Driving Evidence-Based Supervision to the Next Level: Utilizing PCRA, "Drivers," and Effective Supervision Techniques

THE IDEA OF evidence-based supervision has been a part of the correctional landscape for years, but only in the past decade has the idea of evidence-based practice taken hold in the United States federal probation system. This development began with the movement towards a sophisticated risk assessment tool that provides information on dynamic risk factors and assists in case planning. VanBenschoten (2008) laid out the possibilities of such a tool, and that goal became a reality with the development of the Post Conviction Risk Assessment (PCRA; Johnson, Lowenkamp, VanBenschoten, & Robinson, 2011), which was made available to federal probation offices beginning in 2010. Since the publication of the PCRA, federal districts around the country have focused on training officers on its use. Over the past four years supervision officers within the federal system have received training on the basic tenets of risk assessment, the reliability/validity of the PCRA, the dynamic risk factors included in the PCRA, and scoring of the tool. The PCRA is now being completed on 95 percent of the more than 121,000 active supervision cases nationwide (DSS, June 2014). Now that it has reached this level of adoption, it is time to take the PCRA to the next level: to ensure use of the PCRA in daily supervision tasks, through a more sophisticated analysis of the dynamic risk factors, including how the factors may be most effectively addressed during supervision and how supervisors can support the development of evidencebased supervision.

In this article we will outline what we see as the untapped potential of the PCRA as a basis for effective supervision, including what we have termed the potential "drivers" of the risk factors captured by the PCRA, as well as examples of interventions officers may consider using to effectively address the drivers. Finally, we discuss ways supervisors can encourage officers in the use of risk assessment in their daily supervision tasks.

PCRA: The Beginning

The PCRA was developed from a data set that included information on roughly 100,000 offenders in the federal system. Based on existing research, items were developed that were classified into five major categories: criminal history, education and employment, substance abuse, social networks, and attitudes. The tool contains items rated by the officer, as well as an 80-item self-report questionnaire that assesses criminal thinking, based on the Psychology Inventory of Criminal Thinking Styles (PICTS, Walters, 2002). Scoring results in offenders being placed in one of four risk categories: High, Moderate, Low/ Moderate, and Low. Additionally, the top three dynamic risk factors are noted. Research to date on the tool indicates that it is a reliable and valid assessment of risk (Johnson et al., 2011; Lowenkamp, Johnson, Holsinger, VanBenschoten, & Robinson, 2013).

Implementation of "True" Risk Assessment

Although many probation departments, both state and federal, have claimed to use risk assessments in supervision for decades, in most cases the reality is that they administer risk assessments but fail to use them to adjust supervision commensurate with risk. Rather, officers continue to see offenders at

Melissa Alexander, Chief U.S. Probation Officer Bradley Whitley, Supervisory U.S. Probation Officer Christopher Bersch, U.S. Probation Officer Middle District of North Carolina

the same rate (typically monthly) despite differing risk levels, and generally concentrate on monitoring compliance with conditions of supervision, rather than on targeted, proactive efforts to reduce risk. Given this history, during the implementation of PCRA our district made a focused effort to stair-step officers into risk-based supervision. The first step involved ensuring that officers truly understood the PCRA. Officers were trained not only to correctly score the PCRA, but also to understand the rationale behind why specific items were included in the tool. The PCRA manual does an excellent job of noting for each item the research that supports its use, but our experience was that few officers actually read those sections of the manual. Thus, a concerted effort was made to ensure that officers understood the rationale of the individual items included on the PCRA.

Following initial training, we developed a specific implementation plan, with a focus on the quality of the administration and scoring of the PCRA. While we wanted to take the PCRA to scale, developing expertise in scoring the PCRA was viewed as more important than rushing to complete PCRAs on all offenders under our supervision. To attain this goal of expertise in scoring, officers were instructed to complete a minimum of three PCRAs on moderate- to high-risk cases over six weeks, and supervisors reviewed those cases for accuracy and understanding. Any scoring errors were noted, and commonly seen errors were addressed during a booster session held after the six-week period. For the next three months, officers completed a minimum of one PCRA per week, and officers were placed into a "peer review" rotation

where they reviewed each other's cases for PCRA accuracy. Anecdotal conversations with officers indicate that this peer review process resulted in significant knowledge gains about the PCRA, as officers had to explain to one another why a PCRA was scored a certain way.

Incremental additions were made to the requirements for PCRA completion, with realistic targets for both accuracy and completion (i.e., no more than 1 point difference in PCRA scoring for 85 percent of cases scored, 50 percent of cases having a completed PCRA within nine months of initial training). Once the majority of cases had PCRAs completed, the focus shifted to ensuring that officers actually used the information. Officers were instructed on ways to provide feedback on the PCRA to offenders, and were encouraged to have collaborative conversations with offenders about the risk factors and what they might mean. Admittedly, this was extremely challenging for many officers. Many did not feel comfortable telling an offender they were "high risk" (though they aren't required to use that terminology) and worried that they would not be able to adequately explain the dynamic risk factors. Although some officers continue to struggle with providing this feedback to offenders, many have developed a "script" for explaining the PCRA.

For example, one officer tells the offender:

What the risk assessment does for us is provides us with a road map for your success. It shows us different areas of your life that may hinder your success. If we start addressing and eliminating these risk factors, we can reduce your risk, which statistically speaking gives you a better chance of success and reaching your goals.

The officer then discusses each risk factor that was elevated on the PCRA, including a discussion of the "drivers" (discussed in greater detail below). The officer specifically asks the offender to come up with ways to address each factor, in order to develop a sense of ownership, and also encourages putting a plan in place, including a timeline, to start addressing each risk factor.

The Complexity of Dynamic Risk Factors

Once PCRA implementation was complete that is, almost all cases had a PCRA score—a shift was made to more fully understanding the dynamic risk factors. Although two offenders may have the same PCRA risk level and the same top three risk factors, the presentation of those factors can be very different. What "drives" the risk factor? We made a concerted effort to move beyond simply noting which PCRA items were scored, and instead took a holistic view of each dynamic risk factor. A list of potential drivers for each factor was developed, though officers are encouraged to include any additional ones that may pertain to a particular case. The major drivers for each dynamic risk factor are outlined below.

Cognitions

Cognitions refers to an individual's thinking and thinking patterns. There are two main drivers identified for cognitions:

- 1. The inability to monitor thinking. Many offenders simply react impulsively and are unaware of any thoughts they have prior to behaving. These individuals may say things like "I wasn't thinking, I just reacted." In reality, they did have internal thoughts prior to the behavior, but simply have not slowed down enough to pay attention to them. Alternatively, offenders may be aware of their thoughts ("I thought he disrespected me so I punched him") but lack the skills necessary to analyze those thoughts and replace antisocial thinking with more prosocial thoughts.
- 2. Antisocial thinking. In addition, or alternatively, the offender may exhibit minor to severe antisocial thinking. The PCRA uses both officer observation and offender self-report to identify potential antisocial thinking. The offender self-report breaks down antisocial thinking into several facets:
 - a. Proactive vs. Reactive. Is the thinking purposeful and goal-directed (i.e., "I deal drugs because I can make a lot of money"), or an impulsive reaction to a situation ("I assaulted him because he disrespected me")?
 - b. Specific criminal thinking style. The self-report identifies eight potential thinking styles, and an offender may have any combination of them. Each is briefly described below:
 - Mollification: Blaming Others, Making Excuses; "Everyone in my neighborhood sold drugs."
 - ii. Cutoff: Ignoring responsible actions; "F\$@% it."
 - Entitlement: I should get what I want, feeling above the law; identifies wants as needs; "I've done my time and the system owes me."

- iv. Power orientation: Asserting power over others, attempt to control people and environment; "If I let someone control me, I'm a nobody."
- v. Sentimentality: Self-serving acts of kindness that negate antisocial behavior; "I help out all the old people on my street."
- vi. Superoptimism: Getting away with anything; "My officer will let me get away with one positive UA, plus I know when I'm going to get tested."
- vii. Cognitive Indolence: Lazy thinking; "I can't work in fast food. I can get more money hustling with my boys."
- viii. Discontinuity: Getting sidetracked; "I was clean for a week. I can celebrate with my friends tonight."

Social Networks

The social networks category impacts a significant number of our offenders, yet officers rarely address it. When they do address social networks, they most often do so in the form of a directive, such as "You aren't allowed to hang out with convicted felons." An analysis of the drivers for this risk factor is particularly important because the items on the PCRA for this factor are limited. In fact, one of the most common reasons this factor is elevated is because the individual is single, so officers often jokingly ask, "So am I supposed to find them a girlfriend?" Officers have learned to view this item in a more complex way: that marriage is typically a prosocial relationship which provides support in decision-making, support of feelings, and assistance with responsibilities; models prosocial behaviors; keeps us in check; gives us feedback and advice; and occupies a majority of our free time. Without that type of relationship, an offender has an abundance of time that may not be occupied. Thus, we try to bring awareness of an offender's free time and how that time needs to be occupied with prosocial people, relationships, and/or activities. A thorough analysis of the social arena can reveal several additional potential areas for intervention:

1. Antisocial Attitudes: One potential reason for antisocial networks may actually be the offender's antisocial thinking. The offender may think "it's no fun being straight" and thus actively seek out antisocial peers.

- 2. Antisocial peers and/or family: The offender may only be exposed to antisocial peers, i.e., "Everyone I know is on probation."
- 3. Lack of contact with prosocial people/ environments: Similar to item #2 above, the offender may not have contact with any prosocial peers, nor be aware of places or resources from which they may find and develop prosocial relationships.
- 4. Interpersonal Skills Deficit: An offender may lack the social skills necessary to attract prosocial peers. In thinking about this driver, one may ask: "Would I want to be friends with him?" Similarly, the offender may have poor conflict-resolution skills, get angry easily, and get into verbal/ physical altercations. These characteristics and lack of skills will make him unattractive to prosocial peers.

Substance Abuse

Similar to the social networks risk factor, substance abuse may be the result of one or a combination of drivers. The most common ones include:

- 1. Antisocial Attitudes: The offender harbors antisocial thinking such as "drugs should be legal" or "the government can't tell me what to do with my free time."
- 2. Poor Coping Skills: Some offenders may use substances in order to deal with their daily lives, e.g., "I need to have a few drinks after a stressful day at work," to deal with physical pain, or to deal with other issues for which they have no effective coping mechanisms.
- 3. Social Networks: Use may be related to whom the offender is spending time with (for example, "all my family drinks") or offenders may feel pressure from peers to use when they are together.
- 4. Mental Health: Some offenders may use substances to deal with various mental health conditions, such as depression.
- Physical Addiction: Some offenders may be physically addicted to a substance, such as heroin, where individuals use the substance to avoid withdrawal symptoms.

Education/Employment

This risk factor includes both educational and employment issues. To date, we have identified seven potential drivers:

1. Educational deficit: Many offenders have limited employment opportunities because they have less than a GED or only a GED and no additional training.

- Vocational skill deficit: Offenders may have a high school diploma or GED, but no other vocational skills. Or, they may have some level of trade skills, but not the necessary certifications to obtain employment.
- 3. Interpersonal Skills Deficit: An offender may have interpersonal skill deficits that interfere with being a good employee, and/or result in problems on the job. For example, he or she may have a sense of entitlement (e.g., "my boss can't tell me what to do") or poor conflict-resolution skills that lead to verbal altercations with coworkers, customers, etc.
- 4. Distorted/antisocial attitudes towards employment: The offender may feel that minimum-wage positions are "beneath" him or her, or feel that making money dealing drugs is better than working 40 hours a week, or have a host of other attitudes that impede employment.
- 5. Substance abuse: Offenders with active, untreated substance abuse problems will be unable to sustain educational programs or employment.
- 6. Medical/Mental Health: An offender may have medical conditions that prevent him or her from completing essential job tasks, depression that results in calling in sick frequently (leading to loss of a job), or other medical/mental health conditions that will be problematic if not addressed.
- 7. Logistical barriers: There may be legitimate barriers such as transportation and childcare that need to be addressed.

An example of how drivers may impact cases differentially may be helpful. Consider these two (actual) cases, both moderate risk according to the PCRA, and both having risk factors of social networks, education/ employment, and substance abuse. In case #1, the social network scoring item is that the offender is single, but he also reports that he has no prosocial peers and lots of antisocial peers. He lacks a high school diploma or GED and is unmotivated to improve his education. He also lacks any work history. He has poor coping skills, leading to alcohol/drug use, and also has several peers that use. In contrast, case #2 is also single, but has several female partners (with six children and one on the way) and no prosocial support. He has an associate's degree but lacks significant work history. He has previously been fired for play-fighting at work, suggesting potential antisocial attitudes and/or poor interpersonal skills, and also regularly uses marijuana (so would be unable to pass a drug test, often

required as a condition of employment). He also has a felony voluntary manslaughter charge from age 16 on his criminal record. He has poor coping skills (regarding the stress of having 6 children and one on the way) and has peers that use, in addition to a potential addiction to marijuana. Case #2 also has elevated criminal thinking styles of Super Optimism, Entitlement, and Cutoff.

The drivers in these cases will impact the supervision strategies in a multitude of ways, from how often contact is made to what issues are addressed first to what interventions/ strategies may be used. For example, in the first case the focus might begin on building motivation for education so he may obtain employment, while in the second case antisocial attitudes would need to be addressed first, since they impact his attitudes towards work and possibly his ability to relate to a boss and/ or coworkers.

Discovering which driver(s) may impact an individual offender is a collaborative effort between the officer and the offender. Too often, officers have been the "expert" in what an offender should do, when in reality the offender should be an integral part of the riskreduction strategy. One officer noted that this collaboration begins when PCRA feedback is given to the offender. After providing a brief explanation of the risk assessment process, the officer asks the offender what he thinks about the information provided, especially the idea that he can actively change his chance of success on supervision. Another officer reported making a concerted effort to discuss social networks, probing for ideas about the benefits of prosocial peers (avoiding negative influence, maintaining sobriety, job leads), asking the offender to think about ways to build a network of prosocial peers, and talking about hobbies, community activities, church, and any other activities that may help structure free time.

Target Interventions Based on Risk Factors/Drivers

The analysis of risk factors/drivers should in turn drive the specific intervention strategies used during supervision. These may include a variety of what have traditionally been called "controlling" and "correctional" strategies. For instance, consider an offender with a long criminal history of dealing drugs. The PCRA risk level is high, with cognitions, social networks, and education/employment as the risk factors. The driver analysis indicates significant antisocial thinking, an abundance of antisocial peers, no work history, and antisocial attitudes about work ("I'm not working a regular job, I make too much money dealing"). The officer's strategies would likely include a significant amount of monitoring/surveillance such as unannounced field visits at non-traditional hours, and potentially even a search if the offender has a special condition and it is warranted (i.e., officer suspects continued dealing). Additionally, the officer may start using various STARR (Staff Training Aimed at Reducing Rearrest; Robinson, Lowenkamp, VanBenschoten, Alexander, Holsinger, & Oleson, 2012) techniques, such as teaching/ applying the cognitive model, in order to try to break down some of the antisocial thinking.

An officer recently presented another example of a case that, for him, helped underscore the change from the "old" way of supervision to the risk-based, evidence-based way. The offender is in his 20s, a gang member, chronic marijuana user, unemployed with very little job history, and has antisocial thinking patterns. Not surprising to the officer, this offender scored relatively high on the PCRA (moderate, only because he did not have a significant prior criminal history), with dynamic risk factors of cognitions, social networks, and alcohol/drugs. The officer stated:

These results were not surprising by any means; however, the risk factor that I would have normally overlooked in my "old" way of supervision, cognitions, was identified as the top risk factor. I normally would have pressed the issue of employment, not realizing that if the other risk factors were not addressed, he would never be able maintain employment, let alone find it. I could have also easily jumped into addressing whom he associates with or his marijuana problem, but through what I have learned through the implementation of the PCRA and STARR, if I can assist the offender in addressing the way he thinks and recognize some of his destructive thought patterns, it will be much easier for me to work with him in addressing the other risk factors. The PCRA results also prompted me to dig deeper into what was driving these risk factors, and with this particular offender, I did not have to dig very far. He was very blunt on how he lived his life leading up to his instant offense. Though he had a supportive family, he often spent time with his fellow gang members or those involved in criminal activities. This led to him developing a "street mentality" of how society works. He

had the view that it was okay to commit crime at someone else's expense as long as it benefitted him or his friends, that fighting was the way to solve problems, and that marijuana use was not illegal but more of a way to "chill with my people." These conversations helped me with my supervision strategy for this offender, in that my primary focus would be on the drivers of his cognitions and social networks issues, as these were essentially the drivers of his marijuana use.

Given this history, the officer focused on using location monitoring to limit associations with negative peers, while simultaneously teaching the cognitive model (a STARR technique), which helped the offender become more aware of his own criminal thinking as well as the negative influence of his friends. The location monitoring also forced him to spend more time with prosocial influences, his family. The officer reported that he also used STARR techniques of effective reinforcement and disapproval to further influence prosocial behaviors and decrease antisocial ones. Finally, the officer reported learning more about the offender's ethnic culture and the high respect he had for his family, specifically his mother, and thus was able to get his mother involved in some of the strategies. The officer helped the mother understand her son's risk factors so she could assist, such as keeping him busy at home, or how to talk to him in a way where he would be more receptive to her feedback, based on his thinking patterns. The officer readily admits that he initially thought there was "no way" this offender would make it through supervision. However, as a result of the officer using the information gleaned from the risk assessment, along with new intervention strategies such as STARR, the offender has now completed half of his fiveyear term. The officer has noted a significant change in the offender's attitude and thinking, particularly his view of his responsibilities as an adult. His priorities have now shifted from reputation, pride, and money to family, job, and future outside the criminal lifestyle. The offender has a stronger relationship with his mother, a better understanding of who his prosocial peers are, and comprehends the negative effects of marijuana use. He has discovered the importance of employment, which included working at McDonald's, a humbling experience that he would have never allowed himself at the beginning of supervision. His last two PCRA assessments have yielded a Low/Moderate risk level, with a continued risk factor being social networks. The supervision strategy for this risk factor has changed from the offender having to avoid his negative peers, to now addressing the driver of a need for more prosocial people in his life outside his family.

Management Coaching: The Critical Link

As with any change initiative, it is imperative that officers are actively supported when trying to change their supervision strategies. Our front-line supervisors have been critical in this support role. First and foremost, supervisors have focused on education and training in the PCRA, the dynamic risk factors, and the drivers, with a focus on how the risk level and risk factors should drive supervision contacts, conversations, and activities.

The first step in this process is simply encouraging officers to begin talking about risk and risk factors in their contacts. In one office, the supervisor has piloted several specific strategies to provide encouragement and coaching. Perhaps one of the most powerful tools implemented was in fact a very simple one: Officers were instructed to include the PCRA risk level and top three risk factors in every chronological narrative (chrono) of a contact with an offender. Requiring officers to do so forced them to at least think about the factors at each contact, even if they didn't address every one. An example noting a traditional chronological narrative versus a risk-based one showcases the difference this change can make:

Traditional chrono: Offender reported to the office, reports no changes. He advises that he has mailed his monthly supervision report. He was confronted about his alcohol use. Offender did admit that he has consumed beer in the last several weeks; however, indicated no other alcohol use. He was issued a verbal reprimand. Indicated I did not like him using any form of alcohol and that it has caused problems for him in the past. He indicated that he understood, but had things in check. Offender submitted to a handheld UA, result was negative.

Risk-based chrono: Risk category of Moderate. *Risk Factor Social Networks*: Driver of this factor appears to be multifaceted. Offender has a large portion of free time outside of work that is unoccupied by any prosocial activities. Offender remains by himself at his apartment. Offender also has very few prosocial contacts. Offender

admits that hanging around antisocial peers drove him to many of his arrests and "definitely" led to him using and abusing alcohol and illegal substances. Offender has family in the area, but has not made contact with them since his arrest for the instant offense over 10 years prior. Offender reports his only prosocial contacts are his former case manager at the reentry center and his supervisor at Goodwill. Offender is currently single and has had no past relationships. Offender understands he needs to begin establishing some prosocial activities outside of work and is looking to possibly volunteer or locate a second job. Offender did express some interest in reestablishing contact with his sisters, whom he reports are a good influence. Offender states he is fine being a loner and wants to focus on bettering himself right now, rather than being involved with other people. Officer to counsel offender on this aspect of his life and encourage offender to begin seeking out other relationships and activities that can occupy his time. Risk Factor Alcohol/Drugs: Driver of this factor is offender's very long history of drug and alcohol abuse. Offender admits that his drug use negatively impacted many parts of his life and states his use primarily came from involvement with drug abusing peers, unemployment, and boredom. Offender states he is highly motivated to never engage in drug or alcohol use again and states his last use of any substance was 10 years prior (while in custody of the Bureau of Prisons). Offender states he understands his triggers as stated above and states he will work towards removing these triggers. Officer to continue these discussions in the future to monitor his progress and if he has encountered any risky situations. Officer will continue random UAs in the office and community. Officer will encourage offender to seek out AA/NA or other support networks and will refer offender for treatment upon any positive UA. Handheld UA obtained this date with negative results.

As officers begin to look more closely at risk factors and drivers, they may feel at a loss as to "what to do" regarding certain issues. To address this, we have developed multiple resources to assist them in identifying appropriate interventions. One example of such a resource, which lists various options for interventions/activities through the case plan and case plan review, is included in the appendix. Supervisors also support officers' selection of interventions/activities through the case plan and case plan review. Again, a comparison of traditional case plans and a risk-based case plan may be helpful. Since the current automated case plan in the federal case management system (PACTS) is not particularly conducive to risk-based supervision, officers have begun using the supervision focus section of the case plan to note riskbased supervision strategies.

Traditional supervision plan focus: Monitor for mental health and substance abuse issues that may arise. Maintain contact with employer and fiancé for collateral reports.

Risk-based supervision plan focus: PCRA Risk Score Low/Moderate. Risk Factors = Cognitions, Social Networks, Education/ Employment. Elevated Thinking Styles = Entitlement, Mollification, Superoptimism. Cognitions: Will introduce the cognitive model and ask offender to apply to at least three situations over next two months. Officer will also work with offender on decision making, using the cognitive model, as well as using STARR techniques to reinforce positive behaviors and address negative ones. Social Networks: The driver of this risk factor appears to be "single" status, indicating free time and also suspected occasional association with negative peers. Will encourage offender to cut all ties with old negative peers. Will brainstorm potential prosocial options including spending time with his children and church activities with family members. Offender is currently employed, which occupies a lot of free time, is a prosocial activity, and keeps him exposed to prosocial peers. Education/ Employment: Offender dropped out of high school in the 10th grade and earned his GED in 2005. Will encourage offender to further his education by attending college or obtaining a vocational certification.

Supervisors also provide feedback during both the initial case plan review and subsequent reviews in order to further encourage risk-based supervision. Often this will be communicated in an email notifying the officer that the initial case plan has been approved. The supervisors try to lead with positive reinforcement for items noted, and then follow with suggested additions. An example email is noted below:

Initial case plan approved. PCRA Moderate with risk factors of Social Networks (single/ engaged, free time, history of negative peer

association, antisocial beliefs). Supervisor notes the excellent conversation and role play with offender about free time and negative peer avoidance plan. Awesome job!! Keep these conversations alive. Supervisor encourages officer to challenge offender to name/identify prosocial peers/ relationships over next 90-120 days, and to effectively reinforce (via STARR skill) prosocial activities/people that occupy his free time. Concerning Risk factor of Alcohol/Drugs, officer has identified why risk factor scoring on the PCRA (due to history of use). Supervisor encourages conversation with offender to target why the use started and what sustained it over the years (negative peers, boredom, antisocial thoughts/beliefs? coping issues re: stress/death of family members?). Need to know what triggered his use and fueled it so we can monitor for situations that may lead to relapse. In terms of Education/Employment risk factor, what is the driver? Educational/vocational deficit, unemployed, job readiness/resume? Good referral to NC Project Re-Entry for readiness assessment/assistance. Continue to monitor and assess for progress and effort.

Through regular feedback on chronos and case plans, supervisors are able to immediately reinforce risk-based interventions, while also providing coaching and feedback. As officers reach each milestone (e.g., first regularly talking about risk), the supervisor moves to focus on even more sophisticated risk-based supervision, including coaching on deeper assessments of what is driving the risk, more collaborative conversations with offenders about risk factors, preventative plans that focus on addressing the risk factors longterm, use of STARR skills to address risk factors, and assessment/documentation of the offender's understanding of the drivers and ability to link them to past and current behaviors. As officers become better in these areas, the focus moves to consistency in use of risk-based supervision.

The final way in which supervisors coach officers is through the performance evaluation process. Several items in the performance evaluation specifically address the use of risk assessment and risk-based interventions. Supervisors use the tool to provide a summary of the feedback/coaching provided to date and to collaboratively develop future goals with the officer. One example of this targeted growth focus is included below:

Targeted Performance Growth Suggestions: (1) 100 percent breakdown of Risk Factors and their Driver(s)/Root Cause(s). Clear conversation and narrative of that breakdown discussion with the offender much like a physician would discuss with a patient. Clear conversation and narrative of the offender's understanding, acceptance/ buy-in, and joint discussion/ideas of how to address or maintain. (2) Maximize the opportunities for STARR Skill Use! Now that you are clearly identifying the risk factors, their drivers, and setting goals/ activities to address them, the opportunities to effectively reinforce, disapprove, teach the cognitive model, clarify your role, and problem solve are endless! Let's set a goal to double STARR efforts to approximately 50 percent over the next review period. (3) Consistently tie and document how your efforts, referrals, conversations, and activities are directed at and related to the risk factors/drivers.

Risk-based Supervision: The Payoff

Ultimately, the goal of this type of supervision is more effective supervision that results not only in fewer violations/revocations during supervision, but also in a long-term change in offender behavior. While we are actively collecting data to track the impact of these changes on outcomes, we have seen this goal come to fruition anecdotally in a number of cases, perhaps most poignantly during a phone conversation with an offender who was terminating supervision. During the conversation he was asked specifically about supervision, and whether it seemed "different" than previous ones (he had been on state supervision multiple times, as well as a previous federal term for which he was revoked). He indicated that the supervision this time was quite different from what he had experienced previously, and in particular noted the importance of learning the cognitive model (one of the STARR techniques used with him), which he reported using to help him make decisions in high-risk situations. Here is an excerpt from his comments:

It (supervision) has helped me a whole lot because not only, you know supervising somebody on probation yeah that's their job but by them actually wanting to know how I'm feeling, as far as different situations, let's me know that ok they're not just doing their job, they showing that they care, they showing that they want to see me to do better, so it has helped me to think differently, and react to a lot of different things in more positive ways, as far as a lot of the questions, and I think it's called cognitive thinking....that is very helpful because it helps you look at the ins and outs before you react to something.

For one I was always the type of person to where I would do something and think about, you know, the consequences of it later....let's say someone makes me mad and I want to punch this person in the face, well as soon as I feel that I want to punch this person in the face I go on and punch him in the face, that's how I used to do, versus now the thought comes up I want to punch him in the face but then I stop and think ok now if I punch this person in the face it can lead to us fightin', police comin', or him shootin' me or us shootin' at each other and what am I gonna get from all this a charge, locked up, hurt, possibly dead, so then I just sit and think ok now if I don't hit him in the face and I just go on about my business then, I'll be ok ain't gotta worry about the police, I ain't gotta worry about gettin' shot, ain't gotta worry about him trying to come back later on with a few of his friends, so basically I go with the positive side, so it actually help me to stop, think, then react.

In addition to helping offenders long-term, the risk-based supervision strategies have proven to be invaluable to officers. When we began implementing evidence-based practices, one officer stated, "I'm willing to try anything, I'm tired of writing 12Cs (violation reports)!" Anecdotally, officers and supervisors have noted a significant drop in violation reports to the court, as officers now have a wider range of interventions that may be used, and have noticed that these interventions are making a difference. Officers have also noted an increase in job satisfaction secondary to this approach, both in terms of managing cases and in terms of their own attitudes towards their work. One officer noted how rewarding it was to be able to "move" a case from a PCRA High to a PCRA Moderate or Low/Moderate. He noted that you actually "see" the success visually in the changes of the scores, as well as having reduced requirements (such as fewer contacts) for a case. Another noted, "Although I always believed I tried to the best of my ability to supervise offenders and support their positive changes, I never felt terribly effective." She admitted that when evidence-based practices was introduced she was skeptical, stating, "Risk-based supervision was introduced as I was nearing my 20-year anniversary. It was difficult to believe that anyone could suggest a new way of supervising offenders that could really impact the work I did with my clients and their success rate." However, she now notes that she is having "conversations that we never had before." Instead of being the "expert" and telling offenders what they should and shouldn't do, she partners with them to openly discuss pitfalls and barriers and make plans together to address those issues. She summed up the change it has made for her personally by saying

I always knew that being a probation officer was my calling, but I had no idea the level of job satisfaction would be so incredible by using risk-based supervision and interventions. I feel a connection with my clients, one that offers guidance, support and encouragement, while also maintaining the much-needed level of accountability.

It's a Marathon, Not a Sprint

The road to evidence-based supervision has been, and will continue to be, a work in progress. Officers are learning to be more sophisticated in their analyses of risk and developing more and better interventions to try. Management is learning ways to coach officers in their development, ways to reward the use of risk-based supervision, and ways to measure our efforts so we can make changes as needed. The financial crisis of the past few years has only underscored for us the importance of developing the most effective and efficient ways of supervising clients. Our revocation rate has dropped over 30 percent over the past four years, and time will tell if our efforts pay off in the long-term, in terms of reduced rearrest rates for our offenders both during and following supervision. Ultimately, we hold ourselves to the fundamental principle of evidence-based practice: Keep learning, keep trying, and keep developing into the best we can be. Society deserves no less from us.

Appendix 1. PREVENTATIVE SUPERVISION MEASURES TO ADDRESS RISK FACTORS

SOCIAL NETWORKS

- Communicate & explain why this is a risk factor.
- Assess & discuss current associations & relationships. Is there prosocial support? Family support?
- Monitor associations through observations, offender discussions, & 3rd-party contacts (family, significant others, employer).
- Assess/discuss their amount of free time and if there is wise use of their free time.
- Discuss, identify, & encourage any identified prosocial interest. Is there a referral that can be made secondary to their interests?
- Model & commend prosocial activities & associations.
- Identify & hold accountable for negative associations & activities.
- Consider a well-thought-out/meaningful community service placement to introduce offender to prosocial models, relationships, and activities.
- Have offender identify their prosocial relationships & activities. Help them create "their plan or goal" to address this risk factor.
- Continuously assess their motivation to change/address this risk factor.

ALCOHOL/DRUGS (Begin addressing before use/violations occur)

- Communicate & explain why this is a risk factor.
- Identify current/active use vs. history of use.
- Assess cause of the offender's use (antisocial attitude, poor coping skills, social networks, mental health, physical addiction).
- Discuss & monitor the offender's identified relapse triggers.
- Refer for treatment & monitor attendance/participation.
- Encourage/Partner with treatment provider to address identified risk factors.

- Discuss & review what is learned & discussed in treatment with the offender.
- Consider sit-in at treatment session(s) with higher-risk offenders.
- Random/Scheduled testing (urinalysis, sweat patch, breath).
- Monitor for use through 3rd-party contacts (family, employer, significant others).
- Acknowledge milestones and accomplishments.
- Acknowledge & address warning signs/ red flags.
- Continuously assess their motivation to change/address this risk factor.

EDUCATION/EMPLOYMENT

- Communicate & explain how this is a risk factor.
- Review & discuss work history for pattern of behavior that negatively impacted previous jobs.
- Assess education/employment interest.
- Identify & discuss obstacles (transportation, resume, interview skills, appearance, communication skills, authority issues, team issues, timeliness, effort, work ethic, etc.).
- Develop plan to address (referrals, Second Chance Act Funds, soft skills, job search).
- List/Discuss benefits of employment vs. cons of supporting self through crime.
- Set goals & commend accomplishments.
- Assess stability of employment when secured (free time, income vs. expenses).
- Continuously assess their motivation to change/address this risk factor.

COGNITION

- Identify antisocial attitude/thinking styles through PCRA/Comments/Actions.
- Assess attitude toward supervision.
- Practice/Use cognitive behavior model & worksheets.
- Reward prosocial thoughts, comments, & behaviors.
- Refer for Cognitive Behavior Therapy (CBT) & share PCRA results with provider.

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