



INTERNAL MANAGEMENT POLICY & PROCEDURE

Applicability: ☒ Adult Operation Only ☐ JUVENILE Operations Only ☐ DEPARTMENT-WIDE

IMPP #: 14-104A

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PAROLE SERVICES: Initial Reporting and Case Management Procedures

Original Date Issued: 05-14-15 Replaces IMPP Issued: 05-14-15 **CURRENT EFFECTIVE DATE: 06-13-23**

Approved By: , Secretary Next Scheduled Review: 05/2026

POLICY

KDOC staff will communicate with offenders released to supervision to facilitate supervision services, establish a cooperative working relationship and assist with transition to the community. Staff will support a successful transition and period of supervision by providing information, resources and by encouraging law-abiding behavior and positive connections in the community.

DEFINITIONS

Initial Contact: The first Contact between a parole officer and offender on supervision after offender's release from a facility or arrival in the State of Kansas. It may occur in the office, by telephone, video call or in the field.

Initial Interview: Personal contact between the parole officer with the offender for the purpose of discussing supervision requirements and the case management needs.

Intake: Personal contact between the parole officer/intake officer and offender on supervision for the purpose of explaining supervision requirements. The intake interview may occur in a group setting.

Offender: a person who is living in the community and being supervised on parole, post-release supervision or on probation or parole through the Interstate Compact Agreement.

Personal Contact: Any direct contact with the offender on supervision conducted by a parole officer or approved designee in the office, at the offender's residence or employment, or at any other location in the community. Virtual/video and electronic communication that meets the criteria established in IMPP 14-117A may be considered a personal contact.

Supervision Handbook: A handbook which contains information about the supervision conditions, expectations regarding the conditions, and additional information that is relevant and/or necessary for individuals on supervision.

Release Document: Parole certificate, conditional release certificate, post-release supervision certificate, Order of Probation, or reporting instruction form.

PROCEDURES

I. Initial Contact

- A. The initial contact shall occur within two (2) business days of the offender's release or arrival in

Kansas. The purpose of the contact is to confirm that an offender has arrived at his/her release destination, to address any risk issues that are an immediate concern, and to allow the offender an opportunity to share questions or concerns.

- B. The initial contact may occur via phone, video call, in a parole office or other community location. It shall occur in a setting that considers confidentiality and allows unrestricted conversation.
- C. The initial contact conversation shall include the following:
 - 1. Confirm the residence plan.
 - 2. Provide the offender an opportunity to ask questions or raise concerns about his/her circumstances or reentry to the community.
 - 3. Discuss any risk or need factors which may require immediate attention.
 - 4. Review any special conditions that are of immediate concern, if applicable. Examples include no contact, geographic restrictions and contact with minors.
 - 5. Review any immediate requirements related to the Kansas Offender Registration Act, if applicable.
 - 6. Schedule or confirm the date and time of the initial interview.
- D. The initial contact may be waived if the parole officer has had a video conference or telephone conversation with the offender within fourteen (14) calendar days prior to release, which confirmed the residence plan and the initial interview appointment date and time.

II. Initial Interview Procedures

- A. At or before the initial interview, the assigned parole officer shall use the EPICS Role Clarification process to share information and establish a framework for the supervision process. The steps of that process are:
 - 1. Identify the KDOC goals for supervision: to help offenders make a successful transition to the community and to promote safety for all by encouraging law-abiding lifestyles.
 - 2. Ask the offender what he/she hopes to accomplish while under supervision.
 - 3. Identify what you, as a representative of the agency, hope to accomplish with/for the offender.
 - 4. Define the supervision process including conditions of supervision; negotiable/non-negotiable situations; role of offender, the officer, program providers and other members of the parole process.
 - 5. Identify and discuss the expectations of confidentiality, which shall include:
 - a. Criminal convictions, status on supervision and residence information are considered public information and can be shared with anyone.
 - b. Confidential information and performance on supervision can be shared with any KDOC staff member. Confidential information will not be shared outside of KDOC and law enforcement agencies without a signed Release of Information form.
 - c. KDOC staff are required to report child or elderly abuse and intent for self-harm or harm to others can be reported.
- B. The use of cognitive behavioral tools such as Carey Guides and EPICS tools are encouraged during the initial interactions after release and throughout supervision, to help the offender examine his/her

circumstances, thoughts, behavior patterns and options for the future.

C. In addition, the following actions shall be taken during the initial interview:

1. Confirm the offender received a copy of the release certificate.
 - a. The Institutional Parole Officer or sending state shall be contacted if the release document has not been received and is not available electronically.
2. If the offender participated in a group intake session, provide an opportunity for questions or clarifications from the group process.
3. If the offender is managed as a sex offender, a copy of the Sex Offender Supervision Handbook shall be provided to him/her and all requirements shall be reviewed and acknowledged in accordance with IMPP 14-124A.
4. If the offender will be managed as a domestic violence offender, provide him/her with the Domestic Violence Offender Handbook and review the contents, in accordance with IMPP 14-135A.
5. Clarify the offender's travel district, which is within a 50-mile radius of the offender's residence unless otherwise specified by the parole officer, and the requirement to gain advance permission from the parole officer before traveling outside of the travel district.
 - a. If the allowed travel district is defined as anything other than the 50-mile radius, document the information in a contact note.
6. Review and discuss any special conditions imposed and provide necessary direction or assistance to promote compliance.
7. If applicable and not previously discussed, review the requirements of the Kansas Offender Registration Act and refer the offender to the appropriate Sheriff's Office.
8. Identify any risk or need factors that require immediate attention and provide assistance or make referral to services, as available.
9. Determine if the offender has a Driver's license and/or Identification Card. If not, provide assistance toward obtaining identification within 7 days of release, as described in IMPP 11-120A.
10. Advise the offender that a personalized case plan will be developed with him/her, to promote focus on offender needs and support success on supervision. Encourage him/her to share successes and positive events that may occur and advise of ways to communicate them.
11. Set the next scheduled report date.

C. Additional items which shall be discussed at the initial personal interview or within the first 30 days of supervision depending on the offender's needs and circumstances are:

1. Review restitution, court costs or child support owed.
 - a. If the offender owes child support, that parole officer shall contact Child Support Enforcement, as described in IMPP 14-126A, to determine status and needs.
 - b. Advise the offender that a payment plan for Court ordered debts shall be developed within 45 days, in accordance with IMPP 14-126A.
2. Identify needs related to housing and provide assistance, including referrals to housing specialists.

3. Identify needs related to employment and make appropriate referrals and provide support and assistance.

III. Intake Procedures

- A. The intake process shall be completed with newly released/received offenders to confirm an awareness of supervision conditions, complete any necessary administrative procedures, and establish a foundation for a successful reintegration and supervision period.
- B. To verify offenders on supervision are aware of their supervision requirements and have the opportunity to ask for clarification the parole officer shall conduct the following actions during the intake process:
 1. Verify the Offender Information Sheet and Offender Report Form have been completed by the offender;
 2. Provide a copy of the Offender Supervision Handbook to the offender;
 3. Review and explain the standard release conditions and the information contained in the Supervision Handbook;
 - a. Offenders reporting under the terms of the Interstate Compact shall be advised that both Kansas and sending state conditions will apply to them and shall be required to sign a copy of the Kansas conditions.
 4. Explain the requirements of the Kansas Offender Registration Act for those who are required to register.
 5. Advise the offender of the requirement to notify his/her employer(s) of all adult felony convictions (excluding expunged convictions), and any offense for which he/she is currently under supervision, per IMPP 14-117A;
 6. Inform the offender of the process and requirements for earning good time, per IMPP 14-120A;
 7. Advise of the supervision fee process;
 8. Obtain the offender's signature on the Acknowledgement of Requirements form;
 9. Photograph the offender in accordance with regional policy; and,
 10. If the offender is unable to speak English or has a disability that would prevent his/her comprehension of the conditions, an interpreter shall be provided in accordance with IMPP 10-138D.
- C. An abbreviated intake process is allowed for offenders who are released to supervision and have been on supervision and participated in an intake with KDOC during the past year. The abbreviated intake process must include, at a minimum:
 1. Ensuring that the offender has signed his/her current release certificate and has been provided a copy in writing.
 2. Offer the offender a copy of the Supervision Handbook.
 3. Providing the opportunity to ask questions regarding release conditions.

IV. Offenders Failing to Report after Release from Facility

- A. The assigned parole officer shall be responsible for timely follow-up with offenders who fail to report as directed after release from a KDOC facility.

1. Offenders who fail to report shall be processed in accordance with IMPP 14-131A.

V. Processing Delay Requests

- A. Parole staff shall recognize that an offender may occasionally have a valid reason for requesting a delay en route to his/her release plan. Such delays may include, but not be limited to:
 1. Visiting family;
 2. Picking up clothing, tools, or other belongings;
 3. Serious illness or death in the family; and/or,
 4. Handling a civil legal matter.
- B. When a request for delay is proposed by an offender or facility staff member, the field officer shall:
 1. Investigate the proposed delay;
 2. Make a determination as to the validity of the request for delay;
 3. Make a decision regarding the delay, and record the decision in the chronological record; and,
 4. Relay any revised reporting instructions to the offender or if needed, notify the facility staff of the decision and request that they relay reporting instructions for the offender.
- D. Out of state travel immediately upon release shall be authorized in accordance with IMPP 14-128A.

VI. This IMPP must serve as final policy in all departmental facilities, and no General Orders shall be developed or implemented on this subject.

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 is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS

None.

REFERENCES

IMPP 10-138D, 14-117A, 14-120A, 14-124A, 14-126A, 14-128A, 14-131A, 14-135A
Supervision Handbook

HISTORY

05-14-15 Original
06-13-23 Revision 1

ATTACHMENTS

Attachments	Title of Attachments	Page Total
A	Intake Information Sheet	4 pages
B	Acknowledgment of Requirements form	1 page

Kansas Department of Corrections
Division of Community and Field Services
Intake Information Sheet

Date: _____

First Name _____ Middle Name _____ Last Name _____

Nicknames or Aliases: _____

Other Names used: _____

Social Security #: _____ Birthplace: _____ Date of Birth _____

Height: _____ Weight: _____ Sex: _____ Hair Color: _____ Eye Color: _____

Driver's License #: _____ State: _____ Expiration Date: _____

Vehicle Owned or Driven: Make & Model: _____ Year: _____ Color: _____

Registration State: _____ Tag No.: _____ Owner: _____

Marital Status: _____ Spouse/ Significant Other Name: _____

Spouse/ Significant Other Address/Phone: _____

Children(s) Names:

_____ Age: _____ Address/Phone: _____

_____ Age: _____ Address/Phone: _____

_____ Age: _____ Address/Phone: _____

_____ Age: _____ Address/Phone: _____

_____ Age: _____ Address/Phone: _____

Father's Name: _____ Address/Phone: _____

Mother's Name: _____ Address/Phone: _____

Names of Siblings:

_____ Address/Phone: _____

_____ Address/Phone: _____

_____ Address/Phone: _____

_____ Address/Phone: _____

_____ Address/Phone: _____

Emergency Contact Person: Name:

Address: _____ Phone Number: _____

Are any of your family members on supervision or in prison? If so, please list: _____

As part of the supervision process your parole officer may contact your family, friends, employer or others for information about how you are doing on supervision, your strengths and any support you may need. Please provide contact information for people that you would like to have contacted on your behalf.

Name: _____ Relationship: _____
Address: _____
Phone Number: _____

Name: _____ Relationship: _____
Address: _____
Phone Number: _____

Name: _____ Relationship: _____
Address: _____
Phone Number: _____

Substance Abuse and Mental Health History

Do you have a history of illegal drug use, abuse of alcohol, addiction, or illegal use of prescription drugs?
If so, please describe:

Have you experienced mental illness or currently have mental health needs? If yes, please describe:

If you are currently taking prescription medications, please list them: _____

Please list any drug, alcohol or mental health treatment that you have been involved in:

Where: _____ Dates: _____ Completed: Yes ___ No ___

If not completed, why not? _____

Where: _____ Dates: _____ Completed: Yes ___ No ___

If not completed, why not? _____

Where: _____ Dates: _____ Completed: Yes ___ No ___

Additional Information:

Do you have any outstanding warrants? If so, please describe them and how you plan to address them:

Are you on probation or parole with any other agency? If yes, please describe:

If not completed, why not? _____

Is there anything else you'd like us to know about you, or your supervision period? If so, please write it here:

Signature

Date

[illegible]

**Kansas Department of Corrections
Division of Community and Field Services**

ACKNOWLEDGEMENT OF REQUIREMENTS FORM

ACKNOWLEDGMENT OF EXPLANATION OF SUPERVISION CONDITIONS

I acknowledge that I have been informed of all the conditions of release, that they have been explained to me and that I understand the requirements of supervision. I have received of a copy of the *KDOC Supervision Handbook*, which has been reviewed and explained to me.

ACKNOWLEDGMENT OF FIREARM PROHIBITION

I have been informed of the prohibition governing possession of a firearm by a convicted felon. I have been provided with information, via the Supervision Handbook, which explains how to gain information about relief from the prohibition, once discharged from supervision.

ACKNOWLEDGMENT OF GRIEVANCE PROCEDURE

I have been informed of the grievance process, and the procedures for filing a formal grievance in the event that a problem cannot be resolved informally.

ACKNOWLEDGMENT OF INFORMANT POLICY

I have been informed of the Kansas Department of Corrections policy which requires that while being supervised by the Kansas Department of Corrections, I may not act as an informant without prior approval from KDOC staff.

FOR INTERSTATE COMPACT OFFENDERS ONLY

I understand and agree to comply with all conditions of my release as established by both the State of Kansas and the sending state.

I hereby acknowledge that all of the above have been explained to me.

Signed: _____
(Offender)

Date: ____/____/____

Witnessed: _____
(Parole Officer)

Date: ____/____/____