

Chapter 7

The Functions of Classification and Assessment Models in Correctional Treatment

Introduction: The Development of Classification Models

Seiter (2002, p. 138) states, “Classification is a process that is used throughout the criminal justice decision making process to identify and match offender needs with correctional resources, resulting in the assignment of offenders into groups of individuals with similar traits or characteristics.” Kratcoski (2004, p. 207) notes, “Classification of offenders, if properly executed, enables correctional agencies to maximize the use of their personnel and resources to provide treatment that will enable the offender to fulfill his or her specific needs and to assure, as well, that the concerns of other interested parties are met.”

At the first contact between a juvenile or adult offender, some form of classification, even if it is not written into policy, is used to determine if the offender should be transported to jail or a juvenile detention facility, be diverted from formal processing, or have the case put on the docket for formal processing. If the person is convicted of a crime, a classification system to determine those eligible for community sanctions and those requiring institutional sentences is used. If placed under community supervision, the offender is classified on the basis of risk to the community and treatment needs. If sentenced to a prison or correctional facility, the offender is classified on the basis of security risks as well as needs for specific types of programming.

The use of classification systems in the field of corrections for purposes of control, punishment, and rehabilitation of inmates housed in jails and correctional facilities dates back several hundred years in the United States. For example, the Walnut Street Jail, located in Philadelphia, and the Eastern Penitentiary, located near Philadelphia, used the solitary confinement model, which provided for treatment focused on offender penitence coupled with a work program to prepare the inmate to earn a living after release.

In the twentieth century, Gill (1970) developed a classification system to separate prisoners according to their potential for treatment and training. Kratcoski

(2004, p. 208) indicated that, "Gill's plan included the separation of prisoners into distinct groups, either within an institution or by housing them in separate facilities. Gill believed new prisoners should be isolated from the others for purposes of observing their behavior and determining their potential for rehabilitation. From this point, prisoners would be classified as tractable to respond to treatment efforts and change their behavior, intractable-resistant to change and requiring strong methods of control, defective-mentally ill, retarded, or physically handicapped, and those who could be handled best in some form of work release or community placement facility." It is likely that some form of Gill's system, with modifications and with different labels used to identify the categories, is being used at the present time.

Gradually, multifunctional classification systems were developed that assessed the inmates' potential for dangerousness. These instruments were used for assigning inmates to different cell blocks within the prison or for assigning convicted offenders to different security level prisons. Assessment models used for assigning inmates to specific treatment programs within the prison were gradually developed and put into use. In the latter part of the twentieth century, classification and treatment assessment tools were developed and implemented in community corrections.

The classification systems now used in both correctional facilities and community corrections are more complex and multipurpose than the earlier models. Kratcoski (2004, p. 213) notes, "A distinction can be made between those that are used for administrative and management purposes and those designed to treat and rehabilitate the offender. Those of a management nature are designed to enhance control and to predict the likelihood that an offender will commit new criminal acts after release. The treatment-rehabilitation systems try to differentiate offenders on the basis of their needs, attitudes, motivations, and attributes and then provide the treatment necessary to bring about the desired changes in values, attitudes and skills that will inhibit the offenders from recidivating."

The same model or assessment system can be used throughout the prison system of a state and in the various community correction programs, with a given state making slight modifications to adjust for demographic differences, including the population size of the community, the number of people being supervised, the departmental and community resources available for the agency to draw on, the level of supervision needed by the majority of those being supervised, the level of training and skills of the supervising officers, and other factors. However, if the model does not provide for differential assessment and programming based on the needs of those being assessed and treated, the model is not likely to produce the outcome desired in terms of bringing about the desired changes. The offenders must be matched with the specific treatment program which best addresses their problems and needs.

Flynn (1978, p. 86) stated that, to be effective, a classification system should have several key components, including:

- An explicit statement regarding the function and purpose of the classification system.
- The classification system should be theoretically based.
- The classification system should be dynamic so that the system's predictive powers in determining how best to reduce recidivism will increase as the conditions of supervision change.
- The assumption on which the classification is based must be explicit.
- The critical variables of the classification typology applied must be specific so that the utility of the system can be empirically tested.
- The classification system should be useful and feasible in order to facilitate efficient management and optimum use of available resources.

Use of Classification in the US Probation System

Eaglin and Lombard (1982, p. 1) noted that, prior to 1980, a variety of case management classification methods were used in the supervision of probationers in the various US court districts throughout the United States. These ranged from purely subjective methods that depended on the experience of the probation officers to determine the type and amount of supervision needed to several statistical predictive instruments. In 1980, the federal probation system adopted a risk prediction scale (RPS) that uses a classification system to place offenders *into high activity and low activity supervision*. The criteria used for the classification of offenders are a number of criminogenic factors, such as prior criminal history, nature of the current offense, and personal needs factors.

A report (IBM Business Consulting Services, 2004) addressing the need for the federal probation system to develop a comprehensive system of assessment of those under federal supervision stated that the primary goal of the assessments was to determine the most effective ways to reduce the recidivism of those under probation supervision as well as those under post-incarceration supervision. Cohen and VanBenschoten (2014, p. 41), after reviewing prior research and recommendations of the IBM report, stated, "To meet the key goal of recidivism reduction, three major principles had to become guiding tenets of federal probation: officers should work most intensively with high-risk offenders (the risk principle), focus on the criminogenic needs of high-risk offenders (needs principle), and match treatment modalities with the ability and learning styles of offenders (responsivity principle)."

The Post-Conviction Risk Assessment (PCRA system) adopted by federal probation developed four categories of risk of recidivism for those placed on federal probation. These categories are *low risk, low/moderate risk, moderate risk, and high risk* (Cohen and VanBenschoten 2014, p. 52). The amount and type of supervision required for those placed in each risk category is based on both prior criminal history and criminogenic factors requiring intervention such as substance abuse, family instability, anger management, and need for preparation for employment.

Cohen and VanBenschoten (2014, p. 52), in a nationwide study of more than 20,000 offenders placed on federal supervision between May 2010 and December 2011, found that, “the majority of offenders under federal supervision (78 %) were classified as either *low* or low/moderate risk at the start of their supervision period.” The authors stated that, “The study also found that many offenders initially placed in the higher risk categories are reclassified into lower risk categories by their next assessment. This was especially true for *high risk* offenders; about half of these received a reduction in risk by their second assessment and nearly two-thirds were moved into a lower risk category by their third assessment.” They also found that few of those initially placed in the low-risk categories were moved up into higher-risk categories during the time of their supervision.

In 2014, the US Department of Probation developed a *Guide to Judiciary Policy* in which it was recommended that, for purposes of supervision, the four risk categories in the PCRA that were used to classify those convicted of violating a federal law be combined into one of two categories—“high activity” supervision and “low activity” supervision. This instrument was to be used by all US courts throughout the United States (Cohen, Cook, & Lowenkamp, 2016, p. 3). The scale used to determine if a person needed high supervision or could be supervised under low supervision consisted of information about the offender such as completion of a high school education, age, number of prior arrests, steady employment, and freedom from opiate use. The response to each item was weighted, and, depending on the score received after the offender was assessed, the offender would be given either high supervision or low supervision by a US probation officer. For example, if a convicted offender received a zero on the large majority of items, this would indicate that the person was not likely to recidivate and could be given low supervision. If the person received a high score on the majority of items, the likelihood of the person recidivating was much greater, and a high supervision was recommended (Cohen et al., 2016, p. 4).

Cohen and VanBenschoten (2014, p. 4) note that, for those classified as low-risk offenders, the judicial policy recommends that officers initially apply minimum levels of supervision and increase the amount of supervision if the offender’s behavior warrants an increase. In a study of what effect the new policy had on federal probation officers’ approach to supervising low to low/medium probationers, the researchers compared the amount and types of supervision used by probation officers with low-/medium-risk offenders before the new policy guidelines were established with the amount and types of supervision given to these categories of offenders after the guidelines were put into effect. The research confirmed that federal probation officers appeared to be following the guidelines for supervision of low-risk offenders recommended in the *Guide to Judiciary Policy*. The authors concluded, “This research shows that low and low/medium risk offenders in the post policy group had fewer officer/offender contacts than those in the pre-policy group.” Cohen and VanBenschoten (2014, p. 9) concluded, “Importantly, the policy of supervising low risk offenders less intensively has not compromised community safety. Post policy low-risk offenders were no more likely to recidivate compared to their pre-policy counterparts.”

State Classification Systems for Probation and Parole

In 1982, the National Institute of Corrections provided grants for states to develop statewide classification systems for probation and parole. The vision of NIC was that statewide classification systems would be useful tools for probation and parole officers, who would have objective criteria to assist them in making decisions on case management plans. Also, it was hoped that with the use of standardized instruments throughout the state, the likelihood of officer prejudices being a factor in the decisions would be reduced.

The statewide systems that were developed considered both control and treatment in the classification. Typically, two instruments were used, one to assess the risk the offender living in the community would present and the amount and type of supervision that was required to assure that the community would not be harmed. The other instrument was used to assess the needs of the probationer. The information gleaned from the two instruments served as the basis for the development of a case management plan.

The Wisconsin Classification System

One of the states to first receive funding to develop a classification instrument for probation was Wisconsin. After a period of evaluation as to the predictive value of the model developed in Wisconsin, the model was implemented in 1977 (Eaglin & Lombard, 1982). The Wisconsin model gained wide attention throughout the United States, and many states developed their own probation and parole classification system models after the Wisconsin prototype.

The Wisconsin Classification System contained the following integrated components: (Crooks, 2000, p. 251):

1. A risk assessment scale developed by multiple regression analysis to identify and weight offender characteristics and criminal history items that best predict further criminal behavior.
2. A risk reassessment scale developed to identify and weight offender items that reflect overall adjustment during the course of supervision.
3. A needs assessment scale
4. Treatment guidelines developed by supervising agents to identify noncrisis offender problem and needs areas and potential strategies and resources to service them.
5. A client management classification (CMC) system and treatment strategies developed empirically in the form of a semi-structured interview and agent impressions to assist in placing offenders in one of five differential treatment groups and to provide information concerning appropriate treatment strategies for casework planning.

6. A standardized classification and reclassification process was developed for probationers and parolees. At admission to supervision, the risk and needs assessment scales are scored, and the offender is assigned to one of three supervision levels (specific agent contact required at each level). At 6-month intervals during supervision, the risk reassessment scale and needs scale are scored, and an offender is reclassified if appropriate and assigned to the appropriate level.
7. A workload budgeting and deployment system developed as a result of time studies that measured the time required by agents to perform activities and meet supervision standards and used in the budgetary process and to deploy staff.
8. A management information system generated as a product of the classification and reclassification process and used as a foundation for evaluation, planning, and operations.

Crooks (2000) notes that follow-up evaluation research completed several years after the Wisconsin Classification System was implemented revealed that the use of the plan resulted in a significant impact on probation and parole outcomes. Probationers and parolees under high-risk/needs supervision had fewer new convictions and probation and parole revocations. Also, fewer absconded when compared with the period before the system was implemented. In addition, the low supervision given to those who scored low appears to be the appropriate supervision, since there did not appear to be any adverse effects for these probationers and parolees, even though they were not supervised closely.

Although the Wisconsin Classification System generally served as the model for the probation and parole classification systems developed by other states, there were several concerns about the model. These concerns centered on the length of time and the amount of paperwork needed with each case to complete the classification and case management process. For example, some of the officers argued that the outcome for many cases was predictable, for example, for first time offenders who were involved in a situational criminal offense, and it was a waste of their valuable time, time that could be used more effectively in supervision of the more serious offenders. Another major concern was that there were major variations in the laws, law enforcement, and judicial procedures of the various states, and a nationwide, even statewide, system could not respond to the variations that existed among the states or even within a given state.

The Ohio Experience

Under the direction of the Ohio Department of Rehabilitation and Correction, the Adult Parole Authority administration began the development of the Adult Parole Authority Case Management System (CMS) in 1979. A Case Management Task Force composed of management and line staff along with consultants was formed. The first step was to review classification instruments used in the Wisconsin system

and instruments used in the federal system and to select those items from these instruments that appear to be the most useful, modify the items if necessary, and, once a classification system was constructed, complete research on the model before fully implementing the Case Management System. Crooks (2000, p. 252) noted that, "It was generally understood that the completed case management product would contain components applicable to both the probation and parole populations served by the Adult Parole Authority." When fully implemented, the CMS would be used in all of the counties in Ohio in which the Adult Parole Authority supervised probationers and parolees who had been convicted of felony offenses. While the Adult Parole Authority (APA) supervised parolees in all of the 88 counties of Ohio, the APA supervised probationers in almost two-thirds of the Ohio counties. The remaining counties, predominately those with large populations, maintained their own probation departments. During the development process, the county and state staff assigned to the Case Management Task Force worked together to iron out differences in the data collection methods used, manner in which the information on the probationers in the various counties was recorded, and other factors that might interfere in the attempt to standardize the proposed case management instruments so that they would be readily understood and useful to those who planned to adopt the Case Management System.

Before the CMS was implemented, county and state staff members assigned to the task force arranged for all state and county personnel who would be using the system to be trained in its use. This training was provided by either state and county staff or consultants. Several of the trainers who were involved in the training of officers in Wisconsin were employed to provide the initial training for the Ohio probation and parole officers.

Crooks (2000, p. 264) indicated that county and state staff also jointly developed a CMS entrance training program for the purpose of orientating the new state and county staff on the use of the risk assessment, needs assessment, and needs reassessment instruments. He also noted that, "In addition to participating in the training during the transfer process, the urban and rural counties came together to discuss common issues and problems as they reached the same level of implementation."

The Case Management System was implemented throughout Ohio during 1980 and 1981. The Adult Parole Authority administration decided to introduce the system gradually, that is, in one district of the state at a time, so there would be ample time to complete research on the CMS and make adjustments if necessary.

The final items selected for the risk assessment scale consisted of:

1. Number of prior felony convictions (or juvenile adjudications)
2. Arrested within the five (5) years prior to arrest for current offense (exclude traffic)
3. Amount of time employed for the last 12 months (prior to incarceration for parolees)
4. Alcohol usage problems (prior to incarceration for parolees)
5. Other drug usage problems (prior to incarceration for parolees)

6. Number of prior adult incarcerations in a state or federal institution
7. Age at admission to institution or probation for current offense
8. Number of prior probation/parole supervisions
9. Number of prior probation/parole revocations resulting in imprisonment (adult or juvenile)

Each of the items listed was weighted with a score of 0 indicating that the factor was not of any concern and was an indicator that the probationer or parolee was not likely to recidivate and thus did not need a great deal of supervision. A score between 2 and 6 on a factor indicated that the likelihood of the probationer or parolee recidivating was greater and thus more supervision was needed. Once the scores for all items were tabulated, the probationer or parolee would be placed in one of three categories, low supervision, medium supervision, or high supervision. There was a standard set of expectations for the supervising officer pertaining to number and types of contacts the officer was to complete with those being supervised for each category.

The final version of the needs assessment consisted of:

1. Emotional and mental stability
2. Domestic relationship
3. Associations
4. Drug abuse
5. Alcohol usage
6. Employment
7. Academic/vocational skills/training
8. Financial management
9. Attitudes
10. Residence
11. Mental ability (intelligence)
12. Health
13. Sexual behavior
14. Officer's impression of needs

As with the risk assessment, the officer obtained the information for each item from several sources. These included official documents; information found on a presentence investigation; and interviews with the family, employer, or other acquaintances and from a personal interview. As with the risk assessment instrument, the items on the needs assessment were weighted. A low score on a factor would indicate no problem, and a high score would indicate that the probationer or parolee had a significant problem with the factor, be it drug abuse, alcohol abuse, domestic relations, and others. The higher the total score, the more attention was required to address the problem or multiple problems of the person under supervision.

After the risk and needs assessments were completed on the probationer or parolee, a case management plan was developed. Those assessed were placed into one of three supervision levels. These consisted of:

- **Maximum:** High failure potential or great number of problem/needs requiring services
- **Medium:** Lower failure potential or problem/needs areas, but requiring officer involvement
- **Minimum:** Least failure potential or few significant problem/needs areas

The development of a case management plan for those assessed was based on the information gleaned from the assessments of the risks and needs of the individual. The interpretation of the items on the scales, particularly the needs instrument, presented difficulty for some officers. Since several of the items were highly subjective, reliable information was not available for some items, and in some areas, the officers just did not have the knowledge base to make a viable judgment. Another major problem that often occurred was that, even though the assessment of the needs was correct, the supervising officer did not have the skills to provide the services needed, and often there were no service agencies in the community to which referrals could be made.

Evaluations of the Case Management System were completed (Kratcoski 2004). As a result of the findings of these evaluations, several modifications in the CMS were made. The CMS was revised several times during the ensuing years, and in 2015 Ohio House Bill 86, passed by the Ohio state legislature, authorized the implementation of the case supervision and management model throughout Ohio. The model provides opportunities for criminal justice personnel to assess adult offenders who are at different stages in the criminal justice process. As noted in a document published by the University of Cincinnati Corrections Institute (2016, p. 1), “More specifically, the ORAS is composed of 5 tools: 1) pre-trial; (2) prison intake; 3) community supervision; 4) reentry from a long-term prison stay (4+years); and 5) reentry from a short-term prison stay (less than 4 years).”

Comparison of Evidence-Based Classification Models

The comprehensive evidence-based classification and treatment models used in various states are very similar in content. This is no doubt due to states developing systems borrowing items for their models from those states that have already developed and implemented classification models. Of course, another reason for the models being similar is that when research is completed to determine what factors best predict outcomes such as recidivism, or likelihood to benefit from a specific form of treatment, the same items show up. What does differ is the scoring on the items and the scores that are used to place offenders in different supervision categories. For example PEW (2016, p. 3) notes that, “Research has identified both changeable (dynamic) and unchangeable (static) risk factors related to criminal behavior. The seven dynamic risk factors closely associated with criminal conduct that can be assessed and altered through effective intervention are:

1. **Antisocial Personality Patterns**—impulsive, adventurous pleasure seeking, restlessly aggressive and irritable behavior
2. **Pro-criminal Attitudes**—offering rationalizations for crime and expressing negative attitudes toward the law
3. **Social Supports for Crime**—having criminal friends and being isolated from prosocial peers
4. **Substance Abuse**—abuse of alcohol and/or drugs
5. **Poor Family/Marital Relationships**—poor family relationships and inappropriate parental monitoring and disciplining
6. **School/Work Failure**—Poor performance and low levels of satisfaction with school or work
7. **Lack of Prosocial Recreational Activities**—a lack of involvement in prosocial recreational and leisure activities.”

Several states and the District of Columbia have passed legislation that requires the use of a comprehensive evidence-based risk and needs assessment system. For example, the Court Services and Offender Supervision Agency (CSOSA) for the District of Columbia requires that offenders undergo a comprehensive assessment within 25 days of being assigned to community supervision. The risk/needs assessment, referred to as the *AUTO Screener*, “is an “intelligent” risk and needs assessment tool that determines the appropriate level of supervision for offenders and generates an individualized prescriptive supervision plan (PSP) that identifies the offender’s needs and includes recommendations for treatment and support services. The PSP provides valuable information to assist the community supervision officer in supervising the offender. AUTO Screener measures include the offender’s:

- Educational status
- Employability
- Community and social networks
- Patterns of thinking about criminality and authority
- Attitudes and associations (Court Services and Offender Supervision Agency for the District of Columbia, 2016, p. 1)

The PEW (2016, p. 6) lists Arkansas, Kentucky, New Hampshire, and South Carolina as states that have enacted legislation for the implementation of comprehensive risk/needs assessment systems.

Institutional Classification

The classification of those sentenced to correctional facilities is used to facilitate the management of inmates as well as to determine which correctional facilities have the security and resources to best facilitate the rehabilitation process for the inmates.

During the periods before the development of *reception centers*, sentenced offenders would be transported directly to the correctional facility. A classification team, composed of security and treatment personnel, would assess the treatment needs of the inmate as well as the institutional housing placement needed to assure the safety of other inmates and the prison staff. Currently, those convicted offenders who are sentenced to a correctional facility may be first processed and classified at a reception center. The stay at the reception center is usually a short period, a few weeks or less. During their time at the center, offenders are interviewed and given several tests to determine what type of institution placement is appropriate for them in terms of security level and what types of treatment the inmate needs. The security level will generally be determined on the basis of past criminal history, nature of the current offense, and the length of the sentence. At the initial classification, *actuarial* methods are used in conjunction with personal interviews to decide the appropriate risk level. *Actuarial* measures are based on the same principles as those used by insurance companies, i.e., using the information obtained from a large number of past insurers to predict the probability of future events. For example, companies selling life insurance establish premium payment rates based on the age of the insured and the estimated date the insurer will die. The *actuarial* instruments used in the classification of new prisoners are based on comparing the characteristics and behavior patterns of past prisoners who had similar personal factors and criminal histories with those of the inmates currently being classified to predict the likely behavior of the new inmates. If the actuarial score is high, predicting the likelihood that the inmate will be troublesome and in need of high security housing, even though the needs score may be high, the security concerns of management will override the needs of the inmate for treatment. For example, it is likely that a convicted felon sentenced to a long period in prison as a result of committing a series of violent crimes such as armed robbery or aggravated assault with a deadly weapon will be placed in a maximum security facility, even though the programs and personnel needed to treat the offender's disorders are not available. In this case, security is the overriding factor.

If the correctional system does not utilize reception centers and the sentenced felons are classified on their arrival at the facility, the inmate will be classified upon arrival at the institution. Typically, the security level of the correctional facility in which the offender will be housed is determined before the offender actually arrives at the placement facility. In some states, the information from the risk/needs assessments, particularly that which applies to prior offenses and the level of seriousness of the current offense(s), is completed before the placement. What facilities have housing available also determines the type of facility to which the offender is sentenced. In addition, the penal code of a particular state may be the dominant factor in the decision on placement. In some states, the law may require that a person convicted of first-degree murder be sentenced to a penitentiary.

Once the offender is placed in a specific correctional facility, an internal classification is completed. The two major factors considered in this classification process are institutional safety and needs of the inmate. The initial classification is completed to assure that the appropriate security levels are decided upon, and the

individual's needs are identified. For example, medium security level correctional facilities will generally have different levels of security housing units. Some units may be of a dormitory style, while others consist of multi-person or individual cells. Typically, those housed in the dormitory-type units will be the inmates who are classified as lower security risks. These units often have a few hundred inmates who are supervised by one or two correctional officers. In regard to the needs of these inmates, once it has been determined that the inmate has a special problem such as mental health issues or substance abuse, that inmate may be assigned to a special unit in which the programming centers on counseling and treatment for the special problem. Even the low security facilities have a housing unit for those who may become violent or extremely aggressive while in the institution.

Phillips and Roberts (2000, pp. 73–74) report that there are also special housing units within an institution characterized as disciplinary detention units, administrative segregation units, and special management units. They state that, “Disciplinary Detention Units are used to confine inmates who have been determined by the disciplinary hearing officer to have committed serious violations of the correctional agency’s policies and who warrant segregation from the general population for a specified period of time. Administrative Segregation Units are used to house protective custody cases, inmates who are en route to other institutions [and] inmates whose separation from the general population is necessary for the safety, security, or orderly operation of the institution. Special Management Units provide ultra-secure housing and high-supervision programming exclusively for those inmates, who if confined in any less secure setting, would present the most extreme threats to others or to the orderly operation of the institution.”

Another way classification is used by management is for serving as the basis for decisions relating to making changes in the inmates’ housing placement within an institution or in relation to transferring inmates to another institution. After the initial classification, inmates are periodically reviewed on a number of factors, including behavior in the institution, time remaining on sentence, eligibility for parole, and progress in the treatment. Based on an assessment of the factors mentioned, the inmates may be transferred to a lower security housing unit, sent to a prerelease housing unit, or even transferred to another correctional facility. If an inmate causes a serious disturbance within the institution, attacks another inmate or correctional officers, tries to escape, or is difficult to supervise on a daily basis, it is likely that the inmate will be transferred to a higher level security facility or to a higher level security unit within the present facility. For example, inmates housed in a maximum security institution may be transferred to a super-maximum unit. In such units, there is no interaction with other inmates, and the interaction with the institution’s personnel is very limited. They will probably eat their meals in their cell, complete exercising in their cell, or even engage in treatment programs in the cell by way of closed-circuit TV.

The initial classification can be very helpful in facilitating the treatment process. Seiter (2002, p. 142) states that the contact between the inmate and the staff during the classification process can serve as a way of “breaking the ice” by providing an opportunity for personal interaction in a situation where there may be suspicion and

uncertainty about what to expect. Seiter (2002, p. 142) observes, “However, the classification process facilitates the beginning of a process of positive interaction. With both clinical and actuarial approaches to classification, inmates and staff participate in an interview and discussion to clarify certain background factors and identify present needs.”

In institutions organized around *unit management* models, it is likely that several of the units will house inmates with special problems, such as drug or alcohol abuse, mental health problems, or physical health problems. The classification team for such units will normally be composed of the unit manager, a case manager, and a member of the security staff. In addition, a representative of the education department, psychology/social worker staff, medical staff, and recreation department may serve on the classification team. As with other initial classifications, the team reviews all of the files and other information on the inmate that may be useful in determining the needs of the inmate in terms of counseling and treatment. Mental and physical health problems are given special attention, and the inmate may be given physical examinations and psychological testing beyond those given in the normal processing if it is suspected that the inmate has problems that were not detected in previous examinations.

In a research project completed by the National Institute of Corrections on Offender Needs Assessment: Models and Approaches (Clements et al., 2010, p. 98), an assessment for substance abuse is completed that is used to guide the classification team. This guide defines three (3) levels of drug usage: no significant problems, moderate problems, and serious problems. The assessment factors include motivation for using drugs, patterns of drug use, educational background, work history, physical appearance, leisure time activities, and other factors that might throw some light on the type of treatment approach that can be used. Those who would fall into the “no significant problem” category would have never used drugs or have used them infrequently. Those who fall into the “moderate problems” category have used drugs frequently, with negative effects on employment, behavior, and family life. Those who fall into the “serious problem” category have continuously used drugs in the past, with significant negative effects on almost every aspect of the offender’s life. After being assessed in regard to needs and extensively interviewed by the classification team, the inmate is placed in the appropriate unit and a case management plan is implemented.

Classification of Juvenile Offenders

Watcher (2014) noted that if a comprehensive risk/needs assessment is developed for use in the juvenile justice system, it can be used at every stage in the process. Risk assessments have been used for diversion of a youth by police officers at the time of arrest, at the intake interview, to determine if diversion can be used or if the youth must be officially processed and to decide if the youth should be held in detention before an official hearing, and at the dispositional hearing after a youth

has been adjudicated delinquent to assist the judge in a decision on community supervision, probation, placement in a residential treatment facility, or commitment to a youth correctional facility. As with adult offenders, classification models and risk/needs assessments have been used to determine the appropriate correctional facility in terms of security level and the type of treatment plan needed to best facilitate rehabilitation of the youth offender.

Juvenile risk and needs assessment instruments take into consideration the static risk factors (age, gender, ethnicity, prior history of offending), the dynamic risk factors (substance abuse, delinquent peer associates, poor school performance, attitude), and the criminogenic needs factors (substance abuse, delinquent peer groups) that contribute to the youth's deviant behavior. If these factors are removed or even modified, the risk of recidivating may decline. Protective factors are also included in the risk/needs assessment instruments. An Office of Juvenile Justice and Delinquency Prevention (OJJDP, 2016, p. 4) report states, "protective factors are characteristics of the youth or the environment surrounding the youth that interact with risk factors to reduce the odds of involvement in delinquent or criminal activities. Some examples of protective factors are the presence of caring and supportive adults in the community and at school; having a stable family; and having a positive/resilient temperament."

The approaches used in the development and administration of risk/needs assessments for juvenile offenders are similar to those used for adults: "The *actuarial* approach involves scoring items related to reoffending from an assessment tool, then weighting and summing the items. A statistical formula is then used to calculate a total risk score. The risk score is cross-referenced with an actuarial table that provides an estimate of risk over a specified time frame, such as 5 or 10 years. The estimate is based on the number of individuals who received the same risk score and recidivated during the development of the assessment tool" (OJJDP, p. 4).

In the *structured professional judgment* approach, sometimes referred to as the objective approach, experienced practitioners rate the factors considered to be related to delinquency causation on their importance in predicting further delinquent behavior (OJJDP, 2016). The final risk/needs assessment factors used in the instruments are those considered to be the most important by the practitioners involved in the development of the risk/needs assessment. Each item is weighted in regard to importance.

Many of the risk/needs assessment models used in the juvenile justice system by juvenile and family courts were developed through the integration of the *actuarial* and *judgment* approaches. Generally, the 10 or 12 items considered most important in predicting further delinquency are used for the risk assessment, and 10 or 12 items considered the most important pertaining to the needs of the youth are included in the needs instrument. The categories for risk are generally high, medium, and low. A specific score on the weighted items would designate placement in a particular risk category, with higher scores indicating greater risk and need for more supervision. The same format is followed in the scoring and categorizing of the needs instrument.

The combination of the risks and needs instruments (in some jurisdictions, risk and needs assessments are combined into one instrument) is used to develop the case management plan for the juvenile being supervised. A specific model might be adopted for statewide use, as is the case in Ohio. For example, “The Youthful Level of Service/Case Management Inventory (YLS/CMI) is a dynamic risk/needs assessment and case management inventory for juvenile offenders. The assessment is based on the same principles and theory behind the LSI-R with modifications to make the instrument responsive to juvenile offenders” (University of Cincinnati Corrections Institute, 2016, p. 2).

Some of the experienced professionals working with juvenile justice agencies, particularly those serving as probation officers and counselors of special programs, express concern because the case management of those being supervised has become somewhat mechanical. That is, a lot of the individual decision-making on a case and discretion has been eliminated, and basically the professional is required to follow the plan produced by the risk/needs assessment model. In addition, if the model is adopted statewide, it often will not consider the differences in importance of some factors, such as the influence of peer groups for a youth growing up in the lower income area of a large city as opposed to that of a small town and even the influence of the school experience in a small-sized community in which the teachers may have much more information about students and their families than would be found in large school systems. In answer to these concerns, the case management plans derived from the risk/needs assessments normally will have an override provision. If a supervisor does not believe the plan is right for the youth, an adjustment in the plan can be made, providing the supervisor can provide reasons for making the adjustment.

Summary

Some form of classification, the process of placing objects, individuals, or groups with similar characteristics into categories, is used in all phases of the criminal justice process beginning with the classification of types of criminal behavior (personal crimes, property crimes, public order crimes) and continuing through classification of the severity of crimes (misdemeanor, felony) and types of sentences (community based, institutional) given of for those convicted of crime.

In corrections, various forms of classification are used to determine those who are diverted from the criminal justice process and those who are officially processed and the type and amount of supervision a person on probation might receive (minimum level of supervision, medium level of supervision, or high [intensive] supervision). In correctional facilities, the security levels of correctional facilities are classified as super maximum, maximum, medium, and low security. Classification models are also used internally to place inmates into different housing units (dormitory, single cells, double-occupancy cells) and to place residents into specific treatment programs (education, anger management, substance abuse).

The current evidence-based classification models used in supervising and treating probationers and parolees grew out of the actuarial instruments that were able to predict with a high degree of accuracy which offenders placed on probation would be likely to recidivate. Those assessment tools currently being used are similar than those used in the past, with the current models being pretested and modified, when needed, before being implemented. The tests currently used to determine the power of each item in the assessment tool to provide a predictive value are much more refined than those of models used in the past.

Risk/needs assessment models and case management models have been developed for use in the supervision and treatment of juvenile offenders. Generally, these models are similar in construction to those found for adults, with some modifications to take into account the fact that the youthful offender is in a developmental process, and thus some of the behavior patterns and attitudes are more subject to change than are likely to be the case with adult offenders.

Another trend in the use of statewide assessment systems is to classify offenders at each step of the criminal justice process. Various instruments are used at the pretrial phase, sentencing phase, institutional phase, and post-institutional phases. The information collected at each is shared with those at a later phase, depending on the final outcome of the process. For example, the information collected at the sentencing phase regarding risks, needs, and other relevant information will be sent to the correctional facility if the person is sentenced to prison. The information collected on the person while incarcerated will be sent to the parole division on release from the institution.

Since the nature of correctional supervision and treatment has become more complex, involving input from personnel physical health, mental health, and social service agencies, there is a need for those in the correctional agencies to share information pertaining to risk/needs and case management plans with these other agencies.

Discussion Questions

1. Compare the actuarial and structured professional judgment approaches used in developing risk/needs assessment instruments. Which approach is likely to produce the most accurate predictions of future criminal/delinquent behavior?
2. Why are some criminal justice practitioners somewhat critical of case management plans derived from risk/needs assessments?
3. Harry is a 24-year-old white male. He separated from his wife 2 years ago and has been living with his mother in a rented apartment in a low-income area of a large city. His father deserted the family when Harry was a small child. Harry has not completed high school and does not have steady employment. He worked at several fast-food restaurants, but was fired because of poor work habits. Harry spends most of his leisure time hanging around with the guys at various taverns. Occasionally he will get quite intoxicated and has become very

belligerent toward his mother when she lectures him about being a lazy worthless drunk (just like his father). Harry was arrested for theft of property (grand theft) and attempting to escape from the scene of a crime. Harry had two appearances in the juvenile court for theft and property destruction, but this his first appearance in the criminal justice system.

You were asked to select the most important factors to consider in placing Harry in a risk category (high, medium, low). Rank the importance of each factor by giving a score of 1–3 for each item. Would you recommend a high level of supervision, medium level of supervision, or low level of supervision?

4. Discuss how classification systems are used in correctional facilities for purposes of management.
5. Outline the characteristics of the unit management administrative model used in correctional facilities in regard to the security needs of the institution and the treatment needs of the residents.
6. Discuss the initial classification process followed for new inmates. Why is this process important? What are some of the major reasons for reclassifying an inmate?
7. Identify the special units within a correctional facility given in the text and discuss the functions related to each unit.
8. Discuss what information a classification official would use to determine if a new inmate should be placed in the special unit for drug/alcohol abusers. If you were conducting an interview with the inmate, what questions would you ask that pertain to the drug/alcohol problem?
9. Why is it necessary for criminal justice personnel and service providers (medical, mental health, psychological, social services) to share and exchange information about their clients?
10. Discuss the differences between static and dynamic risk factors. Provide the dynamic risk factors that research has shown to be highly predictive of future criminal or delinquent behavior.

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