

The JFA Institute
Washington, D.C./Austin, Texas

Conducting Justice and Corrections Research for Effective Policy Making

Travis Community Impact Supervision
Two Year Department Reassessment: Accomplishments
and Areas of Further Work

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Summary

The Travis County Community Supervision and Corrections Department (CSCD) in Austin, Texas (the county adult probation department) teamed up in late 2005 with *The JFA Institute* in an effort to reengineer the operations of the department to support more effective supervision strategies. The goal was to strengthen probation by using an Evidence-Based Practices (EBP) model. This realignment strategy is called the Travis Community Impact Supervision (TCIS).

This report presents the results of a reassessment of the department conducted in July and August 2007 with the specific purpose of identifying the accomplishments under the TCIS project and the areas that need further work. During July and August 2007 the technical assistance team conducted a review of the department. The technical assistant team met with focus groups of probation officers and managers, conducted observations of the new processes, conducted one-on-one interviews with key department officials and probation officers, and examined data to reassess the department and develop the recommendations presented here.

The organizational review conducted for this report shows that all major milestones have been accomplished close to the original timelines. This includes the creation of a new diagnosis process based on evidence based tools, the reorganization of the intake process, the redesign of supervision and sanctioning strategies, and the creation of process and outcome tracking reports.

The report identifies further work that needs to be done to fine-tune the policies adopted and to finalize other tasks that could not be completed during the project period. The emphasis should be to complete tasks critical to the effective functioning of the diagnosis process, implement the new personnel evaluation system, realign the training strategies, revamp the program referral, monitor program placement and waiting list processes, conduct critical research to help in the communications strategy with judicial officials, and determine if an electronic reporting system similar to the one developed in New York City can be implemented to reduce workloads.

The department has accomplished a transformation that changed and strengthened the internal processes and culture of the organization to promote EBP. It is now critical to fine-tune the policies adopted and to promote “fidelity” in implementation. Of course, the critical question to ask now is, “So what?” Does strengthening the internal processes and culture to promote and support EBP make any difference in improving public safety and offender outcomes?

Therefore, the next phase of the technical assistant part of the project should be to set a research agenda that can shed some light on this critical policy question.

I. Introduction

The Travis County Community Supervision and Corrections Department (CSCD) in Austin, Texas (the county adult probation department) teamed up in late 2005 with *The JFA Institute* in an effort to reengineer the operations of the department to support more effective supervision strategies. The goal was to strengthen probation by using an Evidence-Based Practices (EBP) model. This realignment strategy is called the Travis Community Impact Supervision (TCIS).

TCIS is a “top to bottom” realignment of organizational practices to support a more effective operational model. TCIS implementation has been supported by the Texas Department of Criminal Justice, Community Justice Assistance Division and County officials. Dr. Tony Fabelo, *The JFA Institute*, has provided technical assistance to guide the project. Dr. Geraldine Nagy, director of the Travis Community Supervision and Corrections Department, has been in charge of implementation. The Open Society Institute in early 2006 also provided funds to document changes and conduct mapping analyses.

The Travis County project began with a comprehensive evaluation of the department in the summer of 2005. This evaluation identified the strengths and weaknesses of the department.¹ Working with department leaders, a re-engineering plan was developed and the TCIS project started in November 2005. During the first phase of the project from November 2005 to August 2006 (ten months), the research, plans and strategies for TCIS were developed and put in place. During the second phase between September 2006 and August 2007 (twelve months), the major components of TCIS were implemented. This includes the creation of a new diagnosis process based on evidence based tools, the reorganization of the intake process, the redesign of supervision and sanctioning strategies, and the creation of process and outcome tracking reports.

This project is also a policy development project for Texas and the nation. The Travis County CSCD is probably the only probation department in the nation that is implementing a methodical organizational-wide reform to support EBP in all aspects of the organization. Many probation departments maintain that they are or have implemented EBP but this is usually done for a specific program or a specific segment of the organization. In Travis, the effort is departmental wide and, to a considerable extent, the changes include educating and influencing judicial officials on supporting and using EBP. In this regard, Travis is an “incubator” site to learn the strategies and barriers to effective implementation of EBP and the potential impact of these strategies on offender outcomes and public safety. Therefore, ten “incubator” reports documenting many aspects of the reform have been written and distributed nationally.

This report presents the results of a reassessment of the department conducted in July and August 2007 with the specific purpose of identifying the accomplishments under the TCIS project and the areas that need further work. During July and August

¹ Dr. Tony Fabelo and Angie Gunter, August 2005. “Organizational Assessment of Travis County Community Supervision and Corrections Department: Facing the Challenges to Successfully Implement the Travis Community Impact Supervision Model.” *The JFA Institute*, Washington, DC and Austin, TX.

2007 the technical assistance team conducted a review of the department. The technical assistant team met with focus groups of probation officers and managers, conducted observations of the new processes, conducted one-on-one interviews with key department officials and probation officers, and examined data to reassess the department and develop the recommendations presented here.

II. Results of Organizational Reassessment

A. Overview of Strategic Process and Timelines

Figure 1 below shows challenges and goals identified for the project in the strategic planning session of October 2005. The strategic planning session was facilitated by Dr. Nagy, Dr. Fabelo and Mr. Mark Carey, a consultant on the implementation of Evidence-Based Practices. Session participants included 25 members of the department who were carefully selected to cross represent different areas of expertise, responsibilities and sensitivities important to the successful development of implementation strategies and to gather support for the organizational changes. The staff was divided in groups along areas of expertise, but the three day planning session was conducted with all staff present and participating in every conversation, regardless of area of expertise. The expertise groupings were: (a) assessment and diagnostic; (b) case supervision strategies; (c) sanctions; (d) personnel development and training; (e) personnel evaluation measures; and (f) quality assurance.

Figure 1: Challenges and Goals Identified in Strategic Planning Session, October 2005

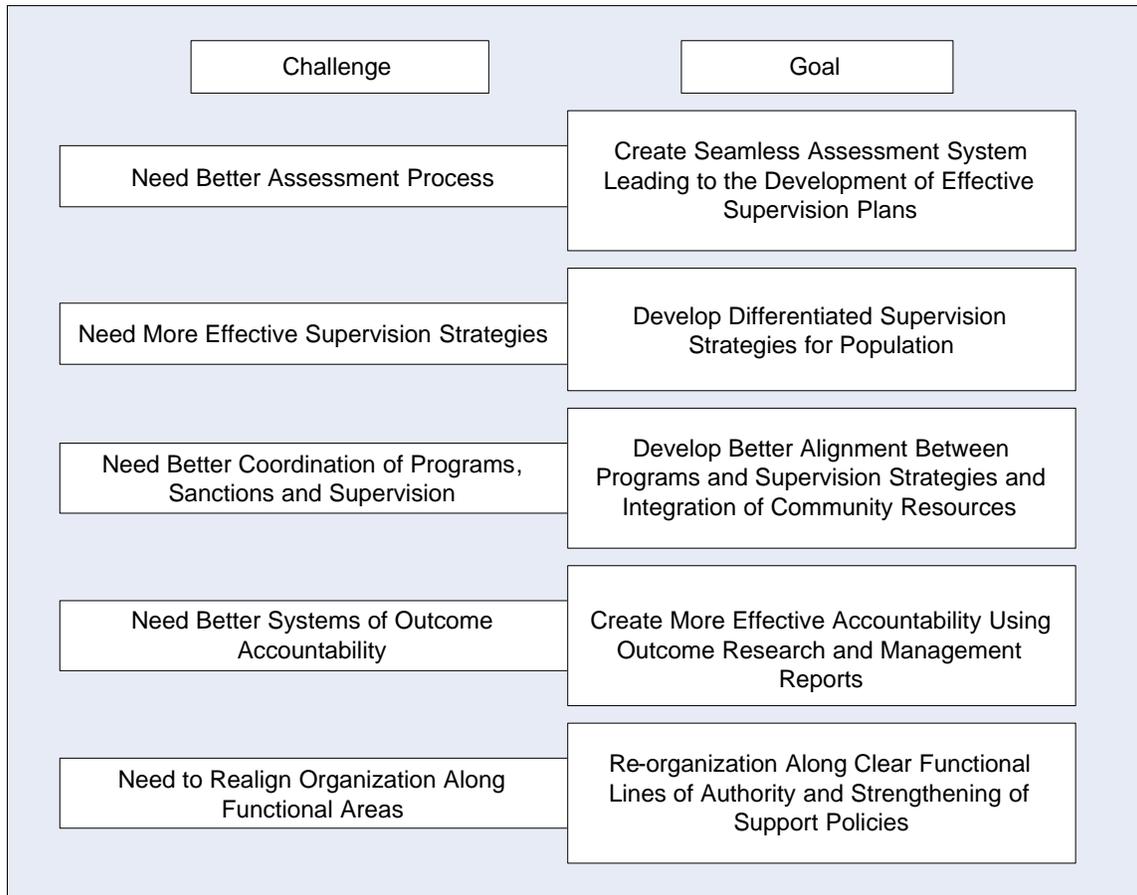
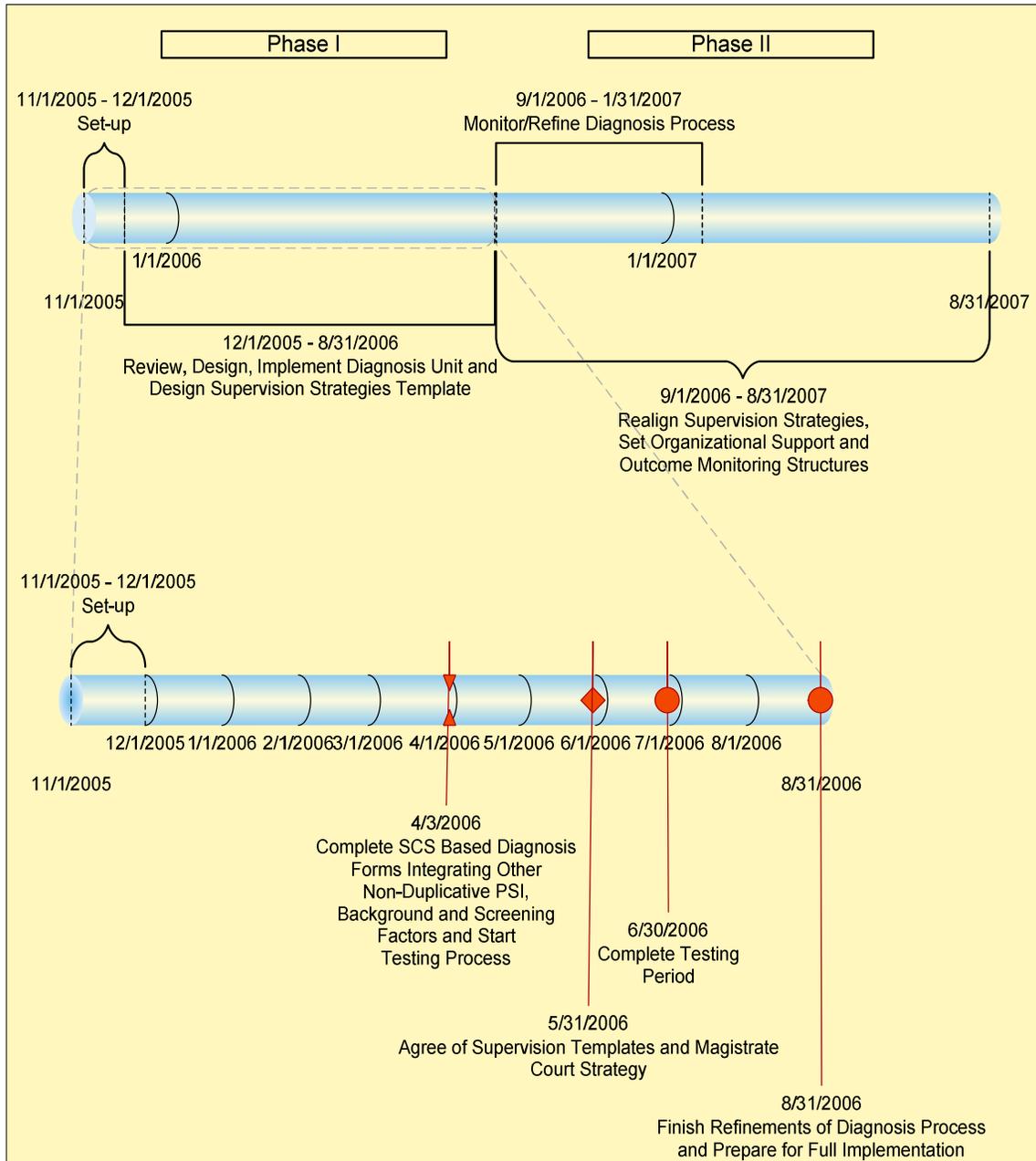


Figure 2 shows the original two-year time chart for the project as presented in January 2006. *The organizational review conducted for this report shows that all major milestones have been accomplished close to the original timelines.* This includes the creation of a new diagnosis process based on evidence based tools, the reorganization of the intake process, the redesign of supervision and sanctioning strategies, and the creation of process and outcome tracking reports.

Figure 2: Original Two-Year Time Chart for the Project

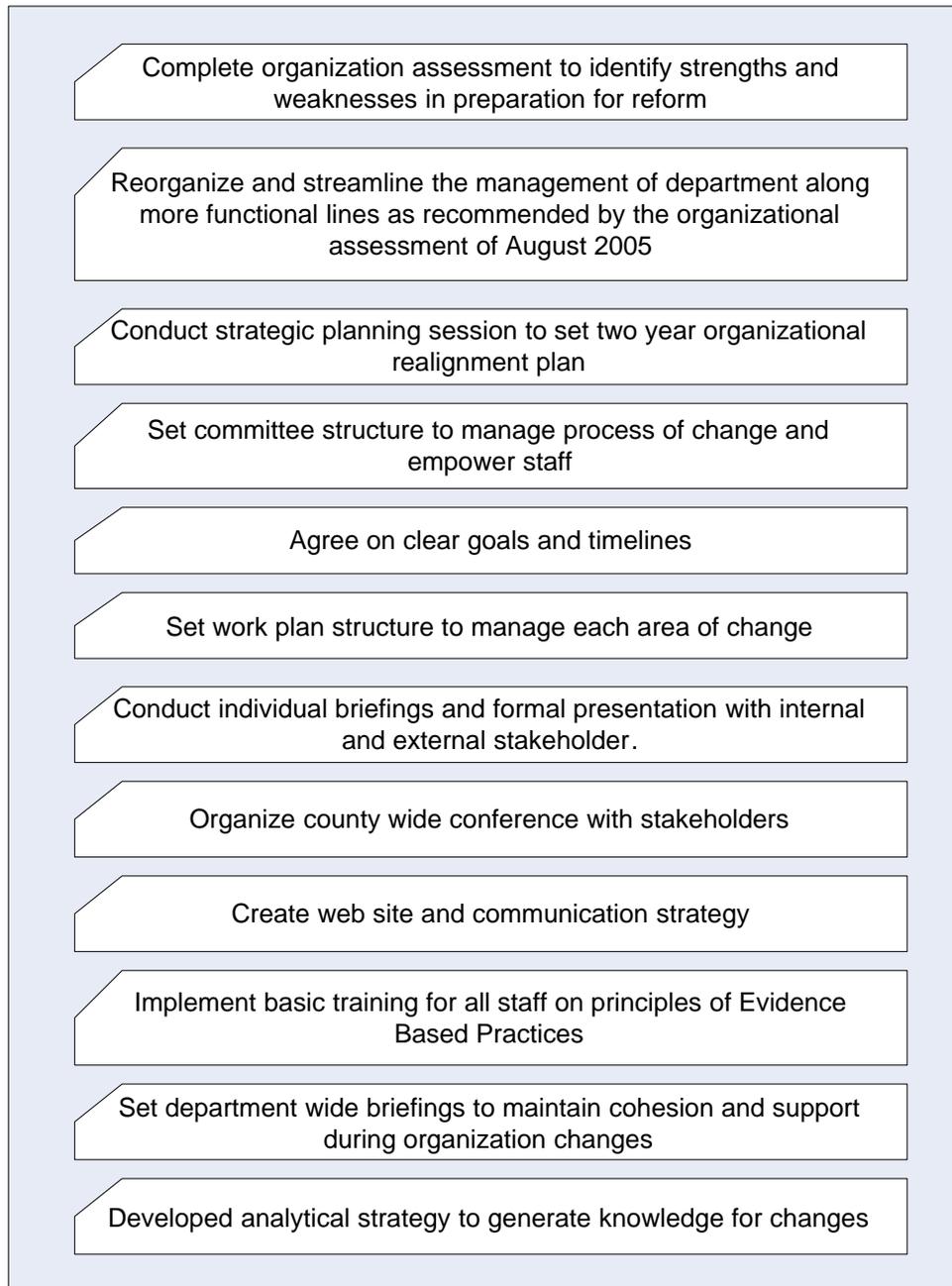


The areas for organizational changes were diagnosis processes, supervision and sanction strategies, training, offender programs, and accountability. During the 22 month period between November 2005 and August 2007 the department's management and staff responded effectively to the demands for changes needed to implement TCIS. Judicial and county officials have also maintained their support for the changes reflecting their confidence on the management and technical assistance team. Thanks to the strong support, most of the changes proposed have been implemented within the original timeline. The only two exceptions have been the implementation of a new

personnel evaluation system and appraising the quality of programs available to the department. As discussed below, the changes in the personnel evaluation process was intentionally slowed down to reassure staff that any abrupt changes would not take place. Determining the quality of programs available to the department also proved to be a more difficult task than originally expected. A draft of a program inventory has been completed but assessing program quality proved to be more time consuming and logistically difficult than expected. Both of these must be addressed in the future.

Figure 3 summarizes the activities and accomplishments related to setting the strategy, timelines and stakeholder support to start the organizational changes. The strategic planning session set the goals for the two year period. Six implementation committees were organized to be responsible for the design and implementation of changes in the key areas. Goals and timelines for the project were agreed upon with management and committee chairs, meetings were conducted with stakeholders inside and outside the organization to explain the goals and plans, basic training sessions to familiarize stakeholders with the principles of EBP were conducted and a communication strategy was adopted to support the process. Based on recommendations made in the August 2005 assessment, the director of the department also reorganized the management structure of the department to facilitate implementation along more clearly defined functional areas.

Figure 3: Activities and Accomplishments Related to Setting a Strategy and Support Structure for the Organizational Changes



B. Diagnosis Process Accomplishments

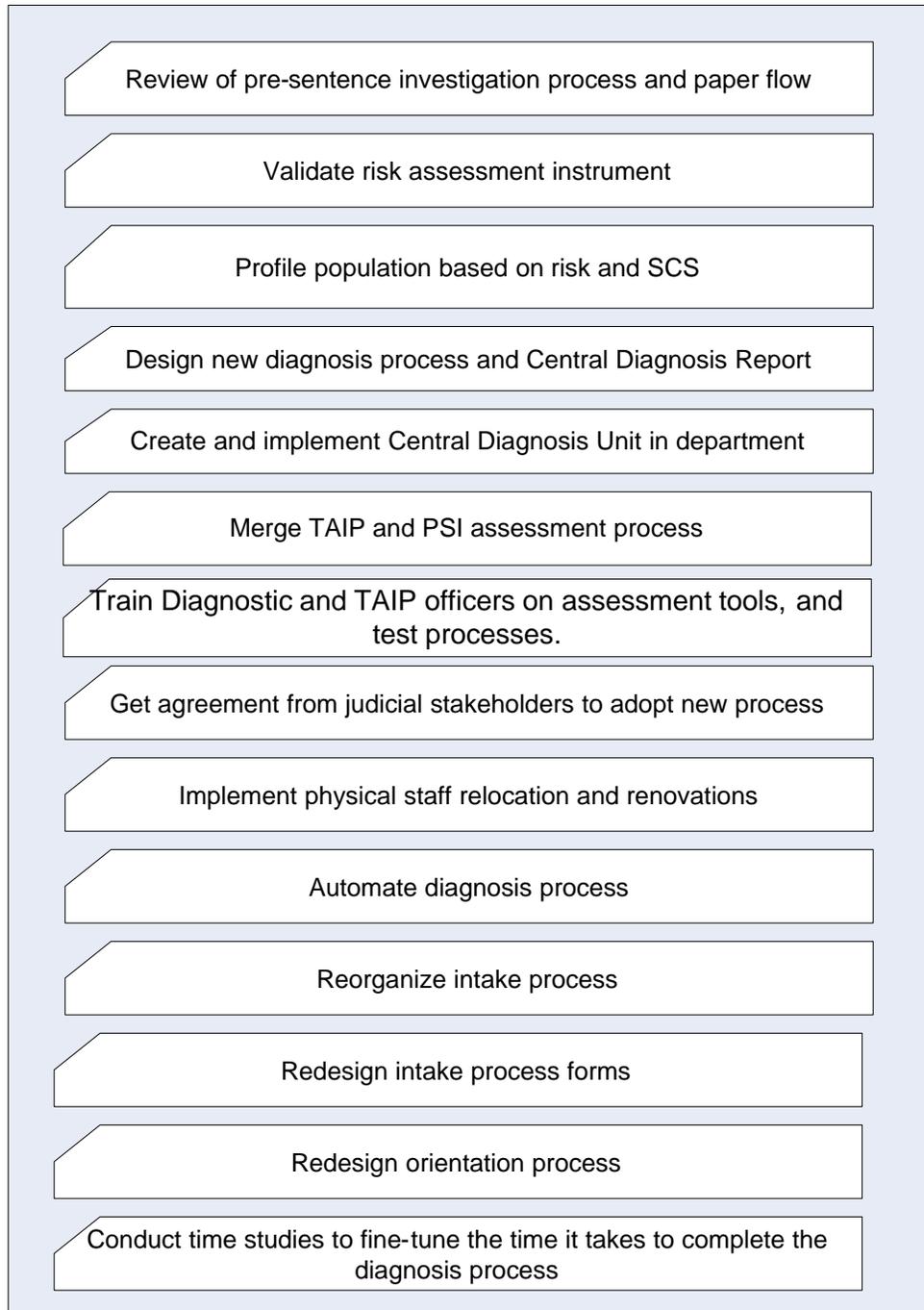
Figure 4 summarizes the activities and accomplishments related to the implementation of a new diagnosis process. This is the most critical area for the project, as an evidence-based diagnosis process is needed to properly identify the risk and criminogenic needs of offenders. The new diagnosis process replaces the former narrative Pre-sentence Investigation (PSI) and gives judicial officials an assessment-driven profile of offenders before sentencing. In addition, it produces the information to set conditions of supervision and identify appropriate supervision strategies. In this area, a very complicated, redundant paper work process was analyzed and then streamlined by creating a Central Diagnosis Unit. A new Central Diagnosis Assessment Form and a Court Diagnosis Report were created, consolidating in one seamless package all relevant assessment tools. The assessment tools include the risk instrument and the Strategies for Case Supervision (SCS) criminogenic assessment plus other screening tools for substance abuse and mental health.

Prior PSI and Treatment Alternative to Incarceration Program (TAIP) staff were physically consolidated into the Central Diagnosis Unit. This required major office space renovations and relocation of staff, automation of the new forms to facilitate use and transmission of diagnosis information within the department, and reorganization of orientation and intake processes to support the new centralized assessment process. All these activities were completed successfully.

The risk instrument used as part of the diagnosis process was also validated with Travis data. A profile of criminogenic characteristics of the Travis probation population was developed using standard scientific research methods. A clear communications agenda was implemented to inform judicial officials of the new diagnosis process, to review the research related to the population profile and risk of the population, and to get their approval for implementing the new diagnosis process.

The new centralized diagnosis process started in April 2007 and judicial officials since then have seen more cases that have been diagnosed using the new format and report. Judicial officials report liking the new report and find it more comprehensive and useful than the former PSI. Probation officers and managers report the same. There were initial minor glitches with the automation of the diagnosis report and an expected "learning curve" as diagnostic officers utilized the new processes. The automation issues are being addressed. In addition, the Diagnosis Unit management has created a "feedback form" to get information from the probation officers to assure that officers are fully aware of the reasoning for certain diagnostic judgments and/or can make suggestions for improvement. It is important to note that probation officers are getting more detailed and systematically organized information compared to the prior pre-sentencing investigation and this makes the Diagnostic officer's judgments or data collection more visible than in the past.

Figure 4: Activities and Accomplishments Related to Designing and Implementing a New Centralized Diagnosis Process

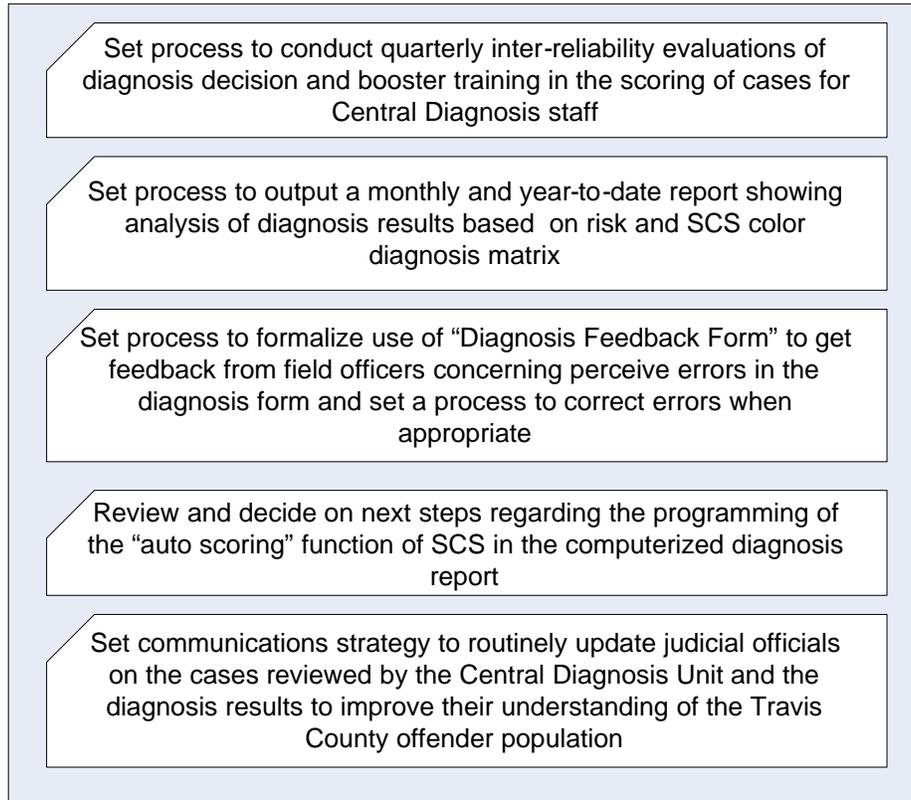


C. Diagnosis Process Areas of Further Work

Figure 5 summarizes the areas of further work related to diagnosis. One of the top priorities is to set a process to conduct quarterly inter-reliability evaluations of diagnosis decisions with booster training sessions for Central Diagnosis staff. As logistically possible, every quarter, groups of three or four diagnosis staff should be asked to “score” the risk and SCS assessment of a similar set of cases. Once the scoring is done, the scores among the staff should be compared, particularly in the more subjective areas of the assessment tools. Ideally all the cases are assessed or scored the same; but when disparities are present, the scoring and the assessment of specific items should be reviewed and discussed.

The follow-up discussions should be directed at identifying strategies to improve the consistency of decisions. Once a few sessions are completed, the problematic assessment areas should be identified and booster training should be designed to address the relevant issues. This inter-reliability process should be complimented with the creation of a monthly and year-to-date report showing analysis of diagnosis results based on the risk and SCS color diagnosis matrix. This report will show patterns in diagnosis results and, with enough history, should serve to monitor any apparent unexplainable variation in the “normal” distribution of risk and SCS scores of the population. For example, a review of the first three months of decisions under the new diagnosis process shows a larger proportion of offenders diagnosed as “red” high risk offenders than on the baseline study done prior to implementation. These data need to be analyzed further.

Further work should be done to formalize the use of the “Diagnosis Feedback Form” to get feedback from field officers concerning perceived errors in the diagnosis form and set a process to analyze and correct errors when appropriate. In addition, the Department should review and decide on next steps regarding the programming of the “auto scoring” function of SCS in the computerized diagnosis report; and set a communications strategy to routinely update judicial officials on the cases reviewed by the Central Diagnosis Unit and the diagnosis results to improve their understanding of the Travis County offender population.

Figure 5: Issues for Further Work in the Area of Diagnosis

D. Supervision and Sanctions Strategy Accomplishments

Figure 6 summarizes the activities and accomplishments related to the implementation of new supervision strategies. One of the main goals of TCIS is to better match supervision strategies to the risk and criminogenic needs of the population as identified by the new diagnosis process. .

The redesigning of supervision strategies to achieve the above goals has been accomplished. The structure of the supervision plan has been modified to emphasize the need to address criminogenic needs. The initial interview and subsequent interview protocols have been changed to allow for more time for "motivational interviewing" techniques during office visits. The "chronos" template used by the officers to document interventions and the results of their visits with the probationers have also been modified to emphasize the need to document actions related to criminogenic needs. The "chronos" has been automated to facilitate record keeping. Additionally, based on earlier funding available to the department, caseloads in targeted areas were reduced from an average of about 135 to 108 with the hiring of additional officers and the redeployment of cases. A Voice4net phone messaging and scheduling system was also implemented to improve efficiencies and free officers' time for supervision. Caseloads were mapped to determine distribution in the community. Finally, a new sex offender treatment and supervision protocol has been adopted that provides for better management of these offenders.

Figure 6: Activities and Accomplishments Related to the Development of Conditions of Supervision and Supervision Strategies

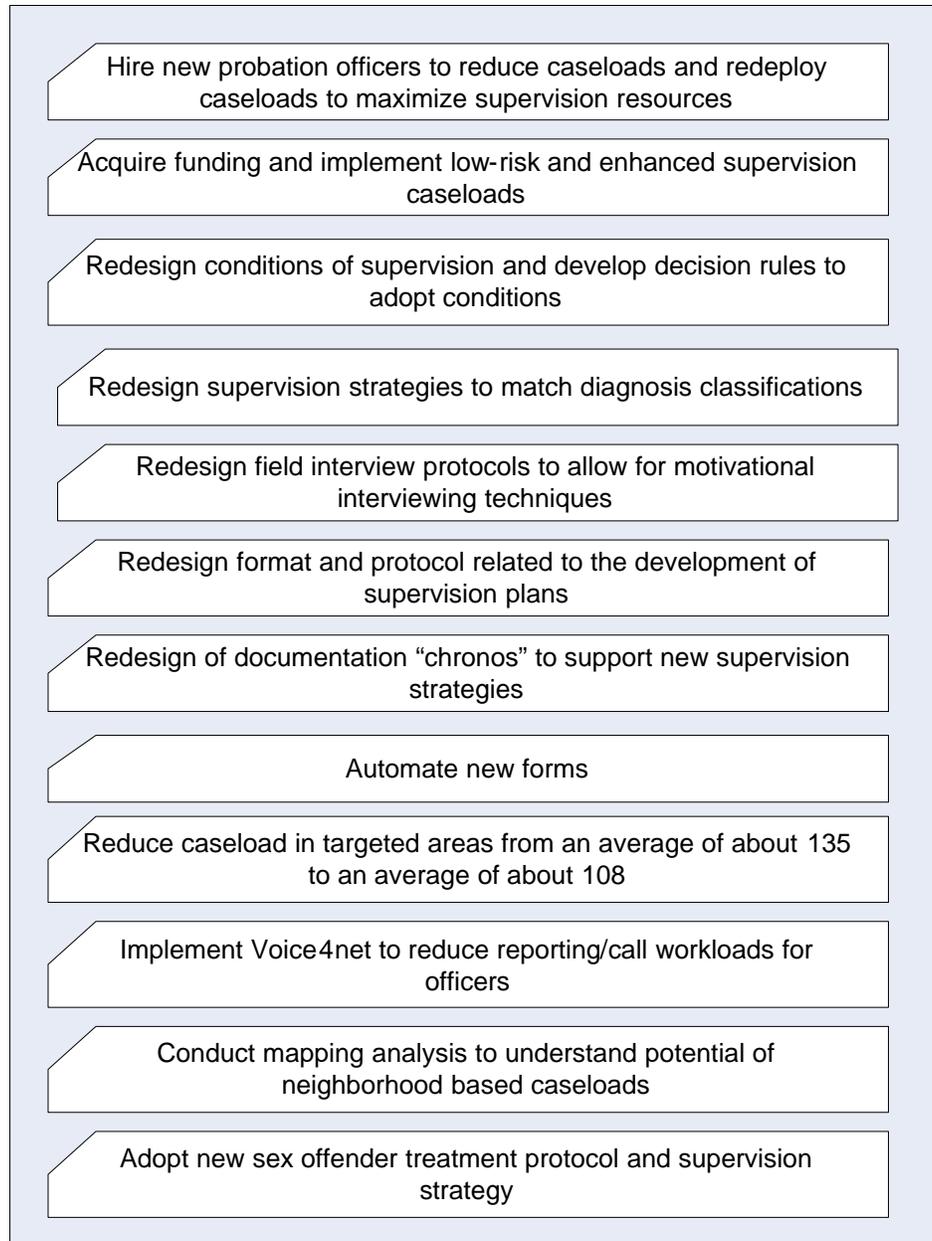


Figure 7 summarizes the activities and accomplishments related to the implementation of progressive sanctions strategies and reduction of the absconder population. One of the biggest barriers to an effective implementation of progressive sanctions for violations is to have the judiciary agree on a uniform set of sanctions policies that consistently apply to violators. Traditionally, each judge has his or her own sanction policy, creating a system in which a probation officer has to follow multiple guidelines based on each judge’s preference. The alternative is to develop a consistent

set of sanctions that are applied based on the risk and criminogenic needs of the probationer. This has been accomplished in Travis. Travis judges in April approved a risk-based progressive sanctions and incentives procedures manual laying out a uniform system of progressive sanctions that follows the logic of the diagnosis and supervision scheme. The manual also establishes incentives for probationers doing well under supervision, including incentives for early discharges.

In late 2005, absconder cases were reviewed and a new process was established to better identify potential probationers at risk of absconding. An Absconder Unit was created to concentrate on high risk absconders, and a more aggressive collaboration strategy with area law enforcement agencies was adopted. In early 2006 the absconder population declined by 15%. By July 2007, the absconder population had declined by 35%.

Figure 7: Activities and Accomplishments Related to Progressive Sanction Policies and Reduction of Absconder Population



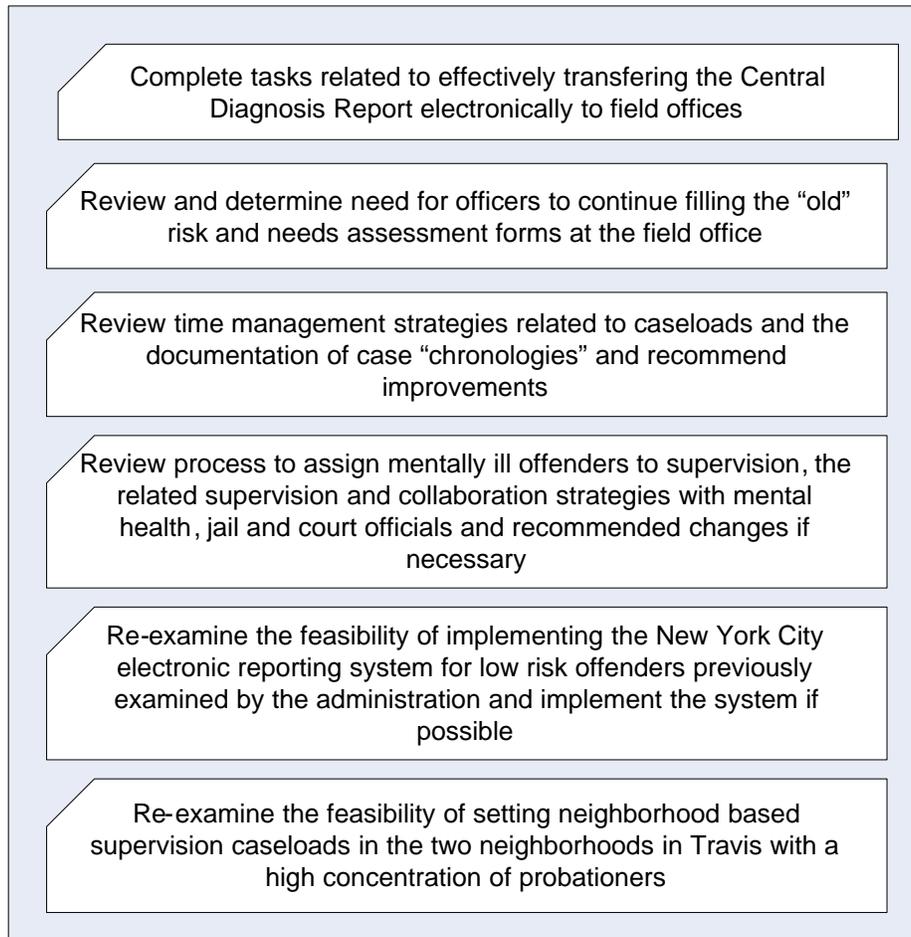
E. Supervision and Sanctions Strategy Areas of Further Work

Figure 8 summarizes areas of further work relating to supervision strategies, including completing tasks related to effectively transferring the Central Diagnosis Report electronically to field offices. The idea is to have a seamless transmission of the report using the computer network. In addition, officers report that offenders are more engaged with their supervision in response to the new motivational interviewing strategies creating an increased workload. The Department should continue to find ways of reducing unnecessary workloads. Specifically, there should be a review of time management strategies related to caseloads and the documentation of case “chronologies”, followed by recommendations on improvements in these task areas. There should also be another examination of the feasibility of implementing the New York City electronic reporting system for low risk offenders. This system was previously examined by the administration and should be implemented if possible.

It is important to note that an earlier goal in this area was to deploy supervision caseloads in two neighborhoods with a high concentration of probationers. The idea was to reallocate cases to officers dedicated to supervision in those locales. Presently, cases are not assigned this way and officers supervise cases from all over the county. The idea was also for officers to become familiar with the neighborhoods and be out of the office visiting the higher needs and risk cases in the field. This goal was not accomplished partly due to the logistical difficulty of making all other changes in the department while also attempting to implement these neighborhood-based caseloads. This goal should be revisited during the third year.

Finally, there should be an examination of the process to assign and release offenders from the substance abuse and mental health specialized caseloads. Regarding the Mentally Ill, Travis County has been part of a Mental Health Learning Site and the Department should continue to pursue methods of more effectively supervising this population. The Department has worked with Travis County Mental Health and Retardation Services (MHMR) to design an integrated service delivery model, and will be co-locating with MHMR and Legal Aid in a centralized more accessible location in the near future. The Department should continue to collaborate with other department including the jail and court officials as well.

Figure 8: Issues for Further Work in the Area of Supervision and Sanctioning Strategies



F. Training Strategy Accomplishments

Figure 9 summarizes the activities and accomplishments related to training. Starting in late 2005, an aggressive agenda was put in place to familiarize the department’s personnel with the principles of Evidence-Based Practices and train appropriate personnel in “Motivational Interviewing” (MI). Between November 2005 and August 2007 there were 233 workshops and/or training sessions involving 3,852 persons (same person taking different training sessions are counted multiple times).

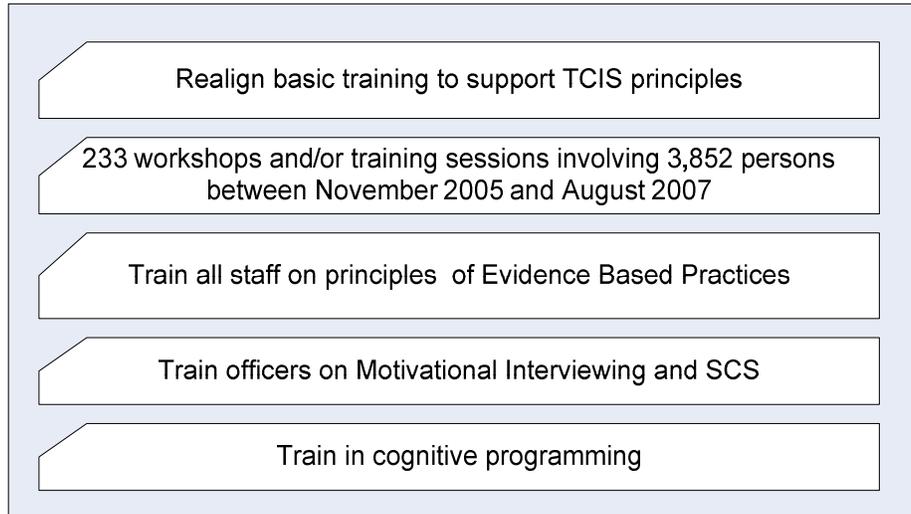
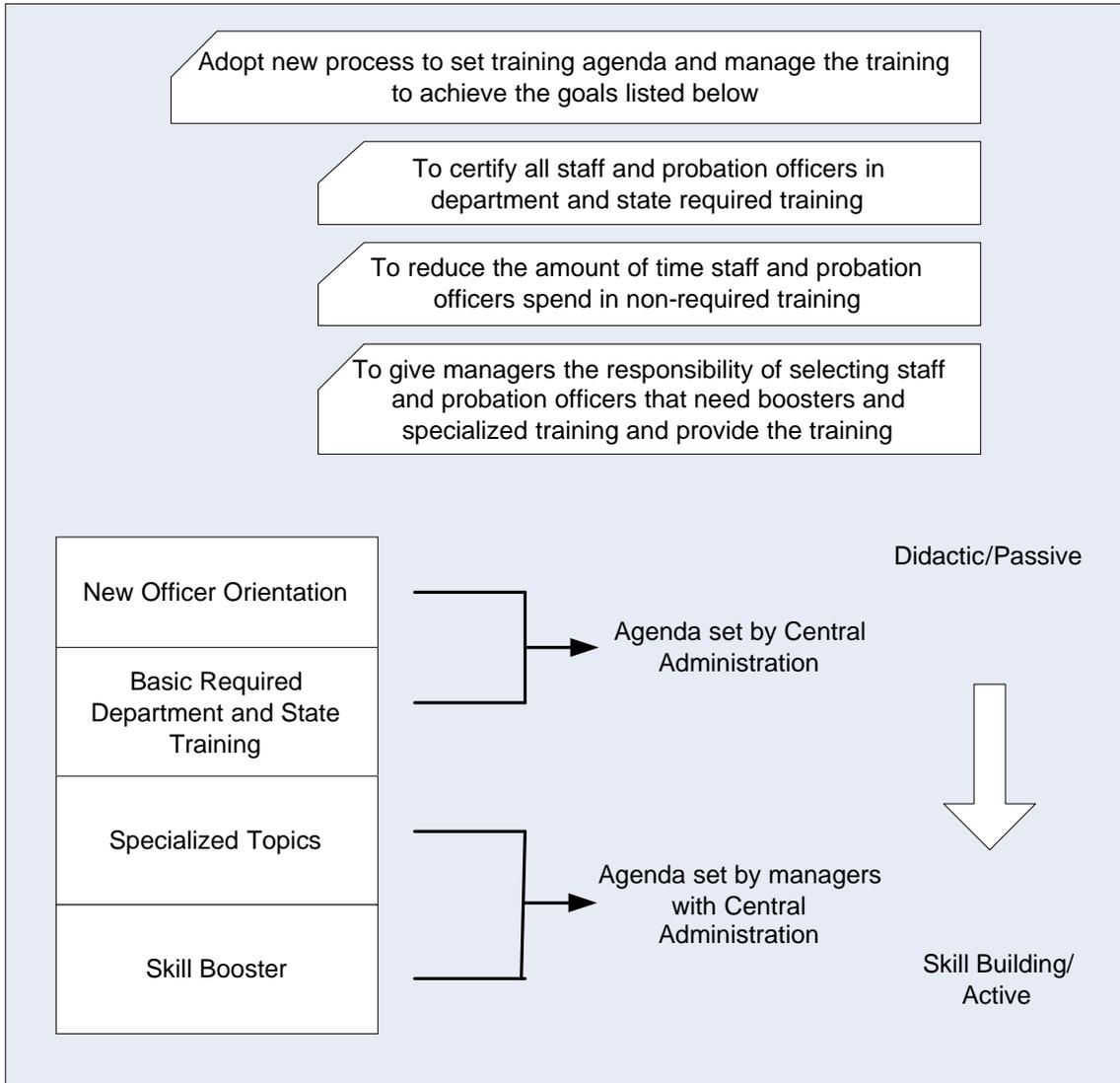
Figure 9: Activities and Accomplishments Related to Training Agenda**G. Training Strategy Areas of Further Work**

Figure 10 summarizes further work needed related to training. Now that all the basic training modules for implementing EBP have been put in place, it is important to step back and re-examine the training agenda. A new process should be put in place to set a training agenda that reduces the amount of formal training and gives managers the responsibility to direct the training of their own staff. As the figure below depicts, the schedule for the new officer orientation and mandatory department and state training should be set by the Central Administration. However, the training for specialized topics and skill boosters should be set by the managers working with Central Administration. This will shift the responsibility to the managers to identify staff needing training boosters and to make sure that those persons identified have access to and participate in training.

Figure 10: Further Work in Redesigning Training Agenda and Goals



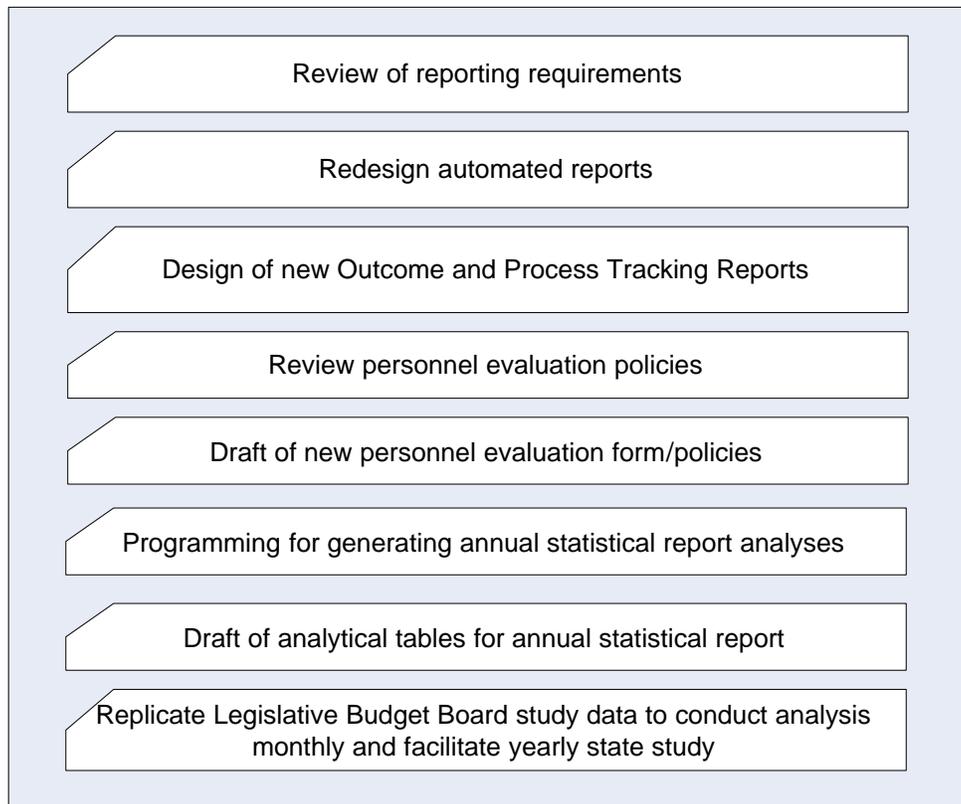
H. Accountability and Outcome Strategies Accomplishments

Figure 11 summarizes the activities and accomplishments related to outcome tracking and accountability. During the project, internal reporting requirements for officers and managers were reviewed. This review led to the redesign of automated reports to streamline the reporting process. Two new reports were created and can now be accessed by Central Administration: a Process Tracking Report and an Outcome Tracking Report. The Process Tracking Report provides key process measures for managers and Central Administration to review monthly. This report is already being produced monthly. The Outcome Tracking Report, which will be produced quarterly starting in September 2007, tracks outcome indicators by unit and for the department. Computer analytical routines have also been created and tested to generate an annual statistical report from the case management information system of the department. This

report will consistently track trends related to the placement population, and revocation population every year.

Finally, the personnel evaluation process was also reviewed and redesigned. A draft of a new personnel evaluation form is presently under review but the new personnel evaluation policy will not be implemented until 2008. The research department has also been able to replicate monthly the in-depth data collected by the annual Legislative Budget Board (LBB) revocation study and present this information to management. This allows the director and managers to monitor revocation trends and be better prepared to address areas of concern that might be raised by the annual LBB study.

Figure 11: Activities and Accomplishments Related to Outcome and Personnel Accountability Policies



I. Accountability and Outcome Strategies Areas of Further Work

Figure 12 shows the areas for further work relating to accountability and outcome strategies. Priority one should be to complete and implement the new personnel evaluation system. Related to that is the need to complete the new Quality Standard Audit Forms to observe and evaluate probation officers and other personnel. The information and programming routines are now available to complete an annual report with historical population trends and statistical analyses.

Other areas for further work include: adding an addendum to the Quarterly Outcome Report showing department-wide outcome information following the Legislative Budget Board study format; identifying computerized case record information and computerized program participation information that can be used for measuring program outcomes and implement a pilot study to determine feasibility of developing a “Program Outcome Tracking” report using this information; and examining the feasibility of setting a process to interview a sample of probationers terminating successfully and unsuccessfully from probation to gather information every year to track probationers’ perspective regarding probation supervision and issues affecting success.

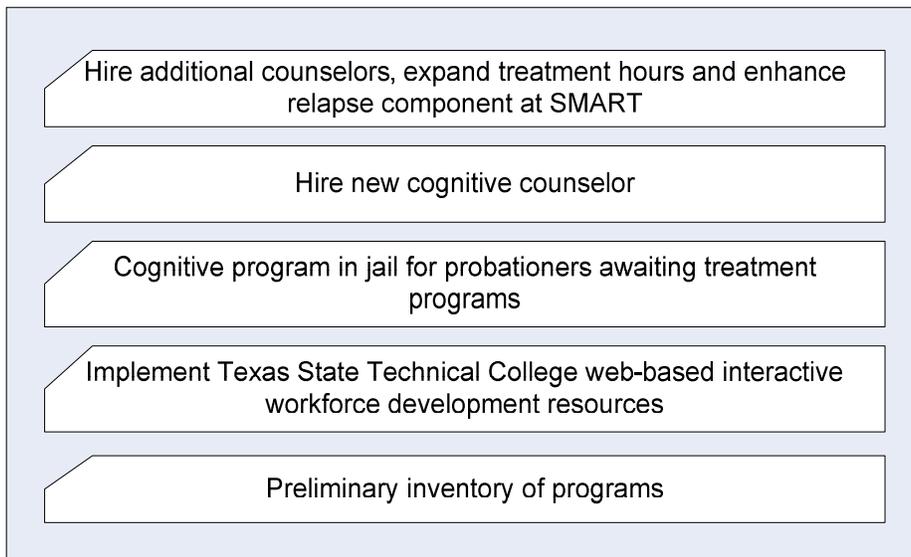
Figure 12: Issues for Further Work in the Area of Accountability and Outcomes



J. Program Strategies Accomplishments

Figure 13 summarizes the activities and accomplishments related to programs. This is an area that is the most challenging due to lack of funding resources to design new programs and the fragmented system of service delivery. An inventory of programs and a strategy to determine the quality of programs was started but not completed. There was neither time nor resources to concentrate on evaluating key programs during this period. This should be addressed during the upcoming year. Still, new counselors were hired and treatment was expanded for the residential substance abuse treatment program (SMART), new cognitive resources were leveraged and a preliminary inventory of the programs was conducted.

Figure 13: Activities and Accomplishments Regarding Programs



K. Program Strategies Areas of Further Work

Figure 14 summarizes the areas for further work regarding programs. The department is limited, and supervision strategies are thwarted, by the lack of outside or state resources to support programs. For example, in FY 2006 the average waiting list for outpatient treatment services was 500 and 70 for residential treatment services. On an annual basis, about 1,000 offenders ordered to participate in intensive out-patient substance abuse treatment are unable to do so.² The department contracts at any point in time for about 50 outpatient treatment slots and 50 residential slots outside the department. The department operates the SMART residential treatment with a capacity of 76 beds.

Putting aside the frustrations over the lack of program capacity, the department can still do a better job in referring offenders to programs, in monitoring program participation, in managing waiting lists, and measuring outcomes with available

² Travis County Community Justice Plan, 2007 page 43.

computerized data. While the department has been able to re-design the Sex Offender Program following best practices, this needs to be done with other populations.

The department's Social Services Division monitors some quality aspects of the programs contracted by the department but for the majority of programs (those paid by the city or county), the department has no authority to monitor their quality. Still, the Social Services Division can play an expanded role in developing a more visible program monitoring system for managers and policy makers to start determining how to address program shortfalls and quality problems. This division also collects billing data tracked by specific program participants and these records can provide the means to set an outcome tracking mechanism for offenders participating in programs funded by the department. There is no timely mechanism to reliably identify offenders that are participating in outside programs or that have been referred but did not show up for the program or could not participate.

The management of program waiting lists also makes it difficult to encourage offenders to participate in programs. At the present time, an offender on a waiting list is required to call the service provider weekly to determine if space is available. It is problematic to base a referral system on the assumption that the probationer will keep up with the provider to determine their waiting list status. This process has to be changed so that the providers inform the probation department when an offender can be accepted in the program. The department should refer this information to the probation officer who is supervising the offender, and the probation officer should then be tasked with locating the probationer and making sure he or she shows up for the program.

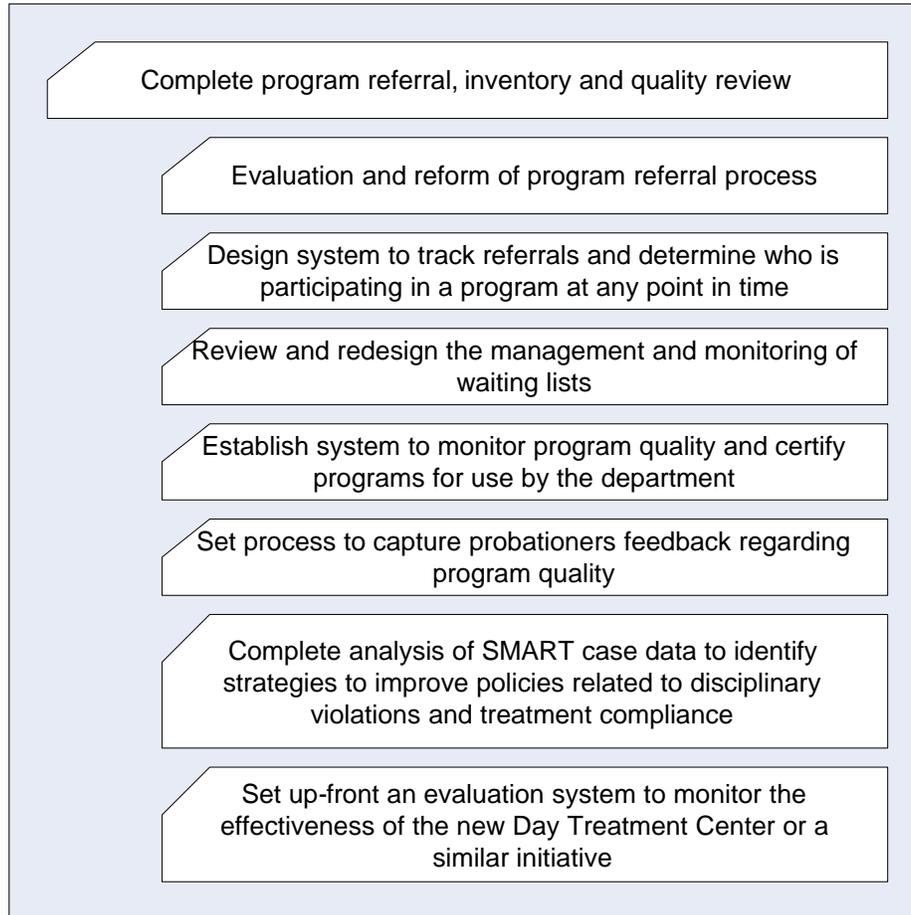
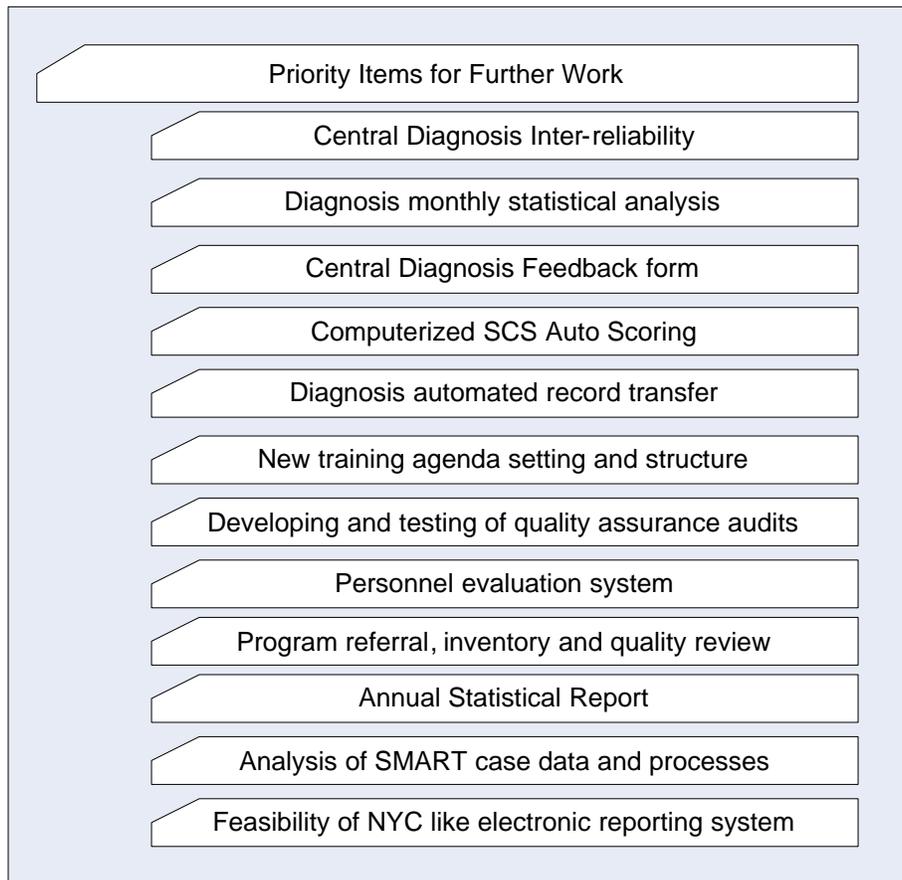
Figure 14: Issues for Further Work in the Area of Programs**L. Priorities**

Figure 15 shows the priorities related to the pending work. All the above items should be done, but the initial emphasis should be to complete tasks critical to the effective functioning of the diagnosis process, implement the new personnel evaluation system, realign the training strategies, revamp the program referral, monitoring and waiting list process, conduct critical research to help in the communications strategy with judicial officials, and determine if an electronic reporting system similar to the one developed in New York City can be implemented to reduce workloads.

Figure 15: Priorities Items for Further Work



III. Documentation Record

Many documents were produced for internal use to assist in the planning and design of TCIS and for external use to document the strategies and progress of Travis as an “incubator” site for re-engineering probation. Figure 16 below lists the internal documents. Figure 17 lists the incubator reports that have been distributed nationally.

Figure 16: Internal Reports Produced to Guide Reforms

	Organizational Assessment of Travis County Community Supervision and Corrections Department (CSCD), Facing the Challenges to Successfully Implement the Travis Community Impact Supervision (TCIS) Model, August 2005
	Strategic Planning Session: Implementing Travis Community Impact Supervision (TCIS) Model, October 12, 2005
	Flowchart of Present PSI and Intake Process and Related Forms, November 29, 2005
	Travis CSCD Flowchart of Offenders from Court to Intake/Assignment, December 9, 2005
	Analysis of Strategies for Case Supervision (SCS) Computerized Data Reporting Under Present Policies, Diagnosis Committee, January 3, 2006
	Analysis of Strategies for Case Supervision (SCS) Computerized Data Reporting Under Present Policies, Diagnosis Committee, Addendum One, January 6, 2006
	Template to Guide Development of Supervision Strategies, Supervision Committee, January 9, 2006
	Proposed Strategy for Quality Control Reports, Quality Control Committee, January 12, 2006
	Conceptual Agreement to Start Development of Supervision Strategies Templates Diagnosis Committee Work Group, January 13, 2006
	Comparison of Key Characteristics of Felons Absconding with Felons under Direct Supervision, January 17, 2006
	Comparison of Key Characteristics of Misdemeanants Absconding with Misdemeanants under Direct Supervision, January 17, 2006

Figure 16 (Continued)

-  Conceptual Agreement on Central Diagnosis Assessment Form Development Strategy, Diagnosis Committee, February 7, 2006
-  Travis County Risk Score Validation and Related Analysis, Report One, March 27, 2006
-  Travis County SCS Pilot Study, Report One: Analysis of Preliminary Data for Review by Department, April 10, 2006
-  Travis County SCS Pilot Study, Report Two: Analysis of Revised Data, April 13, 2006
-  Travis County SCS Pilot Study, Report Three: Supplemental Analysis of Selected Supervision Variables, April 17, 2006
-  General Update and Review of Central Diagnosis Process Research, April 25, 2006
-  Pending Steps to Complete Central Diagnosis Assessment Form, Diagnosis Committee, March 3, 2006
-  Travis County Risk Score Validation Study Group: Review of Absconder Issue Report Two, March 27, 2006
-  Travis County Risk Score Validation: Updated Analysis with Additional Cases Report Two, June 1, 2006
-  Project Overview & Central Diagnosis Process, Report to County Attorney, June 1, 2006
-  Travis County Risk Score Validation: Updated Analysis with Additional Cases Report Two, June 2, 2006
-  Annual Report Statistical Tables and Methodology, August 2007

Figure 17: List of National Incubator Reports Documenting the Travis County Reform Initiative

-  Travis Community Impact Supervision: An Incubator Site to Improve Probation, January 2006
-  Better Diagnosis: The First Step to Improve Probation Supervision Strategies, June 2006
-  Guiding Justice Decisions with Risk Assessment Instruments, August 2006
-  Assessing Supervision Needs: A Profile of the Travis Probation Population, September 2006
-  Thinking About Location: Orienting Probation to Neighborhood Based Supervision, October 2006
-  Resource Report: Central Diagnosis Assessment Forms, November 2006
-  The Logistics of Implementing a Central Diagnosis Unit, January 2007
-  Outcome Tracking Reporting for Improving Probation Management Strategies, January 2007
-  Travis Community Impact Supervision (TCIS): Progress Report to the Texas Legislature, January 2007
-  Measuring Process Efficiency to Improve Probation Management Strategies, March 2007
-  Strengthening the Management and Treatment of Sex Offenders While on Probation, August 2007

IV. Conclusion: The Big Picture

The department has accomplished a transformation that changed and strengthened the internal processes and culture of the organization to promote EBP. It is now critical to fine-tune the policies adopted and to promote “fidelity” in implementation. Of course, the critical question to ask now is, “So what?” Does strengthening the internal processes and culture to promote and support EBP make any difference in improving public safety and felony offender outcomes?

Figure 18 presents the aggregate revocation numbers comparing the “pre-reform” six month period of June 2005 to November 2005 with the “last reform” six months period of February 2007 to July 2007. The “last reform period” reflects the last six months in which most of the reforms were being implemented. The felony revocations during the “last reform” six month period were 6.9% higher in comparison to the “pre-reform” period but technical revocations were 34.5% lower. The percentage of technical felony revocations of all felony revocations declined from 60.2% in the “pre-reform” period to 36.9% in the “last reform” period. Misdemeanant revocations increased by 23.1% but technical misdemeanor revocations declined by 6%. It is important to note that during this period the number of probation placements of felony cases increased by 6.5% and for misdemeanor cases by 17%. This means that the pool of offenders eligible for revocation increased during this period, impacting the overall numbers. It is also important to note that Travis County did not receive an infusion of treatment resources as did other urban counties in Texas in 2006/2007. Thus, there are fewer alternatives to incarceration in Travis County than in other urban counties.

Figure 18: Felony and Misdemeanant Revocations Comparing Pre-reform Period of June to November 2005 with Last Reform Period of February to July 2007

	Pre-reform Period June 2005-November 2005	Last-reform Period February 2007-July 2007	Percent Change
Felony Revocations	477	510	+6.9%
Misd. Revocations	412	507	+23.1%
Technical Felony Revocations	287	188	-34.5%
Technical Misd. Revocations	234	220	-6.0%
% Technical of All Felony Revocations	60.2%	36.9%	
% Technical of All Misd. Revocations	56.8%	43.4%	

Note: Between FY 2005 and 2006 the number of probation placements of felony cases increased by 6.5% and for misdemeanor cases by 17%

The numbers above cannot answer the “so what” question, they are just pointing to recent trends. It is important to point out that the implementation of the Felony Revocation and Staffing Review Committee occurred in early 2006 and it is known that the work of this committee alone impacted a reduction in technical revocations. An early review of over 1,000 officer recommendations showed 80% of the cases in which officers recommended revocation, an alternative sanction was applied after the review by the committee. A special docket in one of the district courts was also created to review technical revocation recommendations. Still, overall revocations, driven by new offenses, increased in the “last reform” period and this is an issue that needs further exploration. For example, it is possible that the increase in revocations for new offenses reflect a swifter response to violations committed by high risk offenders and thus have a public safety benefit, but this has yet to be analyzed.

Figure 19 shows the percentage of felony cases revoked for technical violations by risk level. Very few cases were revoked for technical revocations that were classified as low risk. Travis has the lowest technical revocations for low risk probationers of the five most populous counties studied by the Legislative Budget Board in September 2005. The same study shows that Travis had the highest risk probation population under

supervision in 2005 but the second lowest rate for technical revocations of the five counties. This also provides a baseline for monitoring the impact of TCIS.³

We can say that the department today is a better department because an evidence based diagnosis process and supervision strategies targeting criminogenic risk and needs are in place. There is also better engagement with probationers, less paperwork, and more internal accountability. With the completion of further work listed above, all these organizational changes will be better supported and the department will become stronger. However, the impact on offender outcomes and public safety is still an open, relevant and important question. Therefore, the next phase of the technical assistant part of the project should be to set a research agenda that can shed some light on this critical policy question.

Figure 19: Percentage of Felony Cases Revoked for Technical Revocation by Risk Level, September 2005 to December 2006

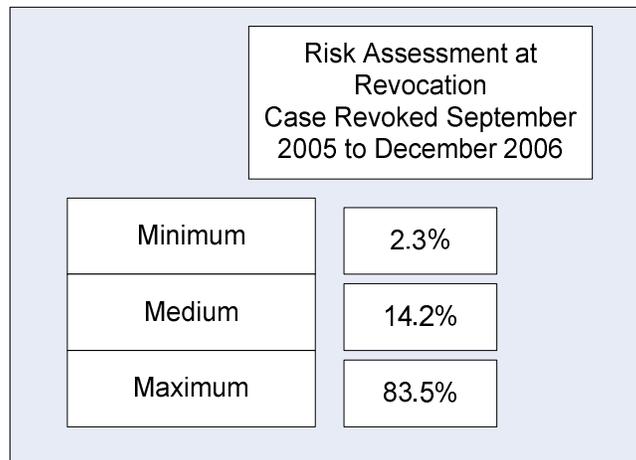


Figure 20 depicts the priority for a research agenda to generate the knowledge to answer this critical question: Does strengthening the internal processes and culture of the department to promote and support “evidence based practices” make any difference in improving offender and public safety outcomes?

The first step is to set a “panel” of internal and external stakeholders with research knowledge to agree on indicators to measure offender and public safety outcomes. This does not have to be an exhausting “academic” review panel but a group of knowledgeable practitioners that can legitimize the best measures. For example, and particularly tricky, is to determine if revoking a person for a new offense is “a failure” (the supervision strategies did not prevent the new criminal behavior) or “a success” (the sanctioning strategy created swift incapacitation of a probationer escalating his criminal behavior to dangerous levels). Perhaps there cannot be consensus on deciding questions like this, but the discussion should help enlighten how to develop reasonable indicators for proceeding with the outcome research.

³ Texas Community Supervision Revocation Project: A Profile of Revoked Felons During September 2005, Legislative Budget Board, September 2006.

Research components then can be implemented, including setting a TCIS evaluation sample and designing a six month in-depth outcome and process evaluation. The in-depth profiling of the diagnosis characteristics of the probation population is of particular interest to judicial officials and doing this research will continue to educate judicial officials and maintain their support. Finally, it is particularly important for future success to identify barriers to improve program quality and design an operational and/or policy strategy to address them.

Figure 20: Policy Research Agenda to Determine Outcome Impact of the Operations of the Department along Evidence Based Practices

Does strengthening the internal processes and culture of the department to promote and support “evidence based practices” make any difference in improving offender and public safety outcomes?

- Set a “panel” of internal and external stakeholders with research knowledge to agree on indicators to measure offender and public safety outcomes
- Set TCIS evaluation sample and design six month in-depth outcome and process evaluation
- Conduct in-depth profile of diagnosis characteristics of population for judicial officials
- Review and evaluate use of progressive sanctions policies
- Evaluate recidivism outcomes for specific outpatient substance abuse treatment programs
- Set evaluation strategy for proposed new residential and/or day treatment program
- Identify barriers to improve program quality and design an operational and/or policy strategy to address them