

# TDOC COMMUNITY CORRECTIONS PROGRAMS

Intensive Outpatient Treatment

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
 INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
1.	<p><b><u>Program Requirements</u></b>                      Evidence based curriculum utilized</p> <p>Program will consist of, at a minimum, 150 hours of structured evidence-based treatment services</p> <p>The program will maintain appropriate treatment ratios as determined by the TDOC Director of Behavioral Health</p>	<p><b>IO 1.01</b></p> <p><b>IO 1.03</b></p>						
2.	Program will consist of, at a minimum, 150 hours of structured evidence-based treatment services	<b>IO 1.01</b>						
3.	<p><b><u>Participant Documentation</u></b>                      Addiction Severity Index (ASI) completed to determine eligibility</p>	<b>IO 1.01</b>						
4.	Clinical file must be maintained	<b>IO 1.01</b>						
5.	Treatment plan established within first 7 days and updated every three months after	<b>IO 1.01</b>						
6.	A minimum of 9 hours per week alcohol and drug evidence-based treatment services	<b>IO 1.01</b>						
7.	Drug screens completed no less than bi-weekly and as clinically indicated	<b>IO 1.01</b>						

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8.	Treatment team meetings, at a minimum of, bi-weekly							
9.	If supervised by TDOC Community Supervision weekly updates will be provided while in active treatment	IO 1.01						
10.	Discharge summary completed within 7 days of discharge (If applicable)	IO 1.01						
11.	<b>If a Supervision component exists:</b> The grantee will follow the TDOC risk and needs assessment. Supervision will be based upon the risk of the offender and the corresponding supervision level standards in accordance with TDOC Policy 704.01 Offender Standards of Supervision (supervision elements will be tested for all supervision components outlined in the policy)	IO1.02						

===== 11 TOTAL

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Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

AGENCY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
1.	The Agency has an organizational chart that is reviewed annually and updated as needed.	<b>AP1.01</b>							
2.	An advisory board is established and representative of the community in compliance with law.	<b>AP 1.02</b>							
3.	The advisory board meets a minimum of once each month for the first three months of a new program and on a quarterly basis thereafter.	<b>AP 1.03</b>							
4.	The agency has a <u>POLICY</u> and procedures manual /operations manual and performance standards reviewed, updated and approved annually by the advisory board/committee. The manuals and standard are made available to staff volunteers and upon request to others. Staff shall sign and date a form acknowledging they have read and been trained on the manuals.	<b>AP 1.04</b>							
5.	All changes to agency policies, procedures, operations manuals and performance standards shall be submitted to TDOC for written approval prior to implementation.	<b>AP 1.05</b>							
6.	Written procedure for dissemination of approved, new, or revised <u>POLICY</u> and procedure to staff, volunteers and where appropriate offenders prior to implementation. Documentation of disbursement is maintained in administrative files.	<b>AP 1.06</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
7.	Written <u>POLICY</u> and procedure outline a system for the program manager or designee to audit and review the operations and programs within the agency. Manager file reviews will be conducted 60 days after intake and a random 10% annual case file review will also be conducted.	<b>AP 1.07</b>							
8	An annual report shall be prepared and submitted within 60 calendar days following the end of the fiscal year to the advisory board/committee and the state director. The report should include statistical data, activities, and financial data.	<b>AP 1.08</b>							
9.	The agency will submit a monthly statistical report to TDOC Central office not later than the 15 <sup>th</sup> of each month. If that date cannot be met, a waiver from the State Director of Community Corrections is on file.	<b>AP 1.09</b>							
10.	Written <u>POLICY</u> states the agency is a correctional program offering services pursuant to TCA 40-36-101, meets state licensing requirements if applicable	<b>AP 1.10</b>							
11.	The grantee has a written policy and procedure/s that provides that the operation of the agency and its provision of services are the responsibility of the Agency Board. Program manager/designee	<b>AP 1.11</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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12.	The grantee will assess all Tennessee Department of Correction offenders using the Validated Risk and Needs Assessment (RNA) as approved by the Tennessee Department of Correction. In addition to the RNA, the grantee can also utilize any additional evidence based validated assessment to determine offender eligibility and treatment needs to be offered within the grantee's program, such as SASSI, DSM-V etc.	AP1.12							
13.	The agency's mission statement affirms that the supervision program provides necessary service to felony offenders with the goal of reducing continued criminal behavior, abstain from illegal substance use and to ensure the safety of the community.	AP 1.15							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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14..	<p>The Grantee will have a written policy and procedure regarding "Release of Information" which address circumstances under which release of information is permitted, restrictions on type of information to be released, and structure and identification information to be placed on the form which includes, but is not limited to the following:</p> <ol style="list-style-type: none"> <li>1.Name of person, agency, or organization requesting forms</li> <li>2.Specific to be released</li> <li>3.Purpose or need for the information</li> <li>4.Expiration date</li> <li>5.Date consent form was signed</li> <li>6.Signature of client</li> <li>7.Signature of individual witnessing client's signature</li> <li>8.Before the release of any information regarding a client, a Release of Information form must be completed, and a signed copy placed into the client's file.</li> </ol>	<b>AP1.16</b>							
15.	The grantee will have a written policy and procedure regarding the Length of time a case record is maintained (five year minimum after discharge from program)	<b>AP1.17</b>							
16.	All incidents occurring within the jurisdiction of the Grantee concerning the safety and securing of the Facility, community, staff, and/or clients, or those which may result in media attention, must be reported according to Tennessee Department of Correction policy	<b>AP1.18</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
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**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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17.	All incidents within the jurisdiction of the Grantee which require physical force or restraint shall be reported in writing, dated, and signed by the staff reporting the incident. Such report shall be placed in the Offender’s case file and a copy forwarded to the State Director of Community Correction within 24-hours of Occurrence.	<b>AP1.19</b>							
18.	There is a written policy restricting the use of physical force unless justifiable self-protection, protection of others, prevention of property damage, and then only to the degree necessary and in accordance with appropriate statutory authority.	<b>AP1.20</b>							
19.	All grantees will follow the Tennessee Department of Correction officer contact note manual to record information into the TDOC’s Offender Management System.  AP1.2*.1 Clinical and or treatment team will enter progress of participants in the TDOC OMS system according to Tennessee Department of Correction processes and procedures.	<b>AP1.21 AP1.21.1</b>							
20.	All Grantees shall have written Policy and Procedure to ensure compliance with PREA’s “Zero Tolerance” policy, and display signage and PREA publications in-plain view at all agency locations, at all times	<b>AP1.22</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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	<b>PERSONNEL</b>								
21.	<p>The agency has a written <u>POLICY</u> to guard against conflict of interest.</p> <p>That no employee connected with the agency uses his or her official position to secure privileges or advantages.</p> <p>That no staff shall accept for themselves, any member of their family, or close associate, any personal gift, favor, or service from an offender.</p>	<p>AP 2.01 AP 2.01.1 AP 2.01.2</p>							



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22.	<p>Written personnel policies require a personnel manual that is approved by the governing authority annually and is made available for employees that cover, at minimum the following areas:</p> <ul style="list-style-type: none"> <li>• Organizational chart</li> <li>• Staff Development</li> <li>• Recruitment and selection</li> <li>• Promotion</li> <li>• Job Qualifications, descriptions and responsibilities</li> <li>• Minimum experience and education for positions</li> <li>• Required Licensures, certifications and credentials</li> <li>• Affirmative action and Title VI</li> <li>• Grievance and appeal procedures (approved by local board)</li> <li>• Sexual and Workplace harassment</li> <li>• Orientation</li> <li>• Employee evaluation</li> <li>• Personnel Records</li> <li>• Benefits</li> <li>• Leave specific to Grantee (Annual, sick, holiday maternity, Military)</li> <li>• Hours of Work (Time sheets)</li> <li>• Compensation</li> <li>• Travel</li> <li>• Disciplinary Procedures</li> <li>• Termination and Resignation</li> <li>• Employee Probationary Period</li> </ul>	<p>AP 2.02 AP2.05 AP 2.06 AP 2.07 AP.208</p>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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23.	The minimum educational requirement for appointment as community correction program manager is a baccalaureate degree in one of the social or behavioral or management sciences or a related field.	AP2.03							
24.	The minimum qualifications of a case officer are a baccalaureate degree from an accredited college or university, or at least (4) years of qualifying relevant fulltime professional experience. Grantee employees who are employed at time of contract execution may receive a waiver of the baccalaureate degree.	AP2.04							
25.	All credentialed staff shall as a minimum requirement meet all licensure and or certification requirements as set forth by Tennessee health/Behavioral health boards.	AP2.05							
26.	There are written job descriptions and job qualifications for all positions of the agency. Each job description should include job title, responsibilities of the position and required minimum experience and education licensure, certifications, and credentials.	AP2.07							
27.	The Grantee will have an employee grievance procedure which has been approved by the local advisory board.	AP2.08							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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28.	The Grantee will maintain a current, complete, and confidential personnel record for each employee	AP 2.09							
29.	Written policies require a national background check will be completed on all NEW hires, prior to employment or appointment. No applicant with a felony conviction or crime of moral turpitude will be considered for employment. Results shall be maintained in the employees' personnel file.	AP 2.10							
30.	All employees shall have an annual background check. Documentation of the background check will be kept in the employee's personnel file.	AP 2.10							
31.	Written policy and procedure shall specify that all Community Corrections personnel are prohibited from carrying weapons during the performance of duty. Any Personnel proven to be in violation shall be subject to disciplinary action up to and including termination as provided in grantee policy.	AP 2.12							
<b>THIS SECTION APPLIES ONLY TO AN AGENCY THAT UTILIZES <u>VOLUNTEERS</u></b>									
32.	Written <u>policy</u> and procedure for volunteer citizen include including a system for selection and training, term of service, termination of service and defining tasks.	AP 3.01							
33.	Written policy and procedure specify that volunteers agree in writing, to follow all agency policies particularly those relating to the security and confidentiality of information.	AP 3.02							

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POLICY AND ADMINISTRATION**

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34.	Written_policy specifies that volunteers perform professional services only when certified or licensed or after a thorough check of background and professional education.	AP 3.03							
35.	Written policy specifies that all volunteers have a criminal record check prior to employment or appointment. Documentation of the records check shall be maintained	AP3.04							

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<b>TRAINING AND RESEARCH</b>									
36.	Written policy provides that all new professional staff in the program will have at least 40 hours of onsite orientation to the policies, organizational structure, programs, and regulations of the program, as well as, Tennessee Department of Correction required Title VI, DNA Buccal Swabbing sample collection, Prison Rape Elimination Act (PREA), Emergency Operation Plans and Fire Safety, Drug Free Workplace, and Code of Ethics. Only manager approved Grantee staff, directly responsible for offender supervision, delivery of treatment, programming, or evaluation of offenders shall receive training on the following: Validated Risk Needs Assessment (RNA), O*NET Interest Profiler, Texas Christian University Drug Screen (TCUD) or other as identified assessment tools. All orientation and offender assessment training will be completed prior to new staff performing any work related to offender treatment or supervision without direct supervision. This affects all new full-time or part-time staff, and volunteers	AP 4.01							
37.	Written policy and procedures provide that all clerical and support staff complete orientation and training appropriate to their assignment. (16 hrs. full time. 8 hours part time)	AP 4.02							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
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**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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38.	Written policy and procedure provide that all case officers complete 40 hours of pre-service training. Pre-service training will be provided by the agency, or designee, within six months of a new case officer's employment. Upon completion of orientation, the employee signs and dates a statement that orientation training has been received. All training will be recorded by the agency manager, and a copy kept in employee's personnel file.	AP 4.03							
39.	Community Correction Grantees, either individually or collectively, will be responsible for providing at least 30 hours of in-service training per year to their program managers and 40 hours of training for program case officers and treatment staff. The Tennessee Department of Correction will be responsible for providing a minimum of ten (10) hours of core issues to the Program Managers on an annual basis. All training shall be job related	AP 4.04							
40.	Written policy requires program manager to keep a running total of training hours for agency employees in individual files. The file shall include orientation and any ongoing training as well as annual training.	AP 4.05							
41.	The Agency will have a <u>POLICY</u> and procedure governing research and address the issues of informed consent and release of information. The State Director of Community Corrections in conjunction with the Director of Decision Support: Research and Planning, Tennessee Department of Correction must approve all research projects in writing prior to implementation.	AP 6.01							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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<b>PROGRAM RECORDS</b>									
42.	Program policies shall provide that all staff adhere to Tennessee Department of Correction procedures and functions regarding access and use of the TDOC OMS system. Programs shall be aware of and ensure the necessity of system security procedures. All programs will utilize the TDOC OMS system as mandated by the Tennessee Department of Correction.	<b>AP7.02</b>							
43.	The grantee will utilize TDOC OMS contact codes listed within the Community Correction Contact Note Handbook, unless otherwise listed within the Community Correction Standards	<b>AP7.05</b>							
<b>PHYSICAL PLANT</b>									
44.	The building conforms to all applicable state and local building codes.	<b>AP8.01</b>							
45.	Private counseling and group meeting space is provided	<b>AP8.02</b>							
46.	Any noncompliance with applicable state and local building codes must be reported to TDOC upon discovery, within 24 hours of occurrence, and corrected within stated timeframes by the inspecting agency.	<b>AP8.04</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

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<b>SAFETY AND EMERGENCY</b>									
47.	The Facility will have written fire and other emergency plan/s that are communicated to all employees, volunteers, visitors, and offenders. Emergency plans shall contain contingency space plans during emergencies. These plans are reviewed and updated at least annually.	<b>AP9.01</b>							
48.	There shall be a written policy and procedure regarding fire prevention regulations to ensure the safety of staff, volunteers, offenders, and visitors. The policy and procedure include:  1. Provisions for qualified/ certified fire protection service 2. A system of fire inspections and testing equipment and related services 3. An annual inspection by a local and/or state fire official 4. Availability of fire protection equipment at designated locations.	<b>AP9.02</b>							
49.	All emergency plans shall be disseminated to all designated staff and are posted in conspicuous places in the facility	<b>AP9.03</b>							
50.	All Staff must be initially trained in the implementation of the emergency plans. All training shall be documented.	<b>AP9.04</b>							



**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
POLICY AND ADMINISTRATION**

**ADMINISTRATION, ORGANIZATION & MANAGEMENT**

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51.	Emergency evacuation drills and annual training thereafter are conducted at least quarterly during hours when the majority of offenders are in the facility. All drills are to be documented.	<b>AP9.05</b>							
52.	All facility exits must be in compliance with state and/or local fire safety code	<b>AP9.06</b>							
53.	The Facility shall have automatic fire alarm and smoke detection systems that are approved by the state fire marshal. All systems shall be tested on a regular basis. The facility shall have documentation on the system testing	<b>AP9.07</b>							
54.	All hazardous substances shall comply with TOSHA standards pertaining to the storage and safety data sheet accessibility (dealing with chemicals).	<b>AP9.08</b>							

54 TOTAL

\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date

**TDOC COMMUNITY CORRECTIONS PROGRAMS –**

Residential Medical and Health Services

**FACILITY-RP 600**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
 INSPECTION \_\_\_\_\_  
 DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
1.	The Facility will have a written agreement with a licensed hospital, clinic, or physician to provide emergency services on a 24-hour basis.	<b>RP6.01</b>						
2.	There is one staff member present on each shift trained in emergency First-aid procedure including cardiopulmonary resuscitation (CPR), 911 emergency contact capability and take-action authority. In addition, each residential facility will display an automated external defibrillator (AED) for emergency use only.	<b>RP6.02</b>						
3.	There are written emergency medical back-up plans which are communicated to all employees and residents	<b>RP6.03</b>						
4.	First-aid equipment is available at all times. Said equipment shall be approved by a recognized health authority. A monthly inspection of first aid equipment shall be made by the program manager or designee to ensure equipment meets minimum stocked standards of health authority.	<b>RP6.04</b>						
5.	At the time of admission, facility staff will inquire about any physical problems that might require medical attention and documents the disclosed medical history in the offender's case file.	<b>RP6.05</b>						

**TDOC COMMUNITY CORRECTIONS PROGRAMS –**

Residential Medical and Health Services

**FACILITY-RP 600**

**FACILITY** \_\_\_\_\_

**AUDIT PERIOD** \_\_\_\_\_  
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**DATE** \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
6.	The Facility will have a written policy and procedure to provide medical examination for any employee or resident suspected of having communicable disease or debilitating condition (e.g., diabetes, heart disease, or epilepsy).	<b>RP6.06</b>						
7.	The Facility will have a written policy and procedure regarding urine collection for testing purposes and interpretation of results	<b>RP6.07</b>						
8.	The Facility will have a written policy and procedure regarding the possession, control and use of controlled substances: prescribed medications, and over-the-counter drugs. These policies and procedures also stipulate that prescribed medications are administered to the resident according to the specific directions of their prescribing physician	<b>RP6.08</b>						
9.	The Facility will have a written policy and procedure stating that records of all medications that are distributed by staff are maintained and audited daily. Also, the records will include date, time, and name of resident receiving medication, and the name of staff distributing medication	<b>RP6.09</b>						

**TDOC COMMUNITY CORRECTIONS PROGRAMS –**

Residential Medical and Health Services

**FACILITY-RP 600**

**FACILITY** \_\_\_\_\_

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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
10.	The Facility will have a written policy and procedure providing the prompt notification of the client's next of kin in case of serious illness, surgery, death, or injury. Any agency death shall be reported immediately to first the proper authorities and to the TDOC Central Communications Center as well as to the State Director of Community Corrections within 30-minutes of an agency's knowledge of the event occurring	RP6.10						

10 TOTAL

\_\_\_\_\_  
Reviewer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Residential Intake and Termination**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
INSPECTION \_\_\_\_\_  
DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
1.	Discrimination on the basis of race, creed, or national origin is prohibited and is clearly stated in agency policy and made available to the offender	RP 7.01						
2.	A copy of admission criteria and pre-intake procedures is distributed to all referring agencies.	RP 7.02						
3.	When a referral is not accepted into the program the referring agency and/or court is notified and a specific reason is stated	RP 7.03						
4.	At the time of intake, the staff discusses with the client the following information: <ul style="list-style-type: none"> <li>a. Program goals</li> <li>b. Rules governing conduct</li> <li>c. Program rules and regulations</li> <li>d. Possible disciplinary actions and procedures available to staff</li> <li>e. Available services</li> <li>f. Authorization to release information</li> <li>g. Informed Consent</li> <li>h. Confidentiality Policy</li> </ul>	RP 7.04						
5.	The above is documented by both the client and staff's signature and the client is specifically given assigned copy of the rules and regulations.	RP 7.05						

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Residential Intake and Termination**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
6.	Staff designs a written treatment plan for each resident. The plan is signed and dated by staff and client. The plan includes criteria of expected behavior and accomplishments, and at a time schedule for achieving specified goals. Within the first two weeks of a resident's admission, a treatment plan will be completed	<b>RP 7.06</b>						
7.	On a monthly basis the resident's progress will be reviewed either through a staff meeting or by Individual staff and the results will be documented.	<b>RP 7.07</b>						
8.	Any changes in the behavioral plan will be discussed with that resident. This will be dated and documented by the staff and resident's signature	<b>RP 7.08</b>						
9.	There is at least <u>one</u> Staff person on the premises who is awake, available, and responsive to the residents' needs 24-hours a day.	<b>RP 7.09</b>						
10.	All Program rules and regulations pertaining to residents are posted in a conspicuous place	<b>RP 7.10</b>						
11.	The Facility will have a written policy and procedure regarding grievance and appeal process. This policy states the grievance is transmitted without alteration, interference, or delay to the party responsible for receiving and investigation	<b>RP 7.11</b>						
12.	There is a written policy and procedure regarding the removal of any client from the program	<b>RP 7.12</b>						
13.	Policy and procedure are written regarding the house's reimbursement by residents	<b>RP 7.13</b>						

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Residential Intake and Termination**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
14.	The Facility resources will be used to assist residents in locating suitable housing upon termination from the program	<b>RP 7.14</b>						
15.	The opportunity for recreational and leisure time activities is provided to all residents.	<b>RP 7.15</b>						
16.	The Facility will have a written policy and procedure regarding the enrollment of residents in educational and vocational training programs	<b>RP 7.16</b>						
17.	The facility has a written policy and procedure allowing residents to attend religious services on a voluntary basis.	<b>RP 7.17</b>						

17 TOTAL

\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Residential Facility**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
INSPECTION \_\_\_\_\_  
DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
1.	The Facility shall not enter into any agreement that purports to create an interest in real property (e.g. rental agreement) until said rental agreement is approved, in writing, by the Commissioner of the Tennessee Department of Correction or his/her designee	RP 3.01						
2.	The Facility shall be in compliance with all applicable zoning ordinances or is attempting to comply with or change such laws, codes, or zoning ordinances through legal means and shall conform with applicable building codes.	RP 4.02						
3.	The Facility will be located within one mile of public transportation, or other means of transportation is available.	RP 4.04						
4.	The Facility will have documentation stating that all sleeping quarters have ventilation of at least 10 cubic feet of outside or re-circulated filtered air per minute per human occupant.	RP 4.04						
5.	The Facility will have documentation stating that all sleeping quarters have lighting of at least 20 lumens readability in reading and grooming areas	RP 4.05						
6.	To the extent possible, all sleeping areas provide some degree of privacy.	RP 4.06						
7.	Each client has been provided in their sleeping quarters a bed, mattress and-pillow, bed linen, chair, and closet/locker space for the storage of personal items.	RP 4.07						



**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Residential Facility**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
INSPECTION \_\_\_\_\_  
DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
8.	The Facility will have a written POLICY and procedure regarding the issuance of clean, usable bedding, linen, and towels to new residents, with the provision for laundering on a weekly basis.	RP 4.08						
9.	The Facility will provide personal hygiene articles on an emergency basis	RP 4.09						
10.	The Facility will have a written POLICY that outlines the rules that permit offenders to decorate their sleeping quarters and/or common use areas.	RP 4.10						
11.	The Facility provides private counseling space with adequate furniture.	RP 4.11						
12.	The Facility, at a minimum, has one operable toilet for every ten residents	RP 4.12						
13.	The Facility, at a minimum, has one operable washbasin with hot and cold running water for every ten residents.	RP 4.13						
14.	The Facility, at a minimum, has one operable shower or bathing facility with hot and cold running water for every ten residents. The hot water does not exceed 110 degrees F (43 degrees C).	RP 4.14						
15.	The Facility has one operable washer and one operable dryer for every 10 residents.	RP 4.15						
16.	The Facility is in compliance with the sanitation and health codes of the applicable government's jurisdiction	RP 4.16						

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Residential Facility**

FACILITY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_  
INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS
17.	The Facility will have a written POLICY and procedure regarding vermin and pest control, and trash and garbage removal	RP 4.17						
18.	The Facility has a written documentation that weekly sanitation and safety inspections of all internal and external areas and equipment are conducted in accordance with written POLICY and procedure.	RP 4.18						
19.	The Facility will ensure that the facility is in good repair with a housekeeping and maintenance plan	RP 4.19						
20.	The Facility will have written POLICY and procedure regarding maintenance and use of facility vehicles when in use	RP 4.20						
21.	The Facility will have at least one telephone available and accessible to clients.	RP 4.21						

21 TOTAL

\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
Offender contacts and supervision, Sanctions and violations, Community  
Service, Restitutions and fees**

AGENCY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	Value
<b>Investigative Reports</b>									
1.	Written policy and procedure govern the conduct of case officer pre-sentence investigations, and preparation of reports in accordance with the Tennessee Department of Correction Pre-Sentence Investigation (PSI) manual (pre, post, classification, and specific data reports).	S1.01							
2.	All pre-sentence (investigative) reports and recommendations are reviewed and approved by a program manager or designee prior to submission to the court. All pre-sentence investigative reports are to include a validated risk and needs assessment.	S1.02 S1.02.1							
3.	Written policy and procedure protect the confidentiality of pre-sentence reports and case records	S1.03							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
4.	All offenders court ordered to a community correction treatment program are required to have an investigative report entered in Tennessee Offender Management System (OMS). In the event an offender is admitted into the program and has a Pre- Sentence Report on the current offense in TDOC OMS, the community corrections Agency is not required to complete a report. Any offender admitted into a community corrections program, who does not have an investigative report on file in the TDOC OMS is required to have a post-sentence report completed and entered in the TDOC OMS within forty-five (45) working days from program admittance.	SI.04							
5.	All community correction offenders who are revoked shall have a classification report completed in the TDOC OMS. If an investigative report was already completed by the community correction agency and is in the TDOC OMS, the supervising agency shall be required to update the PSI information as required by the Tennessee Department of Correction, Pre-sentence Investigation Manual. Otherwise, a classification report is required to be completed within ten (10) working days following the date the offender was revoked.	SI.05							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
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<b>Records</b>									
7.	The Grantee has written policy, procedures, and practice governing case record management, including, at a minimum, the following areas: the use and content of offender records; right to privacy; security, placement, and preservation of records; and schedule for retiring or destroying inactive records.	<b>S2.01</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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AGENCY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
8.	<p>Each case record includes, at a minimum, the following information at all Community Correction Facilities:</p> <ol style="list-style-type: none"> <li>1. Offender Background Information Form</li> <li>2. Investigation Report on the TDOC OMS (PSI), (PSR)</li> <li>3. Signed behavioral contract and/or program rules if applicable</li> <li>4. DNA- buccal swabbing information</li> <li>5. Medical, Psychological record (if applicable)</li> <li>6. Individual plan or program (if applicable)</li> <li>7. Signed release of information forms (when utilized)</li> <li>8. Evaluation/assessments; RNA, TCUD, O*NET (as identified)</li> <li>9. Current employment data</li> <li>10. Judgment document and/or court order to community correction</li> <li>11. Signed Offender Grievance Form</li> <li>12. Referrals to other agencies (if applicable)</li> <li>13. Drug/Alcohol screenings/results</li> <li>14. Progress reports</li> <li>15. Chronological entries</li> <li>16. Violation Report (if applicable)</li> <li>17. Grievance and disciplinary record (if applicable)</li> <li>18. Title VI</li> <li>19. Judge's orders for DNA testing (if applicable);</li> <li>20. Initial Intake Information Form</li> <li>21. Offender Case Plan</li> <li>22. Program Rules and Disciplinary Policy</li> </ol>	<b>S 2.02</b>		4				March 2021	

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
9.	Each clinical file case record includes, at a minimum, the following information at all Community Correction Facilities: 1. Addiction Severity Index/Assessment 2. Treatment Plan 3. Discharge Summary 4. Therapy Progress Notes 5. Crisis Plan 6. Treatment Team Notes 7. Drug Screening Records 8. Confidentiality Agreement 9. Signed release of information forms (to include 42 CRF Part 2)	<b>S 2.03</b>							
10..	All significant supervision contacts, as defined by the Community Supervision Contact Manual, will be recorded in TDOC OMS.	<b>S 2.04</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
11..	Offender case record audits are conducted by the manager or manager designee in accordance with written policies and procedures. Program Managers will ensure that quarterly audits are conducted on each case officer, and the manager will ensure that all offender case records are reviewed by the manager or manager designee at least once during each 90-day period. Agency managers will ensure that offender case records comply with State and Program standards and that there is clear documentation of these audits within in each offender case file. A follow-up review will be conducted by the same within 45 days following the initial case file audit to verify any case record discrepancy findings during previous audit have been addressed.	<b>S 2.05</b>							
11.	Written policy and procedure regarding the confidentiality of individual case records will address at a minimum: <ol style="list-style-type: none"> <li>1. Offender access</li> <li>2. Staff access</li> <li>3. Circumstances when Release of Information is permitted</li> <li>4. Restrictions on the type of information that can be released</li> </ol>	<b>S 2.06</b>							



**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
12.	<p>Required release of information forms shall include but are not limited to:</p> <ol style="list-style-type: none"> <li>1. Name of person, agency, or organization requesting information</li> <li>2. Name of person, agency, or organization releasing information</li> <li>3. The specific information to be disclosed</li> <li>4. The purpose or need for the information</li> <li>5. Expiration date</li> <li>6. Date consent form is signed</li> <li>7. Signature of offender</li> <li>8. Signature of individual witnessing offender's signature.</li> </ol> <p>A copy of the consent form is maintained in the offender's case record.</p>	<b>S 2.07</b>							
13.	<p>Written policy and procedure specify that all materials relating to any offender with which the Grantee has had personal contact, shall be maintained for at least five (5) years after termination of the case, and/or until all audit issues have been resolved; whichever is longer.</p>	<b>S 2.08</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
14.	Written policy and procedure specify that in the event an officer is on leave or whose position is vacant for an extended period, that there exists and is implemented a mechanism to provide continuing supervision services to the vacant officer's caseload.	<b>S 2.09</b>							
15.	Written policies shall provide that all staff adhere to Tennessee Department of Correction procedures and functions regarding access and use of the TDOC OMS offender management/ tracking system. Programs shall be aware of and ensure the necessity of system security procedures. All agencies will utilize the TDOC OMS system as mandated by the Tennessee Department of Correction. Programs are required to enter the TDOC OMS information	<b>S 2.10</b>							
<b>INTAKE, TRANSFER, DISCHARGE AND TERMINATION</b>									

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
Offender contacts and supervision, Sanctions and violations, Community  
Service, Restitutions and fees**

AGENCY \_\_\_\_\_

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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
17.	<p>The intake report shall be entered in the TDOC OMS (LCDG) using code AAAA to record detailed information about the offender's arrival. The Intake Report should include at a minimum:</p> <ol style="list-style-type: none"> <li>1. Date and Time of last court date appearance Judgment Order information or placement relevant details.</li> <li>2. Restrictions, Court Ordered special instructions /treatment assignments.</li> <li>3. Estimated start date of program supervision.</li> <li>4. Notes about split confinement and/or dual supervision.</li> <li>5. Estimated date of program completion.</li> <li>6. Notes about risk assessment supervision level</li> </ol>	<b>S3.01</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
18.	<p>Policy outlines the Validated Risks and Needs Assessment (RNA) process, and all other assessment processes for each offender referred or under supervision. A complete RNA is required for every offender, unless a current RNA, completed within the last 12 months, exists upon arrival. An Offender Case Plan (OCP) is also required for every offender. In compliance with TDOC Policy 110.09 and 703.02, only RNA Certified Users completing the Assessor Development Model (ADM) and RNA Certified Assessors will conduct and record the RNA. Only RNA Certified Users and/or RNA Certified Assessors may develop the OCP. Only manager approved staff will conduct and record the TCUD results. Assessments and the development of the OCP must be done within 60 days of an offender's arrival. RNA and TCUD assessments must be repeated every calendar year or with any significant life event as define in TDOC policy, 513.11, and 703.02, for each supervised offender. At a minimum this includes:</p> <ol style="list-style-type: none"> <li>1. What constitutes an assessment</li> <li>2. Who conducts the assessment</li> <li>3. When it is conducted</li> <li>4. The format in which information is collected and summarized</li> <li>5. Comply with TDOC's RNA policies and recommendations (TDOC Policy #110.09, #513.11 and #703.02)</li> </ol>	<b>S3.02</b>							March 2021
				10					

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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AGENCY \_\_\_\_\_

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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
19.	Unless an Offender DNA sample is confirmed on TBI's DNAV Web page within the first (10) days after Offender's arrival, staff will conduct a swab sampling and record the information in the offender file, and on TDOC OMS (LCLA) within (60) days of an offender's arrival	<b>S3.03</b>							
20.	The assessment should include any report submitted to the court prior to sentencing that identifies an Offender's specific needs, or a similar report prepared after sentencing. At a minimum this includes information from outside agencies or vendors, or any internally generated diagnostic evaluations	<b>S3.04</b>							
21.	All offenders in community correction shall have a written, signed behavioral contract. At intake, the community correction staff shall discuss and develop with each offender a written behavioral contract based on assessment of client needs, outlining specific objectives to be achieved by the offender while in the program, the offender's obligations to the victim and community, and signed by the offender agreeing to abide by the terms of the contract	<b>S3.05</b>							
22..	Policy and procedure ensure that each offender understands his/her conditions of sentence; receives a written copy; and acknowledges receipt and understanding in writing	<b>S3.06</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
23.	When specific services ordered by the court are not available, the field staff shall notify the court. Documentation of such notification shall be maintained in the offender's case file.	<b>S3.07</b>							
24.	Policy and procedure establish a process for the successful discharge/termination of offenders. At a minimum, each offender file will be reviewed for successful termination after each twelve (12) month period of supervision. The first such review will come at 12 months and thereafter at least annually or sooner or at the discretion of the Program Manager or designee. The results of the review will be recorded in the case file and in the TDOC offender management system.	<b>S3.08 S3.08.01</b>							
25.	The Grantee shall adhere to the Tennessee Department of Correction written procedures governing the transfer of offender supervision to and from other agencies. All transfers shall be acceptable if an offender has residence in the receiving agency county, is determined to be ready for transfer and has the sentencing courts permission to transfer.	<b>S3.09</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
Offender contacts and supervision, Sanctions and violations, Community  
Service, Restitutions and fees**

AGENCY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
26.	<p>The Grantee shall adhere to the Tennessee Department of Correction written procedures governing the transfer of offender supervision to and from other agencies. All transfers shall be acceptable if an offender has residence in the receiving agency county, is determined to be ready for transfer and has the sentencing courts permission to transfer</p> <p><b>1.</b> The sending manager is to contact the receiving manager, by <u>EMAIL</u> to notify of request to transfer and to start the transfer investigation.</p> <p><b>2.</b> The receiving grantee has (15) days to assign transfer investigation to an officer, investigate, and reply to the sending agency's manager.</p> <p><b>3.</b> The receiving agency manager contacts the sending agency as to status of transfer, (accepted or rejected) by <u>EMAIL</u>.</p> <p><b>4.</b> The sending agency forwards the case file. Any file that has incomplete data should be returned to sending agency.</p> <p><b>5.</b> Receiving agency should make the TDOC OMS changes, (LIMD, LCD3, LCDF, LCDG) and start supervising the case.</p> <p><b>6.</b> Sending agency shall complete a QQQQ entry on the TDOC OMS explaining reason for transfer, any treatment provided or other interactions, and any court ordered conditions.</p>	<p><b>S3.10</b> <b>S3.10.1</b> <b>S3.10.2</b> <b>S3.10.3</b> <b>S3.10.4</b> <b>S3.10.5</b> <b>S3.10.6</b></p>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
27.	Written policy and procedure require that all offenders are informed of the grievance procedure available and discussed the procedure with the offender during the intake process	S3.11							
28.	The Grantee shall develop policy and procedures that specifically outlines the frequency and manner in which offender drug testing, criminal records checks, and employment verifications are administered for active cases under supervision. Any such procedure shall be quantifiable	S3.12							
29.	The discharge/termination report shall be entered in the TDOC OMS (LCDG) under code TEPE to record detailed information about the offender's discharge. The discharge/termination Report should include at a minimum:  <ol style="list-style-type: none"> <li>1. Date and Time of program completion/departure.</li> <li>2. Relevant outcomes or details of termination.</li> <li>3. Outcome assessment/ staff treatment assessment/comments.</li> <li>4. Detail any program performance highlights.</li> </ol>	S3.13							



**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

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INSPECTION DATE \_\_\_\_\_

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<b>Offender Contacts and Supervision</b>									
30.	The Grantee mission statement affirms that the supervision program is to provide necessary services to felony offenders with the goal of reducing the probability of continued criminal behavior and maintaining the safety of the community.	<b>S4.01</b>							
31.	Written policy prohibits any offender from being in a position of control or authority over another	<b>S4.02</b>							
32.	The Grantee will have a written policy and procedure relative to searches which clearly states they are precluded from searching an offender, their home, or property.	<b>S4.03</b>							
33.	There is a written procedure for the prevention, detection, and apprehension of absconders. This procedure is reviewed and updated annually.	<b>S4.04</b>							
34.	There is a written policy restricting the use of physical force unless justifiable self-protection, protection of others, prevention of property damage, and then only to the degree necessary and in accordance with appropriate statutory authority	<b>S4.05</b>							
35.	The use of personal abuse and corporal punishment is prohibited through written policy and procedure	<b>S4.06</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
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**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
36.	Policy establishes levels of supervision and regulates movement between supervision levels. The Grantee will utilize supervision strategies and programs that have been scientifically demonstrated to enhance compliance with the court or releasing-authority-ordered conditions, and that reduce criminal behavior. Supervision strategies will be listed under subsections Day Reporting Centers, Residential Programs, and Intensive Outpatient Services.	<b>S4.07</b>							
37.	Policy requires that the case officer or other duly authorized persons maintain personal contact with the offender according to the supervision level set by minimum state standards and program guidelines. Supervision of the offender should include at a minimum the monitoring of an offender's special conditions and employment status. A duly authorized person is any Agent or qualified person who offers the necessary services on an accepted contractual basis. All offender contacts shall be documented in the chronological records	<b>S4.08</b>							
38.	Written policy and procedure provide that case supervision program staff may request the court to add, remove, or modify any or all the special conditions of supervision	<b>S4.09</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
39.	Written policy specifies the type of actions required to locate and recover absconders prior to the issuance of a violation warrant. An absconder is defined as an offender with whom no contact has been made for a maximum of thirty (30) days. Grantee policy will specifically identify the minimum time in which a violation warrant is filed with the sentencing court. The absconder may then be entered on NCIC.	<b>S4.10</b>							
40.	Written policy states that community correction offenders may not cross the Tennessee state line into another state except with the written approval of the sentencing court.	<b>S4.11</b>							
41.	Upon successful completion of the treatment component, any offender court ordered to be supervised by the Grantee, shall be supervised in accordance with TDOC risk- based supervision model as outlined in TDOC Policy 704.01 after offender completes the required treatment program	<b>S4.12</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
Offender contacts and supervision, Sanctions and violations, Community  
Service, Restitutions and fees**

AGENCY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
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<b>Sanctions and Violations</b>									
42.	Written policy shall establish a process for handling known and alleged violations. Following confirmation of a violation, the case officer will adhere to established procedures to determine what action is required.	<b>S5.01</b>							
43.	When violations occur, alternatives to revocation and incarceration are considered and used to the extent that public safety allows A decision will be made at this time regarding the need for a formal violation and/or revocation the Grantee will follow an evidence based sanctioning process that will be approved by TDOC.	<b>S5.02</b>							
44.	Sanction data will be collected and reported monthly outlining sanction types	<b>S5.03</b>							
45.	Any violation with a request for a warrant must be approved in writing by a manager or designee	<b>S5.05</b>							
46.	Policy prohibits the general use of offenders as police informants and specifies any conditions for exceptions. If an offender is used as an informant this will be noted in the chronological entries in the case record. Procedures will include securing the approval of the program manager and the court.	<b>S5.06</b>							

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47.	Violation data will be collected and reported monthly outlining violation types, such as drug related, new arrest, and absconding	<b>S5.07</b>							
	<b>Community Service, Restitution and Fees</b>								
48.	Written policy requires that, in court ordered cases where the victim suffered monetary and/or property loss, there will be a written restitution contract discussed and developed with each offender containing these minimum elements:  <ol style="list-style-type: none"> <li>1. Name of offender and victim</li> <li>2. Total amount of restitution</li> <li>3. The amount of payment</li> <li>4. The method of payment; and</li> <li>5. The payment schedule.</li> </ol>	<b>S6.01</b>							

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49.	<p>The victim will be consulted when possible by the district attorney's office or the program staff in the development of the restitution plan. The Grantee is encouraged to develop restitution plans for the offender's consideration. The following factors about the victim and the offender should be considered:</p> <ol style="list-style-type: none"> <li>1. Present income/employment</li> <li>2. Physical and mental condition of the offender</li> <li>3. Education</li> <li>4. Family circumstances; and</li> <li>5. Victim impact and loss.</li> </ol>	<b>S6.02</b>							
50.	<p>Community Service placement should, wherever possible, fit the needs and skill of the offender and provide meaningful work to the community. Community service hours will be reasonable and will not interfere with the offender's regular paid employment. Offenders will be supervised at all times while performing community service work.</p>	<b>S6.03</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
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51.	<p>Policy will require that there is a written agreement between the offender, the program, and the agency receiving services. The agreement will contain:</p> <ol style="list-style-type: none"> <li>1. Name, address, and phone number of agency;</li> <li>2. Job duties</li> <li>3. Service hours and days</li> <li>4. Site supervisor's name and responsibilities</li> <li>5. Time frame for completion; and</li> <li>6. Signatures of offender, program</li> </ol>	<b>S6.04</b>							
52.	<p>Where program staff directly supervises offenders performing community service work, the written agreement will contain the following:</p> <ol style="list-style-type: none"> <li>1. Job duties</li> <li>2. Service hours and days</li> <li>3. Time frame for completion</li> <li>4. Signatures of offender, program manager or designee</li> </ol>	<b>S6.05</b>							

52    **TOTAL**

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
SUPERVISION**

**Investigative reports, Records, Intake, Transfer, Discharge and Termination,  
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\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date



**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Day Reporting Standards**

AGENCY \_\_\_\_\_

AUDIT PERIOD \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_

NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
	<b>Program Services</b>								
1.	<b>Clinical/Programming</b> Addiction Severity Index (ASI) completed to determine eligibility.	DR 1.01							
2.	Program set-up establishes that phases last approximately 3-4 months depending on participation/behavior with aftercare being at least 6 months depending on participation/behavior	DR 1.01							
3.	The DRC Schedule includes the following expected standards for reporting:  1. Phase 1 attends programming 4 days/16 hours per week 2. Phase 2 attends programming 3 days per/12 hours per week 3. Phase 3 attends programming 2 days per/8 hours per week 4. Aftercare programming 1 hour per week	DR 1.01							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Day Reporting Standards**

AGENCY \_\_\_\_\_

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NO.	ITEM	MANDATE	COMP	NON COMP	NOT EVAL	DID NOT OCCUR	N/A	COMMENTS	V a l u e
4.	Programming/Treatment should include at a minimum: a. Cognitive-behavioral interventions b. Job readiness c. Decision making skills d. Health and wellness e. Support system development f. Digital literacy g. Recovery oriented life skills h. Reentry planning i. Victim impact awareness j. Anger management	DR 1.01							
	<b>DRC Programming</b>								
5.	The grantee shall follow the Community Correction Officer Supervision Standards. (Will be tested and scored by pulling a sample of client files and testing for established supervision elements)	DR 1.02							
6.	Treatment plan established within first 7 days and updated every three months after.	DR 1.01							
7.	Treatment team meetings, at a minimum of, bi-weekly	DR 1.01							
8.	One on one therapy at least one time per month	DR 1.01							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Day Reporting Standards**

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<b>Administration and Management</b>									
9.	The Grantee has written policies and procedures for the day reporting center's program and these are specified in the policy and procedure manual that is accessible to all employees. The manual is reviewed at least annually and updated as needed. The policy and procedure manual may be separate or included in the community corrections policy and procedure manual.	<b>DR 2.01</b>							
10.	The Grantee shall have written Policy and Procedure to ensure compliance with PREA "Zero Tolerance"-policy and display signage and publications in-plain view at all agency locations, at all times.	<b>DR 2.02</b>							
11.	The Grantee has written policy, procedures, governing case record management, including, at a minimum, the following areas: the use and content of offender records; right to privacy; security, placement, and preservation of records; and schedule for retiring or destroying inactive records	<b>DR3.01</b>							
12.	Written policy prohibits any client from being in a position of control or authority over other offenders	<b>DR6.01</b>							
13.	The Agency will have a written policy and procedure for conducting searches of offenders	<b>DR6.02</b>							
14.	There is a written procedure for the prevention, detection, and apprehension of absconders that will be-reviewed and updated annually.	<b>DR6.03</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Day Reporting Standards**

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15.	Staff monitors movement of offenders into and out of the facility in accordance with written policy and procedure	<b>DR6.04</b>							
	<b>DRC Programming</b>								
16.	Intake of DRC participants is completed within 7 calendar days. Intake consists of at least: 1. completion of intake forms 2. orientation to DRC program 3. participant guidelines and rules 4. crisis plan 5. treatment plan 6. schedule/review assessments	<b>DR 3.02</b>							
17.	The grantee shall follow the Community Correction Officer Supervision Standards. (Will be tested and scored by pulling a sample of client files and testing for established supervision elements)	<b>DR 1.02</b>							
18.	Treatment plan established within first 7 days and updated every three months after.	<b>DR 1.01</b>							
19.	Treatment team meetings, at a minimum of, bi-weekly	<b>DR 1.01</b>							
20.	One on one therapy at least one time per month	<b>DR 1.01</b>							

**TDOC COMMUNITY CORRECTIONS PROGRAMS –  
Day Reporting Standards**

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21.	An Intake and Termination report is to be recorded in the TDOC OMS by the Grantee on every offender both at intake and termination, <i>including transfers between Community Corrections programs and including suspension of direct supervision</i> , specifically recording information that provides detail about offender's arrival and departure to the program. Intake and Termination reports are to be recorded in the (LCDG) TDOC OMS.	DR 3.02							
22.	Discharge summary is completed within 7 days of discharge	DR 1.01							

===== 22 TOTAL

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Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Team Leader

\_\_\_\_\_  
Date