughout the probation
Consistent Reporting for office visits for 3 months	Verbal praise	Def must report as scheduled
Consistent Reporting for office visits for 6 months	Recognition from supervisor	Def must report as scheduled
Consistent Reporting for office visits for 9 months	Recognition from director	Def must report as scheduled
Consistent Reporting for office visits for 1 yr	5 CSR hours	Def must report as scheduled-this incentive is only given out once throughout the probation
Consistent Monthly Payments for 3 months	Verbal praise	Def has to make a payment EACH month for 3 straight months
Consistent Monthly Payments for 6 months	Recognition from supervisor	Def has to make a payment EACH month for 6 straight months
Consistent Monthly Payments for 9 months	Recognition from director	Def has to make a payment EACH month for 9 straight months
Consistent Monthly Payments for 1 yr	5 CSR hours	Def is current on all Court ordered fees after 1 year-this incentive is only given out once throughout the probation
Completion of Court ordered CSR hours	Verbal Praise and letter of completion	
Completion of Court ordered classes (CCT, Anger Management, Parenting, Theft, VIMP, Life Skills, Employment Class, Marijuana, Shoplifting)	10 CSR hours	Originally ordered from Court-must be completed within the time frame given by the Court
Completion of <u>Non Court ordered Classes</u> (see above classes plus: GED, Job Corp, substance abuse treatment)	15 CSR hours	Classes def has completed on their own, without a Court order, an Agreed Modification/Amendment
Initially Court Ordered Treatment Programs	Certificate/recognition from supervisor	Def needs to be in strict compliance with supervision and have no positive UA's for alcohol and/or drug for 3 consecutive months
Initially Court Ordered Treatment Programs	Certificate/recognition from director	Def needs to be in strict compliance with supervision and have no positive UA's for alcohol and/or drug for 6 consecutive months
Initially Court Ordered Treatment Programs	20 CSR hours	Def needs to be in strict compliance with supervision and have no positive UA's for alcohol and/or drug for 1 year
Specialized Caseload:		
Completion of SCA	Certificate from Judge, Transition Phase	
Completion of SAFPF and the continuum of care treatment plan	Certificate from Judge, Transition Phase	
Sex Offender: Passing a maintenance Polygraph	10 CSR hours	Has to pass with no admissions

TEXAS GOVERNMENT CODE 509.007

Texas Government Code, Section 509.007, is amended to read as follows:

(b) A community justice plan required under this section **must include:**

a separate description of any programs or services the CSCD intends to provide to

1. enhance public safety;
2. reduce recidivism;
3. strengthen the investigation and prosecution of criminal offenses;
4. improve programs and services available to victims of crime; and,
5. increase the amount of restitution collected from persons supervised by the CSCD.

Only include new programs that meet all five elements.

Not applicable.

DRAFT

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 006

PROGRAM TITLE: PRE-TRIAL DIVERSION

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
	Total \$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
PTR

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Telephone: 940-766-8213
Fax: 940-766-8190
E-mail: margaret.rogers@co.wichita.tx.us

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 009

PROGRAM TITLE: VICTIM SERVICES

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Total	\$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
YSV

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Telephone: 940-766-8213
Fax: 940-766-8109
E-mail: margaret.rogers@co.wichita.tx.us

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 004

PROGRAM TITLE: SEX OFFENDER SUPERVISION PROGRAM

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Total	\$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
SCP X

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Phone: 940-766-8213
Fax: 940-766-8109
E-mail: margaret.rogers@co.wichita.tx.us

Proposal Element 2: PROBLEM/NEED DATA

- Provide information to justify the need for this program in your jurisdiction.
The Wichita County Adult Probation Department began a sex offender caseload and contracted for sex offender treatment in 1988. This program has provided the courts with an alternative to incarceration for a high risk offender. Through intensive supervision, the program has been able to protect the community and with quality treatment, has been able to reduce recidivism.
- What **other services**, that meet this need, are available to the offender in this jurisdiction?
There is no other sex offender supervision or sex offender treatment program available to sex offenders on community supervision within the jurisdiction of Wichita County.

CHOICE OF PROGRAM DESIGN

The program design is in part based on the TDCJ/CJAD Monograph Sex Offender Treatment (Palmer 1995) and in part from program designs from other successful treatment programs operated by other probation departments in the state. The program uses intensive contact with the offender in conjunction with a treatment program utilizing counselors certified by the Council of Sex Offender Treatment Providers. The officer and the treatment provider work in tandem. The sex offender is required to achieve compliance with the terms and conditions of probation and with the completion of the treatment program. Program plans and supervision plans set out to measurable goals and objectives for each offender. Treatment Team Meetings allow the supervision officer and the treatment provider to measure the success of the offender in meeting these goals and objectives. Successful discharge from the program only occurs when the offender has completed both supervision plan and the treatment plan and demonstrated a period of successful transition.

Proposal Element 3: TARGET POPULATION

- Felony only Misdemeanor only Both
- Male only Female only Both
- Age restriction? No Yes
If yes, describe: Must be a minimum of 17 years of age
- Is this program designed to serve any specific cultural or ethnic group? No Yes
If yes, describe. _____
- Is this program designed to serve participants with mental health issues? No Yes
- Are participants who are not on community supervision accepted in this program? (e.g. pre-trial, pre-trial bond, jail inmates, state jail confinees, family members, or others) No Yes
If yes, identify. _____

Proposal Element 4: PROGRAM DESCRIPTION AND PROCESS

PROGRAM DESCRIPTION

The program is designed to provide intensive supervision to sex offenders ordered to participate in a Sex Offender Treatment Program. The supervision officer is required to make a minimum of three (3) face-to-face contacts with the offender each month, of which one must be in the field. The department uses sex offender treatment providers who are certified by the Council on Sex Offender Treatment Providers to operate a program addressing offender change. Offenders are required to pay all costs related to sex offender treatment. The supervision officer works in conjunction with law enforcement agencies in Wichita County to ensure offenders register as sex offenders as required by law.

PARTICIPANT ACTIVITIES

Participants are required to attend weekly group sessions and monthly individual sessions with the treatment provider. The participant is responsible for all costs related to treatment including polygraph exams. The participants are required to report to the supervision officer two times a month for an office visit and the supervising officer makes a field visit once a month. Participants are required to complete assignments in the treatment handbook and successfully pass routine polygraph examinations.

PROGRAM STAFF AND ACTIVITIES

The Wichita County CSCD assigns a full time CSO to supervise this caseload. The office is required to have a minimum of three (3) face-to-face contacts with each offender each month. At least one face-to-face contact must be in the field. The officer is also required to routinely monitor sex offender treatment by “sitting in” on treatment sessions to monitor offender issues and program delivery.

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 005

PROGRAM TITLE: SUBSTANCE ABUSE SUPERVISION PROGRAM

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
	Total \$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
SCP S

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Telephone: 940-766-8213
Fax: 940-766-8109
E-mail: margaret.rogers@co.wichita.tx.us

Proposal Element 2: PROBLEM/NEED DATA

- Provide information to justify the need for this program in your jurisdiction. Wichita County has a high number of substance abuse related cases processed through the courts resulting in community supervision. Consequently, the Wichita County CSCD has two high risk/specialized substance abuse caseloads to supervise these offenders if placed on probation. The goal of the caseloads is to increase offender success in obtaining and maintaining sobriety through intensive supervision and targeted treatment.
- What **other services**, that meet this need, are available to the offender in this jurisdiction? Wichita County has two out-patient substance abuse treatment programs available to work with substance abuse offenders: Helen Farabee Intensive Outpatient Treatment and Serenity House. In addition, SAGE is a contract vendor with TDCJ offering SAPFP aftercare treatment. Both Helen Farabee and Serenity House work in conjunction with the Wichita County CSCD to offer out-patient services to those offenders supervised on the felony DWI caseload. SAGE offers required aftercare treatment to offenders returning from SAPFP while supervised by the Wichita County CSCD.

CHOICE OF PROGRAM DESIGN

Based on the 1998 report “Substance Use Among Male Inmates” those incarcerated reported a higher rate of substance addiction than the general population. Other studies document that many people with drug and alcohol addictions who do not receive treatment fail to achieve sobriety. Treatment is necessary to change addiction. In “What Works” literature a treatment program should include a cognitive-behavioral component to increase the probability of success. Most noteworthy is that those in “aftercare” are more successful in abstinence than those who do not receive aftercare as part of treatment. The SAFPF part of the program follows the SAFPF requirements in its design for treatment by providing intensive and supportive aftercare through outpatient treatment. The Multiple DWI program is designed as an intensive supervision program for repeat DWI offenders using intensive outpatient substance abuse treatment, AA, drug testing and sanctions.

Proposal Element 3: TARGET POPULATION

- Felony only Misdemeanor only Both
- Male only Female only Both
- Age restriction? No Yes
If yes, describe: Must be a minimum of 17 years of age
- Is this program designed to serve any specific cultural or ethnic group? No Yes
If yes, describe: _____
- Is this program designed to serve participants with mental health issues? No Yes
- Are participants who are not on community supervision accepted in this program? (e.g. pre-trial, pre-trial bond, jail inmates, state jail confinees, family members, or others) No Yes
If yes, identify. _____

Proposal Element 4: PROGRAM DESCRIPTION AND PROCESS

PROGRAM DESCRIPTION

The Wichita County CSCD designed the program to address two types of referrals from the courts: 1) those ordered by the court to SAFPF, and 2) those who are multiple DWI offenders. The program is designed to provide intensive supervision to those offenders placed in either program by a minimum of three (3) face-to-face contacts per month. In addition the program provides for intensive outpatient substance abuse treatment for each offender in the program. Officers assigned to these caseloads are provided additional training in supervision, substance abuse issues and treatment.

PARTICIPANT ACTIVITIES

SAFPF: Upon the offender's successful discharge from SAFPF and the TTC, the participant is required to attend two hours of group counseling per week and one individual treatment meeting per month for a nine (9) month period. The offender is also required to participate in 3 AA/NA meetings per week, attend two office visits per month and submit, at a minimum to a drug test per month. The offender is required to have a written sobriety plan within six (6) months in aftercare treatment.

DWI: the offender must complete within one year of placement in the program the following: successfully complete an outpatient substance abuse treatment program, complete the DWI Intervention, attend 3 AA meetings per week, submit to a minimum of one drug test per month, attend two office visits per month and have a written sobriety plan. Once the offender has demonstrated sobriety through participation in the program, the offender is eligible to move to the Transition Phase of the program.

PROGRAM STAFF AND ACTIVITIES

A CSO is assigned full time to the SAFPF caseload and one CSO is assigned full time to the DWI caseload. These officers receive additional training in substance abuse issues and in strategies to supervise these offenders. The officers provide intensive supervision of the offenders by three (3) face-to-face contacts per month with at least one contact in the field. The officers also attend monthly treatment team meetings. In addition, the officers attend treatment programs to monitor attendance and participation and monitor program content.

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 12

PROGRAM TITLE: DRUG TESTING

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
	Total \$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
UAS

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Telephone: 940-766-8213
Fax: 940-766-8109
E-mail: margaret.rogers@co.wichita.tx.us

Proposal Element 2: PROBLEM/NEED DATA

- Provide information to justify the need for this program in your jurisdiction.
Since 2000, there has been a movement in the field of probation to apply “best practices” and “evidence based practices” to supervision. The Wichita County CSCD has used drug testing of offenders as a compliance tool in the past. In the past five years the Wichita County supervises on an average 949 offenders whose offense was drug or alcohol related. During this time period the Wichita County CSCD has completed 6,402 drug tests.
With the department’s implementation of evidence based practices in community supervision, the Wichita County CSCD is now using drug testing as a measurement tool to determine offender change. Through the use of assessments, including chemical dependence assessments, the officer now identifies the criminogenic needs that support the risk factors for reoffending. Supervision plans are behavior change plans that identify ways to support offender change. The plan describes measurable actions by the offender and the officer to facilitate changes necessary in offender behavior. Substance abuse is a common criminogenic need experienced by many of the offenders on probation and drug testing is a tool used to measure offender change and compliance in drug and alcohol use.
- **What other services**, that meet this need, are available to the offender in this jurisdiction?
There are private entities in the community who do drug testing but at a significant cost to the offenders. The Wichita County CSCD can collect the urine specimens and have them tested at a significantly reduced cost.

CHOICE OF PROGRAM DESIGN

The Wichita County CSCD has modeled its drug collecting program after the American Probation and Parole Association’s (APPA) drug testing guidelines. As noted by APPA that drug testing offenders is an essential measurement tool to not only monitor compliance with court orders but also to measure offender change. The program design of APPA is based on best drug testing practices to ensure the credibility of a drug testing program. Although technology is rapidly evolving in the art of drug testing, APPA supports urinalysis testing as the least expensive and least intrusive technique. The CSCD has a drug testing policy and procedure governing the collection of specimens and a chain of custody procedure for confirmation of specimens. This program will enable the department, through a contract vendor, to streamline the witnessing, collection, submission of specimens to the lab and the tracking of drug tests and outcomes.

Proposal Element 3: TARGET POPULATION

- Felony only Misdemeanor only Both
- Male only Female only Both
- Age restriction? No Yes

If yes, describe: Must be minimum 17 years of age.

- Is this program designed to serve any specific cultural or ethnic group? No Yes
If yes, describe. _____
- Is this program designed to serve participants with mental health issues? No Yes
- Are participants who are not on community supervision accepted in this program? (e.g. pre-trial, pre-trial bond, jail inmates, state jail confinees, family members, or others) No Yes

If yes, identify. Pre-Trial Diversion

Proposal Element 4: PROGRAM DESCRIPTION AND PROCESS

PROGRAM DESCRIPTION

This program provides funding to contract with a vendor to collect and process urine specimens in accordance with the Wichita County CSCD drug testing policy. This program also funds the cost of supplies related to the collections of specimens and for lab costs to confirm presumptive positive tests. In addition, the program tracks all tests submitted by negative and positive results and lab confirmations.

PARTICIPANT ACTIVITIES

Offenders, ordered to drug testing as a condition of their probation, will submit a urine specimen at the Wichita County CSCD upon the request of the probation officer. Testing may be random, routine as part of treatment, as required by the supervision plan or as a sanction. With a vendor on site at the department the submission and collection of urine specimens for drug testing is improved for offenders.

PROGRAM STAFF AND ACTIVITIES

Probation officers will monitor offender drug and alcohol use per the court order the supervision plan and/or the program/treatment requirements. The officers will refer the offender for drug testing located in the Wichita County CSCD when a drug test is required. The contract vendor will witness the offender provide the urine specimen and test the specimen to determine if the specimen is negative or positive. If the specimen is presumptive positive, the vendor will follow CSCD chain of custody procedures to send the specimen to the qualified Laboratory. The vendor will maintain a log of specimens collected, specimens tested negative, specimens to the lab and lab results. This information is provided to the probation officer who supervises the offender to address non-compliance through sanctions or violation reports and address compliance through incentives.

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 15

PROGRAM TITLE: COMMUNITY CORRECTION SUPERVISION SERVICES

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
	Total \$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
CCCS

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Telephone: 940-766-8213
Fax: 940-766-8191
E-mail: margaret.rogers@co.wichita.tx.us

Proposal Element 2: PROBLEM/NEED DATA

- Provide information to justify the need for this program in your jurisdiction. The Community Correction Supervision Services Program (CCCS) will provide enhanced supervision strategies to address all offenders. Offenders will be supervised according to their level of risk and need, as well as the nature of the offense and criminal history. Offenders are placed on Community Supervision under Article 42.12. This program will enhance supervision services already being provided by this department.
- What **other services**, that meet this need, are available to the offender in this jurisdiction? Counseling Services, SAFPF Caseload and aftercare services, Felony DWI Caseload, Mental Health Caseload, Pre-Trial Diversion, and Sex Offender Caseload and counseling program.

CHOICE OF PROGRAM DESIGN

N/A

Proposal Element 3: TARGET POPULATION

- Felony only Misdemeanor only Both
- Male only Female only Both
- Age restriction? No Yes
If yes, describe: Must be at least 17 years of age.
- Is this program designed to serve any specific cultural or ethnic group? No Yes
If yes, describe. _____
- Is this program designed to serve participants with mental health issues? No Yes
- Are participants who are not on community supervision accepted in this program? (e.g. pre-trial, pre-trial bond, jail inmates, state jail confinees, family members, or others) No Yes
If yes, identify. _____

Proposal Element 4: PROGRAM DESCRIPTION AND PROCESS

PROGRAM DESCRIPTION

The program staff primary concern is community protection and compliance with conditions of community supervision. The following program services will be provided to the courts which include:

- a. Enforcing conditions of community supervision by using random urinalysis and unannounced field visits and searches;
- b. Reporting violations to the court and addressing problem areas;
- c. Performing case intakes and making proper referrals;
- d. Providing testimony for the court as the custodian of records;
- e. Conducting assessments, reassessments, and supervision planning, and implementing strategies to address identified offender risk and needs with the resources available in the community;
- f. Maintain case files in accordance with CJAD standards, and department policy;
- g. Making community service referrals and monitoring compliance;
- h. Making referrals to educational, substance abuse and mental health services when indicated by the appropriate assessments when ordered by the court;
- i. Monitoring employment and providing referrals to job and or vocational services available to offenders within the community.

PARTICIPANT ACTIVITIES

Offenders on Community Correction Supervision Services are required to:

- a. Report in person as directed according to their level of risk and need, until their progress and conduct warrants reduced reporting, but in no event shall an offender report less than one time in a 90 day period.
- b. Attend all ordered counseling, classes and court settings.
- c. Abide by all conditions of community supervision to include testing for illicit drugs and alcohol.
- d. Allow at least one unannounced field visit no less than once in a 180 day period, with the understanding that personal contacts in their home and place of employment may increase based on the risk said offender presents to the community.
- e. Avoid all contact with negative peers.
- f. Successfully complete any classes or programs as directed by the court, or deemed necessary by the department.

PROGRAM STAFF AND ACTIVITIES

The Community Supervision Officer will perform duties as directed by the CSCD in accordance with State law, CJAD standards and policy and procedures. Community Supervision Officers will work closely with local law enforcement, counselors, and other local providers and resources that may be involved in offender compliance, and ensuring community safety.

FY 2016-2017 NON-RESIDENTIAL PROPOSAL

Proposal Element 1: COVER SHEET

CSCD NAME (CHIEF COUNTY OF JURISDICTION): WICHITA

PROGRAM NUMBER: 010

PROGRAM TITLE: MENTAL HEALTH CASELOAD

CJAD FUNDING SOURCE: DP FUNDING TAIP FUNDING
CCP FUNDING BS FUNDING

FUNDING RECIPIENTS: CSCD:

REGIONAL CONSORTIUM:

ESTIMATE OF OTHER FUNDING SOURCES:

FUNDING SOURCE	1st Year	2nd Year
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
	Total \$ _____	\$ _____

PROGRAM CODES

Primary Program Code:
MHI

Facility Category (CRS)

Secondary Program Code(s):

Program Contact Information:

Name: Margaret Rogers
Title: Director
Telephone: 940-766-8213
Fax: 940-766-8109
E-mail: margaret.rogers@co.wichita.tx.us

Proposal Element 2: PROBLEM/NEED DATA

- Provide information to justify the need for this program in your jurisdiction.
The Wichita County CSCD has a number of offenders on probation with mental health illnesses meeting the identified priority population. When DP Grant funds became available, the CSCD requested funding to create a caseload for these offenders.
- What **other services**, that meet this need, are available to the offender in this jurisdiction?
There are no other services that provide community supervision and mental health services in a collaborative effort to provide supervision and mental health services to offenders in the criminal justice system in Wichita County.

CHOICE OF PROGRAM DESIGN

In the article from the Texas Supervision August 2000, there is a program design for specialized caseloads serving offenders with mental health offenders including specialized training for supervision officers. The program used by Wichita County CSCD models this article and the program design of the Mental Health Initiative. The program also incorporates the grant conditions for mental health caseloads.

Proposal Element 3: TARGET POPULATION

- Felony only Misdemeanor only Both
- Male only Female only Both
- Age restriction? No Yes
If yes, describe: Offender must be at least 17 years of age
- Is this program designed to serve any specific cultural or ethnic group? No Yes
If yes, describe. _____
- Is this program designed to serve participants with mental health issues? No Yes
- Are participants who are not on community supervision accepted in this program? (e.g. pre-trial, pre-trial bond, jail inmates, state jail confinees, family members, or others) No Yes
If yes, identify. _____

Proposal Element 4: PROGRAM DESCRIPTION AND PROCESS

PROGRAM DESCRIPTION

Texas Correctional Office on Offenders with Mental or Medical Impairments (TCOOMMI) funds enable the department to specifically address those offenders on community supervision who have diagnosed mental health illnesses. These offenders are often unsuccessful on regular supervision caseloads because the offender demands intense supervision and mental health services. This program is designed to team a CSO and a qualified mental health worker in providing supervision and treatment services to offenders with identified mental health illnesses.

PARTICIPANT ACTIVITIES

Participant must have three (3) face-to-face contacts with the supervising officer each month and meet monthly with Helen Farabee case manager. The offender is required to actively participate in mental health treatment by attending scheduled visits with the doctor and mental health specialist and by properly taking medications prescribed by the attending physician. The participant must also be actively engaged in following the CSCD supervision plan designed to enable the participant to complete probation successfully.

PROGRAM STAFF AND ACTIVITIES

A CSO is assigned full time to this caseload. The CSO receives specialized training in mental health illnesses and in working effectively with the mental impaired offender. The CSO will have three face-to-face contacts with each offender on the caseload and collateral contacts monthly with the mental health specialist and family members. The CSO will work with the mental health specialist from Helen Farabee MHMR to supervise offenders and provide intensive services.

DP PROJECTED PROGRAM OUTPUTS/OUTCOMES FOR FY 2016 - 2017

DATA FORM

Proposal Element 5

CSCD Name: **Wichita**

Program Title: **Mental Health Caseload**

Primary Program Code: **MHI**

Number of Screenings Conducted:

Projected Number to be served:

Program #: **010**

Facility Category:

Number of Assessments Conducted:

Successful Program Completion:

General Instructions: Only include services that will be paid for from this programs budget. Do not include referrals or other services that will be provided to program participants outside the program proposal. The information is for one **fiscal** year of data.

Secondary Program Codes

Secondary Program Code: **{INSERT HERE}**

Projected Number to be served:

Successful Program Completion:

Secondary Program Code: **{INSERT HERE}**

Projected Number to be served:

Successful Program Completion:

Secondary Program Code: **{INSERT HERE}**

Projected Number to be served:

Successful Program Completion:

Secondary Program Code: **{INSERT HERE}**

Projected Number to be served:

Successful Program Completion:

Secondary Program Code: **{INSERT HERE}**

Projected Number to be served:

Successful Program Completion:

Secondary Program Code: **{INSERT HERE}**

Projected Number to be served:

Successful Program Completion:

Date: February 18, 2014