I. PURPOSE

This operating procedure provides for the organization of the Department of Corrections Community Corrections Alternative Program Referral Unit and provides guidelines for the evaluation, acceptance, and placement of offenders referred for participation in the Community Corrections Alternative Program through Detention and Diversion Center Incarceration Program.

II. COMPLIANCE

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

III. DEFINITIONS

Case Plan - A dynamic document that outlines treatment needs and program duration based on assessments of the offender’s criminogenic factors; it guides an offender through completion of the Community Corrections Alternative Program.

CCAP Programming Requirements - A plan developed jointly between the CCAP Referral Unit and the referring P&P Officer utilizing objective risk/needs assessments to determine the individual offender’s programming needs and duration

Community Corrections Alternative Program (CCAP) - A system of residential facilities operated by the Department of Corrections to provide evidence-based programming as a diversionary alternative to incarceration in accordance with COV §53.1-67.9, Establishment of community corrections alternative program; supervision upon completion

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

Offender with Serious Mental Illness (SMI) - An offender diagnosed with a Psychotic Disorder, Bipolar Disorder, Major Depressive Disorder, Posttraumatic Stress Disorder (PTSD) or Anxiety Disorder, or any diagnosed mental disorder (excluding substance abuse disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person’s ability to meet the ordinary demands of living.

Sex Offender - An offender who is required to register as a sex offender; or an offender who has a sex offense in their criminal history; or an offender convicted of an offense of a sexual nature

Virginia Criminal Information Network (VCIN) - A service facility under the management control of the Virginia Department of State Police used by the DOC to access computerized criminal history information.

Women’s Risk/Needs Assessment (WRNA) - The risk/needs assessment tool sanctioned by VADOC for
institutions and community corrections that includes gender-neutral information of COMPAS, but also is inclusive of gender-responsive factors such as mental health, child/adult abuse and/or victimization, relationship dysfunction, parental stress, and housing safety. Areas of strength such as self-efficacy, parental involvement, family support, and education are also assessed.

IV. PROCEDURE

A. Community Corrections Alternative Program Referral Unit Organization and Mission

1. The Referral Unit is an element of Central Classification Services within Offender Management Services.
2. The mission of the Referral Unit is to serve as the interface between P&P Offices and Community Corrections Alternative Program (CCAP) to evaluate offenders for participation in CCAP and to jointly develop CCAP Programming Requirements with the supervising P&P Officer to guide the offender’s placement in the appropriate CCAP facility to address the offender’s programming needs.
3. The duties of the Referral Unit are as follows:
   a. Accept all CCAP Referral Investigations for completion by assigned Referral Unit staff.
   b. Review VACORIS Offender Page information (particularly PSI, Facility Notes, Supervision Notes, violations, Substance Abuse Information etc.) SRA, CAIS, and LIDS to determine eligibility for CCAP.
   c. Review COMPAS/WRNA assessment/Case Supervision Review to determine suitability.
   d. Work closely with referring P&P Officers and jail staff to gather additional information as needed.
   e. If the offender is not deemed eligible, suitable, and acceptable for CCAP, explore other potential program/placement options with the referring P&P Officer.
   f. Enter the Accepted/Denied decision in the VACORIS investigation, indicate the Denial Reason(s) if needed, and upload a letter documenting the Referral Unit decision for presentation to the referring authority.
   g. Enter an investigation in VACORIS requesting sentencing outcome
   h. Track the disposition of offenders accepted into CCAP.
   i. Once notification is obtained that the offender is sentenced to CCAP, identify the suitable placement based on their identified risk level, primary treatment needs (type and program duration), and available bed space, document on the CCAP Programming Requirements.
   j. Coordinate with CCAP facility staff, P&P District staff, Community Release Unit, and jails for efficient bed management and scheduling offenders for intake.

B. Community Corrections Facilities Eligibility Criteria

1. Status - Offenders who have been convicted of a felony and placed on supervised probation/post release supervision, or offenders on parole for whom probable cause has been found for a parole/post release supervision violation other than a new felony or a Class 1 or 2 misdemeanor.
2. Offenses - The current felony offense and/or underlying offense for violations must be nonviolent as defined in Code of Virginia §19.2-316.4 which references COV §19.2-297.1. Those offenders who have been convicted of a sex offense may be considered on a case by case basis.
3. Pending Matters- Offenders will not be referred to CCAP for program eligibility determination until all known pending matters have been resolved. If any of the pending matters subsequently result in the imposition of a state responsible sentence, the offender will not be eligible for CCAP.
4. Orders - A Circuit Court and/or the Virginia Parole Board must order offenders into Community Corrections Alternative Program (CCAP), which cannot be in addition to felony incarceration greater than 12 months.
5. Age - Must be a minimum of 18 years of age or older.
6. Health - The offender must be physically, emotionally, and mentally suitable for program participation.

C. Eligibility, Suitability, and Evaluation

1. The Referral Unit must develop and maintain a written pamphlet (see Attachment 1) listing specific established eligibility and suitability criteria and CCAP program capabilities. This document must be distributed to each relevant referral agency. (4-ACRS-6A-12)

2. The Department of Corrections prohibits discrimination in accepting referrals based on disability, race, creed, political views, or national origin. Each CCAP facility will be designated to serve offenders of one gender; parallel programs are operated so that there is no discrimination based on gender in accepting referrals. (4-ACRS-6B-02)

3. Community Corrections Facilities Medical and Mental Health Suitability Considerations
   a. The offender must not have any incidents of self-injurious behavior or suicide attempts requiring outside medical intervention or homicidal ideation during the past 12 months.
   b. Must be physically stable, should not require access to 24-hour nursing care, and must be able to perform the activities of daily living and program requirements.
   c. Potential program participants will not have any medication changes within 60 days of referral or intake and will be assessed in accordance with the CCAP Limited Psychotropic Self-Medication Program (See Operating Procedure 940.4, Community Corrections Alternative Program.). Approval of any medication changes are at the discretion of the Referral Unit and the receiving facility.
   d. If an offender’s suitability is in question for mental health concerns after reviewing available documentation, e.g., psychiatric hospitalization within the past 12 months, a diagnosis of Serious Mental Illness (SMI), or psychotropic medication prescribed for SMI, a mental health referral can be sent via email to the appropriate Regional Mental Health Clinician (RMHC) with a copy to the Community Mental Health Clinical Supervisor (MHCS).
   e. The following information should be included with the mental health referral:
      i. Name of referring P&P Officer
      ii. Offender's physical location
      iii. Court date and notification if there is a time sensitive deadline for response
      iv. Copy of the completed Program Eligibility Brief Screening for Community Corrections Alternative Program 930_F5
      v. Summary of offender’s mental health information, including: diagnosis, psychotropic medications, whether medications have stopped, started, or changed in the past 60 days, and an explanation of the Referral Unit’s specific concern to be addressed
   f. If after review of the documentation provided by the Referral Unit to include the PSI if available and communication with the referring P&P Officer, the RMHC will advise the Referral Unit if the offender is suitable for CCAP or if further assessment is needed. When there is sufficient reason to assess the offender in person, the RMHC will determine if the mental health referral is forwarded to a District Mental Health Clinician (DMHC).
   g. Screening by the Referral Unit is comprised primarily of a record review and offender self-report; such screening will not guarantee that a CCAP referral is appropriate, particularly if an offender is not screened again prior to CCAP intake. After arrival to CCAP, all offenders that are identified with potentially problematic mental health concerns must be assessed by a DMHC who will make a recommendation as to whether these offenders can continue in the Program in accordance with Operating Procedure 940.4, Community Corrections Alternative Program.

D. Referral Process (4-ACRS-6A-11)

1. Order for Referral
   a. Probation Cases - Prior to sentencing, or following a finding that an offender’s probation should be revoked, the Court should order the DOC to screen the offender for suitability for participation in
the Community Corrections Alternative Program (CCAP). The Court’s order may be based on a motion by the defense, Commonwealth’s Attorney, or the Court’s own motion. The DOC then has 45 days to determine suitability.

b. Parole Cases - Parole violators may be referred to CCAP by the Parole Board, Parole Examiner, or the Preliminary Parole Violation Hearing Officer, with the violator’s consent, and following a finding of probable cause that the offender has violated one or more parole conditions. The DOC then has 45 days to determine suitability.

c. New Conviction Cases - Following conviction and prior to sentencing, the Court should order the DOC to screen the offender for suitability for participation in the Community Corrections Alternative Program (CCAP). The Court's order may be based on a motion by the defense, Commonwealth’s Attorney, or the Court's own motion. The DOC then has 45 days to determine suitability.

d. Unless ordered by the Court, a change in the custodial status is not required during the evaluation period.

2. Once an offender has been ordered for evaluation to the CCAP, the P&P Officer will submit the offender for referral through VACORIS unless there are known pending matters. **CCAP Referral District Checklist 930_F6** is offered as a guide to the referral process.

   a. The referring P&P Officer must complete the **Program Eligibility Brief Screening for Community Corrections Alternative Program** 930_F5 and send it as an email attachment to the CCAP Referral Unit. This document must not be uploaded into VACORIS.

   b. The referring P&P Officer must evaluate the candidate by completing the **Substance Abuse Information** offender page in VACORIS.

   c. The referring P&P Officer must ensure that a current EBP Community COMPAS/WRNA risk assessment and **Case Supervision Review** (if applicable) are available in VACORIS. (4-ACRS-2A-07)

   d. The referring P&P Officer must complete a VCIN check no more than 14 days prior to the CCAP referral being submitted to determine that no outstanding warrants, unsatisfied incarceration obligations, or detainers exist. Community facilities will not intake offenders until all pending Court matters are resolved.

   e. The referring P&P Officer must submit an investigation as a CCAP referral in VACORIS at least five business days prior to the scheduled sentencing date.

3. The Referral Unit will perform a timely evaluation of each referral based on specific established eligibility, suitability, and acceptability criteria and the offender’s level of risk.

   a. The Referral Unit staff consults the referring P&P Officer and reviews the available case record to develop the **CCAP Programming Requirements** to document offender programming needs and duration.

   b. Appropriate local programs should be offered to offenders classified as low risk.

4. Referral Unit staff must enter in VACORIS, for review by the referring P&P Officer, notification of the offender’s acceptance or denial into the program and upload a letter documenting the Referral Unit decision for presentation to the referring agency. (4-ACRS-2A-08)

5. The referring P&P Officer must notify the referring agency of the CCAP acceptance or denial of the offender using the Referral Unit letter. (4-ACRS-6A-10)

   a. If the Court orders the offender into CCAP, the Judge normally imposes and then suspends an active sentence conditioned upon the offender’s successful completion of CCAP. In accordance with **COV §19.2-316.4**, a sentence to CCAP should not be imposed in addition to an active sentence to a state correctional facility.

   b. The Parole Board may sanction eligible parole violators directly to CCAP.

6. The Referral Unit will enter an investigation in VACORIS requesting the sentencing outcome from
the referring P&P District for all accepted referrals.

7. The referring P&P District must respond to the sentencing outcome investigation within 45 days of the Court or Parole Board decision, as all acceptances are tracked.

8. If the offender is sentenced to CCAP, the Referral Unit staff will respond via email with a projected entry date and instruct the referring P&P Officer to provide a copy of the current Community Corrections Alternative Program Pre-Admission Manual (see Attachment 2) to the offender.

9. The referring P&P District must upload the sentencing order or Parole Board Order and enter the order and conditions into VACORIS.

10. For offenders accepted to participate in CCAP, the Referral Unit should upload the CCAP Programming Requirements in VACORIS. The CCAP Programming Requirements form is an internal use only document and is only to be generated by the CCAP Referral Unit staff. It is not to be disseminated.

11. The Referral Unit staff will utilize the CCAP Programming Requirements to determine appropriate facility assignment and programs and facility case planning purposes.

E. File Review for Intake

1. Prior to an offender’s arrival, facility staff must review the available case record to verify the offender’s suitability for program participation and to ensure there have been no changes since the referral and acceptance that would affect the offender’s suitability.

2. Facility staff at the receiving CCAP facility must run a VCIN/NCIC record check, prior to any transportation from site to site, to determine if any pending court matters or warrants may exist. Any pending matters will be addressed as soon as possible.

3. Facility staff must verify that the appropriate authorization order is available and that there are no active pending charges, detainers, or other unsatisfied incarceration obligations to interfere with the offender’s participation in the program.

4. When the authorization order is incorrect or there are active pending charges, detainers, or other unsatisfied incarceration obligations that would prevent the offender from participating in the program, the referring P&P Officer and the CCAP Referral Unit must be notified via email.

F. Admission - See Operating Procedure 940.4, Community Corrections Alternative Program.

1. Offenders will be assigned to a facility that provides the appropriate programming.

2. The Referral Unit and the receiving facility must coordinate the offender’s date for admission with the referral agency and jail or other facility housing the offender, if applicable.

3. If the offender is a self-report, the supervising P&P District staff will complete a urine screen within two business days prior to transportation for intake.

4. Promptly after arrival at a CCAP facility, a facility P&P Officer must obtain the offender’s participation in the analysis of their problems, the setting of the objectives, and establishing a Case Plan to be completed in the Community Corrections Alternative Program.

5. A participant assigned to one facility may be transferred to another facility as needed for bed space or other management considerations or to provide services to the participant that are not available at the original facility.

   a. Transfers will generally be used to address programming needs documented in the Case Plan or to address previously unidentified needs.

   b. The Facility Unit Heads or designees of the respective facilities will submit transfer requests to the CCAP Referral Unit for review and approval/denial of the recommended transfer. (4-ACRS-5A-06)
V. REFERENCES
Operating Procedure 940.4, Community Corrections Alternative Program

VI. FORM CITATIONS
Program Eligibility Brief Screening for Community Corrections Alternative Program 930_F5
CCAP Referral District Checklist 930_F6
CCAP Programming Requirements 930_F7 (CCAP Referral Unit Use Only)

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

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

Signature Copy on File 10/5/18
A. David Robinson, Chief of Corrections Operations Date