



WYOMING DEPARTMENT OF CORRECTIONS

Policy and Procedure #4.102

Case Management

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Authority: Wyoming Statute(s): 25-1-104; 25-1-105 ACA Standard(s): 4-4287; 4-4297; 4-4299; 4-4305; 4-4363-1; 4-4430; 4-4474; 3-3102; 3-3125; 3-3129; 3-3131; 3-3132; and 3-3218	Effective Date: July 1, 2007 Revision/Review History: Summary of Revision/Review: Establishes a new policy and procedure for offender case planning and management.
Cross Reference of Policy:	Supersedes Existing Policy :
Approved: /s/ R.O. Lampert Robert O. Lampert, Director	
5/15/07 Date	

The policy and procedures set forth herein are intended to establish directives for staff members and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty or property interests for staff members or inmates, or an independent duty owed by the WDOC to staff members, inmates, or third parties. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

IMPORTANT NOTE: For detailed case management procedures refer to the *Offender Case Management Manual*. The most recent edition of the *Offender Case Management Manual* provides further direction for staff regarding specific case management principles and practices.

REFERENCE

1. ATTACHMENTS – None Noted
2. OTHER – None Noted



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I. PURPOSE

- A. **Case Planning and Management.** The purpose of this policy is to establish a uniform set of guidelines and procedures which will be used by the Wyoming Department of Corrections (WDOC) to direct case planning and case management for offenders in WDOC correctional facilities as well as for those under WDOC supervision.

II. POLICY

- A. **General Policy.** It is the policy of the WDOC to provide offenders with effective case management, addressing, when appropriate, work, core programming, individualized programming, treatment, basic adult education, vocational education, and employment in order to increase the likelihood of an offender's successful functioning in the community, as well as positive adjustment to incarceration.
- B. **Core Principles.** It is the policy of the WDOC that case management adhere to the following core principles when appropriate:
1. Effective case management targets criminogenic risks and needs;
 2. Effective case management uses programs, risk reduction, and supervision strategies which are evidence-based;
 3. Effective case management uses a cognitive-based approach whenever appropriate;
 4. Effective case management provides the most intensive services for the highest risk offenders;
 5. Effective case management uses the responsivity principle, matching offender learning styles with program setting and approach;
 6. Effective case management uses a relapse prevention component whenever available and appropriate;
 7. Effective case management coordinates the delivery of services between prison-based services and community-based services in order to help ensure a clearer continuum of services;
 8. Effective case management uses program evaluation as a critical component of the provision of correctional services.



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- C. **Appropriate Offender Assessments.** It is the policy of the WDOC to use appropriate offender assessments in the development of individualized case plans, which are based upon sound science and evidence-based correctional practices.
- D. **Individualized Offender Case Plans.** It is the policy of the WDOC to use individualized offender case plans focused on specific criminogenic risk and need factors, developed as a result of the intake and assessment process, using risk reduction and supervision strategies which are evidence-based correctional practices.
1. An offender's individualized case plan shall be regularly reviewed and modified, when appropriate, in order to monitor increases or decreases in the criminogenic risk and need factors.
 2. The transfer of an offender to another facility or to another field office shall be coordinated, in conjunction with goals set forth in the individualized case plan, so that the case plan will follow the offender.
- E. **Case Management Manual.** It is the policy of the WDOC to use a case management manual to provide additional and specific direction to staff regarding the principles and practices of case management.

III. DEFINITIONS

- A. **Assessment:** *(For this policy only.)* A formal process, more comprehensive than a screening, using department approved assessment instruments, which indicate the level of service needed by an offender in a given area. In addition to the use of instruments, assessment usually includes a review of relevant case information, and collateral contacts when necessary.
- B. **ASI/ASAM:** The Addiction Severity Index and American Society of Addiction Medicine placement criteria are two instruments used to determine the severity of treatment need and the recommended level of care respectively.
- C. **Case Management:** The process of intake, assessment, criminogenic risk/need identification, case plan development, case plan implementation and monitoring, that moves an offender through the rehabilitative process during his/her sentence in an organized manner and focuses on addressing the offender's criminogenic risks and needs. Effective case management ensures that the offender's correctional case plan is developed, regularly reviewed, and revised; that the offender receives adequate services; and that his/her progress is being measured and recorded in the case record.



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- D. Case Management Manual:** *(For this policy only.)* The manual used to provide additional guidance for Wyoming Department of Corrections staff in the process of case management. This manual is intended to be used as a supplement to this policy.
- E. Case Management Interview:** A semi-structured interview with the offender which is used to gather, clarify, and confirm criminal and offender history information needed for assessment and correctional case plan formulation.
- F. COMPAS:** The Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) is an advanced risk and needs assessment software package. The COMPAS system is a computerized data base and analysis system for criminal justice practitioners who must make decisions regarding the placement, supervision, and case management of offenders. The COMPAS instrument incorporates the latest research, criminological factors, and advanced statistical methods.
- G. Core Programming:** *(For this policy only.)* Programming designated for completion during or immediately following intake/orientation by all inmates, which is a prerequisite for full-time work. Core programming includes, but is not necessarily limited to cognitive interventions, anger management, substance abuse education, suicide prevention, issues related to the Prison Rape Elimination Act (PREA), institutional adjustment, assault avoidance, hygiene and health issues, life skills, and relevant Wyoming Department of Corrections policies and procedures.
- H. Correctional Case Plan:** The document, also known as the individualized case plan, created by Wyoming Department of Corrections staff that clearly and specifically identifies an offender's criminogenic risks and needs, accompanied by risk reduction strategies and plans of action, with timelines.
- I. Criminogenic Needs:** Criminogenic needs are risk factors that are dynamic and can change through intervention, change of circumstances, etc. Criminogenic needs increase the likelihood of criminal behavior; however, changes (both positive and negative) in criminogenic needs can impact the likelihood of criminal behavior (*e.g.*, criminal attitude/thinking or employment problems).
- J. Criminogenic Risks:** Criminogenic risk factors are characteristics of the offender or his or her situation that predict future criminal behavior. These characteristics are static and do not change (*e.g.*, history of criminal activity, family criminality, age at first conviction, etc.).



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- K. External Classification:** A classification instrument which establishes an inmate's recommended custody rating, to assist with decisions relating to the inmate's housing assignment, program needs, and supervision requirements.
- L. GAMA I.Q.:** The General Ability Measure for Adults (GAMA) test is a brief, self-administered, nonverbal measure of intelligence. The GAMA IQ score provides an estimate of an individual's general intellectual ability, and the four (4) subtest scores provide additional information about an individual's performance. The test is used in any situation that requires an assessment of general ability using nonverbal means. The test is also designed to be accessible to a wide variety of people with diverse cultural, language, and educational backgrounds.
- M. Individualized Programming:** *(For this policy only.)* Planned and coordinated actions, activities, or processes which an offender is directed toward and which provide the offender with rehabilitative opportunities and/or resources. Individualized programming can be distinguished from core programming as the individual programming targets an offender's specific criminogenic risks and needs.
- N. Inmate:** Any person under the supervision of the Wyoming Department of Corrections who is not on parole or probation status. An inmate is a person who is incarcerated in any Wyoming Department of Corrections' correctional facility, county jail, municipal jail or in-state/out-of-state contract facilities, to include adult community corrections centers, who is committed to the custody and supervision of the Wyoming Department of Corrections.
- O. Intake:** *(For this policy only.)* The process by which an offender, newly received to the Wyoming Department of Corrections, is tested, assessed, interviewed, and oriented, so that a correctional case plan, classification, and programming assignments or requirements can be developed in a timely manner.
- P. Internal Classification:** The housing assignment instrument used to determine the appropriate housing assignment for an inmate in a Wyoming Department of Corrections' multi-custody male correctional facility. The purpose of this instrument is to differentiate among inmates with respect to their potential for aggressive and/or assaultive behavior.
- Q. Learning Styles Inventory:** *(For this policy only.)* An assessment administered to an inmate to provide information as to the method of learning most appropriate to that specific inmate. This information is used in determining the most useful and appropriate correctional case plan strategies and action steps when possible.



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- R. **Medical Screening and Assessment:** *(For this policy only.)* Assessments and screens administered by qualified medical personnel with inmates to assist in a thorough understanding and response, when necessary, to any medical issues that an inmate may have.
- S. **Mental Health Screening and Assessment:** *(For this policy only.)* Assessments and screens administered by qualified mental health professionals with inmates to help ensure that mental health issues are being appropriately addressed.
- T. **Intellectual or Developmental Disabilities:** *(For this policy only.)* Limitations inherent to those individuals whose I.Q. is below the 70-75 range and who lack proper adaptive social behavior.
- U. **Offender:** A person who has entered a plea of guilty or has been convicted of a misdemeanor or a felony and is committed to the custody or supervision of Wyoming Department of Corrections.
- V. **Offender History Data:** *(For this policy only.)* Detailed information gathered on a specific offender, usually collected during the intake and assessment process, which identifies the social background of the offender. A pre-sentence investigation report may provide a sufficient social history for the offender history data requirement. The social history should include information regarding circumstances and events which have impacted the offender's major life areas and will be useful in the development of the correctional case plan. The offender history data is crucial to intervention and treatment efforts.
- W. **Pre-sentence Investigation (PSI) Report:** A report ordered by a court with jurisdiction which is a thorough detailing of an offender's current legal status, as well as past criminal, social, educational, employment, health, substance abuse, and financial history. The report is compiled by the Division of Field Services or its equivalent in another jurisdiction. The primary purpose of the report is to provide the sentencing court with timely, relevant, and accurate data to identify the most appropriate sentencing alternative and correctional disposition. The secondary purpose of the report is to serve the needs of any correctional facility or field division which may receive the offender, including development of the correctional case plan.
- X. **Special Needs Offenders:** Offenders whose mental and/or physical condition may require special accommodation by staff. Special needs offenders may include, but not be limited to offenders who are emotionally disturbed, mentally ill, physically handicapped, chronically ill, learning disabled, drug/alcohol addicts, or who have intellectual or developmental disabilities.



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- Y. **Static 99:** An actuarial risk screen which denotes the probability of sexual and violent recidivism.
- Z. **Test of Adult Basic Education (TABE):** A widely used test for adult basic education which provides the most reliable measurement of reading, mathematics, and language skills for adults. All items on the test have been validated on adults and can be used to place learners in the appropriate lessons for their particular skill deficiencies. Further, the test provides accurate pre- and post-testing and can be used to screen in employment situations and to measure post-learning gains.
- AA. **Treatment Case Plan:** The document created by medical, mental health and substance abuse providers to identify, guide, and measure the recommended treatment procedure or therapy to be performed. This will be coordinated with the correctional case plan.

IV. PROCEDURE

- A. **Core Principles.** There is substantial evidence-based correctional research available which clearly identifies the principles necessary to best maximize an offender's chance of success. Adhering to the core principles brings uniformity and continuity to the case management process. WDOC shall endeavor to follow these principles in offender case management.
- B. **Case Management of Offenders**
 - 1. In addition to helping ensure the public's safety, which can be accomplished in multiple ways, the mission of the WDOC is to actively assist offenders in developing pro-social behavior. WDOC shall accomplish this rehabilitative component of its mission by using evidence-based techniques and approaches in an active case management process.
 - 2. For purposes of this policy, offender case management includes assessment, development of a case plan collaboratively with the offender, linking the offender to appropriate and available services, monitoring offender progress with an outcome orientation, advocacy, and community supervision strategies to address an offender's specific criminogenic risks and needs.
 - 3. Offender case management will focus on addressing work, core programming, individualized programming, treatment needs, basic adult education, vocational education, and employment preparation. This will be done utilizing the appropriate assessments, the offender's sentence



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structure, supervision strategies, and the institutional or community resources available.

4. Core programming may include cognitive interventions, anger management, institutional adjustment, substance abuse education, suicide crisis intervention, assault avoidance, hygiene and health, life skills, sex offender awareness and education, Prison Rape Elimination Act (PREA) issues, and relevant WDOC policies and procedures.
 5. The case management model most frequently used in the WDOC will be that of the broker or generalist. With this approach, following assessment and planning, the case manager or probation/parole agent seeks to access the necessary and available resources to best address the issue(s). Though there may be instances of direct service delivery, often referrals are made to other providers to accomplish the established goal, while monitoring the offender's progress.
 6. Intake and re-entry case managers in the institutions will have case manager-to-inmate ratios which allow them to take an active role in case plan development and initial implementation, in addition to direct delivery of services.
 7. There is to be, to the extent possible, a continuity of case management services within the WDOC as an offender moves between the prison and community setting.
- C. **Intake and Assessment.** Effective case management begins at an offender's entry to the WDOC. Offenders newly received to the WDOC will be expected to fully participate in the intake and assessment process. The intake process is one of the most critical aspects of entry into the corrections system and this process will require enough time to accomplish all of the tasks enumerated in this policy.
1. **Orientation.** Orientation is the process of ensuring that new offenders receive information on the procedures, rules, programs, services, and expectations of the WDOC. WDOC will provide all offenders with an orientation.
 - i. Field Services Division
 - a. During the sign-up process for new or transferring offenders under the supervision of agents, orientation shall address offender responsibilities, staff responsibilities, special conditions, and supervision strategies or expectations.



(3) COMPAS (substance abuse and mental health (pre-) screens for felons; designated risk/need assessment form for misdemeanants); and

(4) ASI/ASAM.

b. Prison Division

(1) PSI Report;

(2) COMPAS (Criminogenic risks/needs);

(3) Medical Screening and Assessment;

(4) Mental Health Screening and Assessment;

(5) GAMA IQ (Intellectual Screening);

(6) Test of Adult Basic Education (TABE);

(7) Learning Styles Inventory;

(8) Interest Inventory;

(9) Offender History Data;

(10) External Classification;

(11) Internal Classification (Wyoming State Penitentiary and Wyoming Medium Correctional Institution only);

(12) ASI/ASAM - Substance abuse screening/assessment;

(13) Case Management Interview; and

(14) Static 99.

ii. Assessment instruments and screens will be administered and scored during the pre-sentence investigation and intake process in preparation for the development of the individualized correctional case plan.



3. **Adult Basic Education.** Placement into adult basic education shall be mandatory for inmates, who do not have a high school diploma or general equivalency diploma, and/or who fail to attain a tenth grade level on standardized achievement tests, unless exempted due to medical, mental health reasons, brain injury, or any other physical or mental condition limiting participation.
4. **Use of Previously Completed Assessments.** In some instances, recently completed, or applicable evaluations, assessments, and screens may be available on an offender, negating the need to complete a replica of the previously completed evaluation, assessment, and/or screen. In these cases, the case manager/agent may use the recently completed evaluation, assessment, or screen after consultation with and approval by his/her supervisor.
5. **Motivational Interviewing.** In order to engage the offender in the case planning process and to obtain the necessary information for effective classification and case plan development, as well as adequate adjustment to incarceration or community supervision, motivational interviewing and correctional intervention may be used by trained case managers and probation/parole agents.
6. **Assessment by Qualified Individuals.** Medical, mental health, sex offender, substance abuse, and other addictive/compulsive behavior screenings and assessments will be performed, when appropriate, by the appropriate qualified and licensed staff or service provider(s).
7. **Special Needs Offenders.** Offenders with special needs require different assessments, accommodations, and specialized planning. The correctional case manager/agent coordinates the correctional case plan to accommodate all necessary aspects of the treatment plan, which is normally created by licensed professionals when available.

D. Individualized Case Plans

1. An individualized case plan will be established for each inmate and medium/maximum/Intensive Supervision Program (ISP)/ACC classified probationers/parolees as a result of the intake and assessment process using specific criminogenic risk/need factors and risk reduction strategies. The individualized case plan uses the appropriate and relevant assessment information. The initial individualized case plan is completed at the conclusion of the intake process.
2. The individualized case plan should be reviewed at a minimum every six (6) months.



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3. Individualized case plans should identify:
 - i. Prioritized goal(s) and court/parole board mandates;
 - ii. Action steps or tasks linking the offender to the appropriate service;
 - iii. Who is to do what in order to accomplish the action steps/tasks; and
 - iv. Prioritized completion date(s).
4. Every offender will be assigned an agent and/or case manager upon entering the WDOC.
5. The individualized case plan identifies the focus of the evidence-based correctional intervention(s) and supervision strategies, facility work or job assignments, programming, and educational/vocational activities the offender should participate in to facilitate adjustment to prison, or the community, to promote positive change and assist in developing pro-social behavior.
6. The case planning process is intended to be collaborative in nature in which the assigned case manager/agent, other contributing professionals, and the offender cooperatively develop a written document. The individualized case plan identifies the most important goals, which are measurable, reasonable, and achievable and the steps needed for their achievement.
7. For offenders with special needs, the individualized case plan will be developed in consultation with the appropriate medical staff, mental health staff, licensed therapist(s), and/or education staff when available. This is the merging or interfacing of the correctional and treatment case plans.
8. Offenders often have multiple criminogenic risks/needs to address. As a general rule it is advisable to limit the number of goals on an individualized case plan to three (3) to five (5) of the most important, recognizing the offender's capacity to complete them. Goals may be replaced on the individualized case plan as they are accomplished or are no longer relevant.
9. Individualized case plan goals shall be prioritized based on the offender's risks/needs and the offender's length of sentence. Case plans should specifically target anti-social values, criminal peers, low self-control,



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dysfunctional family ties, substance abuse, and criminal thinking along with particular areas of concern, such as sex offender issues or mental health problems.

10. Goals should reflect the outcome desired, with task(s) or action steps indicating the steps needed to achieve the goal. It is often necessary to break the action steps into smaller, time sensitive segments, which are measurable, achievable, and specific.
11. Individualized case plans shall be reviewed at regular intervals with the offender, at least every six (6) months, and modifications made as indicated by the offender's behavior and response. When goals and action steps are completed, they will be replaced by the next prioritized risks/needs areas identified.
12. Documentation is critical to the process of effective case management. Case managers/agents shall endeavor to keep appropriate documentation to facilitate the case management process.
 - i. The prison and field services divisions may use a combination of systems for the documentation of case management contacts. These may include the Wyoming Corrections Information System (WCIS), or an adjacent case management software program for Field Services, including chronological notes.
 - ii. Case managers/agents shall use case notes to document offender contacts, as well as information or contacts related to an offender.
 - iii. The status of the case plan is an important element of the documentation. Case managers/agents shall endeavor to keep case plans current.
 - iv. When a case is transferred to a new case manager or agent, it will require a review of the case notes, in addition to other relevant information normally contained in the offender's file.
 - v. Case documentation should occur at regular intervals, and unless otherwise specified, at least on a monthly basis.

E. Transfer of Offenders

1. Whenever possible, transferring an offender to another facility or field office ought to enhance the completion of the individualized case plan. The case plan is to follow the offender.



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2. Individual facilities, or specific communities, may provide better opportunities for an offender to successfully complete his/her case plan. These factors should be considered when transferring an offender. Ideally an offender progresses through the WDOC in a manner consistent with the completion of the case plan, as well as the nature of the offender's sentence and court or parole board mandates.
3. Upon arrival to a new facility or field office the new case manager/agent shall ensure the offender receives an orientation.
4. Updated case material, including the correctional case plan, shall be transferred within one (1) week of an offender's transfer to another facility or field office, in order to ensure a continuity of case management.

F. Case Management Audits

1. In order to ensure the department's mission is being met, supervisory staff will be responsible for regularly auditing case plans and related documentation. This process shall use a uniform reporting format, which identifies the strengths of the case management plan applied, along with any necessary corrective actions.
 - i. The Division of Field Services Administrator and Division of Support Services Administrator shall be responsible for establishing the uniform reporting format.
2. Audits shall review the adequacy of the case plan and its implementation, as well as ensuring appropriate documentation is in place.
3. Unless established elsewhere, audits will involve at least ten percent (10%) of the caseload or twenty (20) cases, whichever is less, randomly selected on an annual basis.
 - i. New case managers/agents, as well as those requiring extra support and direction, may be audited at a higher rate than experienced case managers/agents for the first year.
4. Audits shall generally be completed at least three (3) times per year, per case manager/agent.
 - i. New case managers/agents as well as those requiring extra support and direction, shall be audited at least quarterly in order to ensure useful and timely feedback.



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5. Audits are a mechanism to acknowledge staff doing effective work, as well as assist staff needing further direction. Audits shall provide useful and timely feedback for case managers/agents.
6. In order to help ensure the department is progressing appropriately in effective case management, quality assurance reviews will be conducted. The program manager from the Support Services and Field Services (ACC) divisions, with the assistance of an audit team, will conduct one quality assurance audit annually per facility.
 - i. The reviews will consist of five percent (5%) or at least twenty-five (25) cases, randomly selected, of the offender count, within the designated facility. The program manager will determine when the facilities are to be reviewed, and coordinate the audit with the warden or director of the specific facility to be audited.
7. The case plan audit team shall document findings of audits conducted pursuant to this section. Strengths and deficiencies will be noted, and corrective actions developed where necessary. The program manager, or designee, will submit a written report of the findings of the audit to the warden or director of the facility and Support Services or Field Services division administrator.

G. Case Management Manual

1. Case managers/agents shall utilize, when and where necessary, the WDOC case management manual. This manual provides greater and specific detail about the many aspects of case management within the WDOC and augments this policy.
 - i. The case management manual is a useful reference source to aid the case manager/agent in identifying protocols, evidence-based correctional intervention strategies, and aspects of specific elements of the case management process within the WDOC.
2. The Division of Support Services shall be responsible for regular updates of the case management manual.

H. Case Management Training

1. Within six (6) months of employment in the WDOC, or the adult community corrections facilities, case managers/agents will receive initial training in the areas of effective case management principles, the core principles for individualized case plans identified in section II.D. of this



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policy, as well as specific case management and case planning expectations and requirements. Additional training may be provided.

V. TRAINING POINTS

- A.** What is case management and why is it important to WDOC?
- B.** What is the role of assessments in the case planning process?
- C.** What are five (5) of the core principles of case management?
- D.** What is the case management model most commonly used in the WDOC?
- E.** What are the key elements of an effective case plan?
- F.** What is an important consideration when transferring an offender?
- G.** What needs to be documented in an offender's case relative to case management and where should that take place?
- H.** What role does the case management manual play in the case planning process?
- I.** When should new case managers/agents be trained on the principles of case management?