INTERNAL MANAGEMENT POLICY & PROCEDURE

Department of Corrections

Applicability: <u>X</u> ADULT Operations Only _ JUVENILE Operations Only _ DEPARTMENT-WIDE

DECISION MAKING: Level of Service / Case Management Inventory Assessment and Women's Risk Needs Assessment

Original Date Issued: 08-23-18   Replaces IMPP Issued: 06-24-21   CURRENT EFFECTIVE DATE: 11-02-22

Approved By: _____, **Secretary   Next Scheduled Review:** 08/2025

POLICY

The Department shall manage residents/offenders using a risk management system. The Department shall use the Level of Service/Case Management Inventory (LS/CMI) and the Women's Risk Needs Assessment (WRNA) as instruments to assist in the implementation of the least restrictive and least onerous interpretation of criminal sanction, and to identify dynamic areas of risk/needs that may be addressed by programming in order to reduce risk, assess potential risk of re-offending, determine intervention targets, measure offender change over time through reassessment, and establish the foundation for case management practices. The LS/CMI is the primary risk/needs assessment tool for male residents, and the WRNA is the primary risk/needs assessment tool for female residents. Only staff certified by the Department are allowed to administer the LS/CMI and WRNA. The LS/CMI or shall be reviewed by the staff responsible for case management decisions to determine if the current circumstances contribute to or protect from risk to reoffend. Assessing a resident's/offender's risk/need is an ongoing, dynamic process. Reassessments are to be conducted as significant changes occur.

DEFINITIONS

<u>Assessment Steering Committee</u>: Multidiscipline group providing oversight for processes related to training, procedures, and quality assurance of the LS/CMI and WRNA. This group includes representation from Staff Development, Parole, Juvenile Services, Community Corrections, Behavioral Health, and Facility.

<u>Athena</u>: KDOC software used to document and score the LS/CMI and store WRNA scores.

<u>HIPAA</u>: Acronym for the Health Insurance Portability and Accountability Act.

<u>Level of Service/Case Management Inventory (LS/CMI)</u>: The LS/CMI is a measure of risk and needs factors with a case management component. It includes five assessment sections, three summary sections and three case management sections. Section 1 consists of 43 items that are scored and grouped into 8 subsections. Risk is categorized into five levels; 'very low', 'low', 'moderate', 'high' and 'very high.' It is designed to assist professionals in management and treatment planning in justice, forensic, correctional prevention, and related agencies. The LS/CMI aids the assessor in identifying risk, need and responsivity factors relevant to the individual's likelihood of re-offending and of other issues relevant to a holistic case management plan.

<u>Interview Guide</u>: The Interview Guide is a resource provided designed to assist the rater during the LS/CMI interview process. The LSCMI and the WRNA each have their own specific interview guide.

<u>Need</u>: The requirement for some type of intervention to reduce criminal behavior.

<u>Offender</u>: A person under post-incarceration supervision with the Secretary of Corrections.

Physically Incapacitated/Behavioral Health Resident/Offender: A resident/offender whose physical or behavioral health results in the individual being unable to participate in the LS/CMI or WRNA assessment process.

Rater: Any individual who has successfully completed LS/CMI and/or WRNA rater training conducted by the KDOC or as otherwise approved by the Assistant Staff Development Manager or designee.

Reassessment: A subsequent assessment conducted after the initial assessment.

Resident: A person who is in the legal custody of the Secretary of Corrections housed in a correctional facility.

Risk: The potential for criminal behavior.

Risk Needs Interview (RNI): Condensed selection of questions based off the LS/CMI that are case management focused; this assessment tool was developed for use when additional information would be useful, but a full LS/CMI is not required by policy.

Scoring Guide: The manual that provides the purpose behind each of the scoring items, potential prompters, scoring rules/issues, case planning concerns, and research information. The LSCMI and the WRNA each have their own specific scoring guide.

Women's Risk Needs Assessment (WRNA): The Women's Risk/Needs Assessment is intended to be used as a risk/needs assessment for women residents and offenders assigned to institutions, pre-release, community residential settings, probation, and parole.

PROCEDURES

I.   **Related Policies**

A.   Offenders in the community are to be managed based on risk levels as determined by a classification system in accordance with IMPP 14-111A Offender Risk Management and Classification Levels.

II.   **Resident/Offender Participation**

A.   The LS/CMI assessment shall be conducted with the male resident's/offender's participation whenever possible.

1.   If a resident/offender is unable or unwilling to fully participate, the assessment shall be completed by:

a.   Obtaining as much information as possible from the resident/offender;

b.   Reviewing all available criminal history sources;

c.   Reviewing resident/offender file information, including RDU report;

d.   Utilizing collateral contacts;

e.   Utilizing official documents and,

f.   Documenting in the assessment and in Athena the refusal or inability to participate and the sources used to obtain/verify information.

B.   The WRNA shall be conducted with the female resident's/offender's participation whenever possible.

1.   If a resident/offender is unable or unwilling to fully participate, the assessment may be completed:

a.   At a time after the resident/offender has been given time to adjust to incarceration.

III. **Reception and Diagnostic Unit (RDU) Assessments**

A. RDU assessors shall administer an LS/CMI assessment during the intake interview on all male RDU admissions except as follows:

1. Admissions with an LS/CMI conducted in the previous 12 months;

2. Admissions with six (6) months or less regardless of admission or post release type;

3. Residents with greater than 5 years to serve; and

4. If necessary, residents with 1 to 2 years to serve will be placed as 'priority' in completion, followed by residents with 2 to 5 years to serve.

B. A Risk Needs Interview (RNI) may be used at the discretion of the RDU Assessor.

C. A WRNA shall be administered on all female residents/offender except as follows:

1. Admissions with less than six months to serve, not earning program credit;

2. Condition violators with no new sentence with 90 days or less to serve;

3. Admissions under JRI status

D. Criteria for RDU assessor and Unit Team:

1. RDU assessor shall complete a WRNA for residents/offenders with between six months to 2 years to serve.

2. Unit Team shall complete a WRNA for residents/offenders with more than 2 years to serve.

IV. **Facility Unit Team/Reentry Assessments**

A. Unit team/Reentry staff shall use the most recent LS/CMI or WRNA assessment regardless of entity, for case management and reentry planning.

1. As part of effective case management practice, facility staff shall continue to review risk/need areas of the resident, and as part of reentry planning, identify updates in status, such as sustained employment during incarceration, completion of risk reduction programs or services, or significant changes in the resident's circumstances that may impact the resident's risk/need areas to the degree that completing a reassessment is warranted.

B. Designated facility LS/CMI or WRNA Raters are responsible for conducting a complete assessment to determine risk/need areas for the following reasons:

1. Any resident who needs a complete or re-assessment for risk-reduction planning purposes (i.e., upcoming parole board hearing, seeking entry into a program), per referral of the appropriate party, as outlined per policy, for example: 11-106A and 11-107.

V. **Community-based Assessments**

A. Parole LS/CMI or WRNA assessments shall be conducted per IMPP 14-111A and this policy.

VI. **Physically/Mentally Incapacitated Offenders/Residents**

A. Offenders/residents with physical or behavioral disabilities shall receive an assessment.

1. An offender's/resident's inability to participate shall be documented, and the assessor shall complete the assessment based on file information, case management knowledge of the offender/resident, and collateral information.

B. Offenders/residents with hearing or speech disabilities shall be provided interpreter services by the facility or parole office.

1. When using an interpreter for assessments, only a certified assessor shall initiate interview questions for the interpreter.

2. The WRNA has both English and Spanish versions for the assessment/survey portions. An interpreter shall be relied on to complete the assessment in other languages.

VII. LS/CMI and WRNA Interviews and Interview Guide Requirements

A. Interviews with the offender/resident are required for initial assessments and are encouraged for subsequent assessments, except in cases where the offender/resident is unable or unwilling to participate.

1. The offender's/resident's inability or unwillingness to participate shall be documented in Athena, and the certified assessor shall complete the assessment based on file information, case management knowledge of the offender/resident, and collateral information.

B. The use of the Interview Guide by the interviewer is encouraged to help ensure that relevant questions are used in a manner to elicit detailed information.

C. The Interview Guide shall not be provided to the offender/resident.

VIII. LS/CMI and WRNA Documentation Requirements

A. Information obtained during the LS/CMI interview shall be documented in detail and entered in Athena.

1. All 43 items of section 1 of the LS/CMI are to include documentation, not dependent on the score of each item.

B. Information obtained during the WRNA interview shall be documented in detail in the WRNA, located in the Application portal.

C. Offender/resident information protected by HIPAA shall be maintained in a separate location and/or file per policy and procedure.

D. The quality of the documentation entered in Athena shall be such that other staff reviewing the documentation can effectively understand the rational for the assessment scores given.

IX. LS/CMI and WRNA Scoring and Corrections

A. The LS/CMI and WRNA assessments shall be scored using the designated Scoring Guide.

B. The LS/CMI and WRNA Scoring Guides shall not be provided to the offender/resident.

C. Scoring corrections to already scored assessments shall be made by conducting a reassessment.

1. Comments to explain and support the need for a corrected assessment shall be entered into the applicable item/domain documentation field.

X. LS/CMI and WRNA Quality Assurance

A. The Assessment Steering Committee oversees the quality assurance (QA) process. Quality assurance may include:

1. Providing on-going technical assistance to staff;

2. File reviews;

3. Addressing QA in the facility full scale security audit process;

4. Addressing QA in employee (including supervisory) performance expectations and evaluations;

5. Generating reports to identify potential problem areas (e.g., specific parole offices, facilities, and/or assessors);

6. Refresher training; mandatory certification or recertification, and/or retraining as appropriate

7. Digitally recorded assessment reviews/critique; and,

8. Inter-rater reliability and fidelity assessments conducted by Skill Developer Supervisors or other designated staff.

B. Inter-rater Reliability Assessment Process

1. Inter-rater reliability shall be defined as a two (2)-point variance, which means that the total score is to be no greater than two (2) points higher or two (2) points lower than what is the correct or "true" score.

2. Supervisors shall administer or initiate inter-rater reliability reviews as necessary to ensure LS/CMI's and WRNA's are conducted in a manner which upholds the validity of the instrument. Reviews may be conducted by the supervisor, a designee, or other staff who are assigned to conduct inter-rater and fidelity reviews.

    a. Inter-rater reliability reviews shall be conducted during the offender's/resident's assessment interview and include independent scoring as well as a feedback session with the staff person being reviewed.

    b. In addition to determining inter-rater reliability of the assessment score, reviewers shall provide feedback regarding the assessor's interview and ability to elicit detailed information, the accuracy of scoring for each element, the quality of documentation and whether such documentation supports the score.

C. Points of contact for notification of quality assurance issues are:

1. RDU LS/CMI or WRNA Assessments: Risk Assessment Supervisor;

2. Facility Unit Team/Reentry Assessments: Classification Administrator/Case Management Administrator; and

3. Community and Field Services: Parole Directors and Community Corrections Directors/ Managers

XI. Training and Initial Certification Requirements

A. All staff, who administer LS/CMI assessments are required to successfully complete the KDOC LS/CMI training and obtain and maintain certification. Supervisors and reviewers who conduct or review LS/CMI's as a primary function of their position shall also obtain and maintain LS/CMI certification. Only those unit team staff designated by the Warden shall be required to meet the training and certification requirements of this section.

1. Prior to administering an LS/CMI assessment, staff are required to obtain certification upon completion of training.

        a.   Certification requires satisfactory completion of 3-day LS/CMI training and a minimum of a "satisfactory" overall rating on the LS/CMI recorded assessment critique.

        b.   Up to three (3) digitally recorded assessment opportunities shall be provided for initial certification. Failure to obtain certification on the third attempt shall result in non-certification and a requirement for LS/CMI re-training.

B.   An employee who was certified because of a position previously held within KDOC or other agency may be required to successfully complete LS/CMI initial training/certification to regain rater status after terminating employment or being on active military or medical leave for a period exceeding one (1) year.

    1.   Exceptions to the training and/or certification process is determined by the Assistance Staff Development Manager on a case-by-case basis.

    2.   If circumstances warrant, an alternative, individualized training plan may be arranged.

C.   All training shall be documented in the employee's official training record.

D.   All staff who administer a WRNA, including contract staff, are required to successfully complete a KDOC WRNA training to obtain and maintain certification. Supervisors and reviewers who conduct or review WRNA shall also obtain and maintain WRNA certification.

    1.   Prior to administering a WRNA, staff are required to obtain certification upon completion of training.

        a.   Certification requires satisfactory completion of a three (3) day WRNA training and a minimum of "satisfactory" overall rating on the WRNA digitally recorded assessment critique.

XII.   Recertification and Quality Assurance

A.   To maintain certification, those certified are expected to maintain a "satisfactory" rating, as evidenced by training, performance reviews, inter-rater reliability activities, fidelity reviews and/or a recertification process.

    1.   Training and Recertification.

        a.   Staff are required to successfully complete LS/CMI and/or WRNA refresher training as deemed necessary by the Staff Development Department and/or Assessment Steering Committee.

        b.   Staff who fail to complete appropriate refresher trainings within the specified time frames lose their certification status and are removed from the list of approved raters.

            (1)   Supervisory staff are to be notified if any staff fails to complete appropriate refresher trainings. Unless excused for military leave or other approved leave, staff who do not complete the training may be subject to counseling or disciplinary action, as determined by the supervisor and appointing authority.

        c.   The format for LS/CMI and/or WRNA trainings is determined by the Assessment Steering Committee and then developed and/or coordinated for staff by the Central Office Staff Development Division.

    2.   Required Annual Assessments.

a. Staff required to be LS/CMI and/or WRNA certified shall conduct at least one (1) assessment every 12 months, each fiscal year.

(1) Staff who fail to complete an assessment every fiscal year shall have their rater status removed and;

(2) Supervisors shall be notified for the employee to be counseled and any other action determined by the appointing authority and/or supervisor and;

(3) If the employee's rater status needs to be reinstated, the appointing authority and/or supervisor shall notify the Assistant Staff Development Manager, at which time the employee's rater status is to be reinstated.

3. Certification may be suspended as determined by quality assurance reviews.

a. The need for refresher training and/or retraining shall be determined on a case-by-case basis by the supervisor and appointing authority.

4. Assessments conducted for training and certification purposes shall not be used for resident/offender management.

XIII. Contract Provider Access to LS/CMI Assessments

A. Facilities and Adult Community-Based Services shall ensure that department contracted treatment providers, with a release of information, have access to LS/CMI assessments for treatment planning purposes.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff, residents and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees, residents or offenders, or an independent duty owed by the Department of Corrections to employees, residents, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure are not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS

None.

REFERENCES

IMPP 14-111A

HISTORY

08/23/18 Original
05/01/19 Revision 1
11/07/19 Revision 2
06/24/21 Revision 3
11/02/22 Revision 4

ATTACHMENTS

None.