

**Testimony before the House Judiciary Committee's Subcommittee on
Crime and Corrections**

State Correctional Institution at Camp Hill

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Good afternoon Chairman Birmelin, members of the Subcommittee and staff, my name is Bill Harrison and I am the Chief of Classification Services for the Department of Corrections. I would like to take this opportunity to speak on the subject of the diagnostic and classification process that newly committed inmates undergo as they enter the Department of Corrections. Additionally, I will speak about the Pennsylvania Additive Classification Tool, or PACT, in more detail and how our classification instrument was developed, as well as how it operates in the Pennsylvania Department of Corrections.

The diagnostic and classification process begins when an inmate is initially received into the Department of Corrections. All female inmates enter the Department through the State Correctional Institution at Muncy. Male inmates enter the Department through the State Correctional Institutions at Graterford, Pittsburgh or Camp Hill; however, all males are classified at the Diagnostic and Classification Center (DCC) at Camp Hill. The overall diagnostic and classification process occurs over a four to six week period, although the inmates may remain there for a longer period of time until room opens for them at another institution. Newly committed inmates are separated from general population inmates until the diagnostic and classification process is completed, and visitation is restricted during the first ten days following admittance to the DCC in order to make the inmate available for intake processing, testing, interviews and orientation by staff.

The inmate is delivered to the main gate of the facility by the county sheriff's department and the inmate's identify is verified. Records specialists review the sentencing information, court orders and Act 84 documents to be certain that information is complete and if so, the inmate is accepted into custody.

The inmate is taken to the reception area. The property officer takes the inmate's personal property. Authorized property is returned to the inmate and other items are sent home. The inmate is strip searched to be certain no contraband is introduced into the institution, and is showered. Immediately upon arrival the inmate is tested for drugs and if positive is referred for treatment. Additionally, we alert the committing county that they sent to us an inmate with illicit drugs in his or her system. The inmate is photographed, fingerprinted and is issued regulation clothing and toiletries along with an initial cell assignment in the reception housing unit.

Within the first several hours of admittance to the DOC, the inmate receives an initial medical and psychological screening to be followed by a more in-depth evaluation later in the DCC process. If signs of mental illness or medical problems are observed, a referral is made for treatment. All inmates are initially examined for communicable disease such as TB, and are moved to a separate unit for four to seven days until it is determined that they are clear of disease.

Within the first forty-eight hours, the inmate is assigned a counselor and participates in a group orientation to the Department during which basic rules and procedures are explained. The inmate is then issued an Inmate Handbook in English, Spanish or Braille. The handbook contains the policies and regulations governing his or her incarceration.

As a result the DNA Detection of Sexual and Violent Offenders Act, all inmates covered by the act have a sample taken which is sent to the Pennsylvania State Police for analysis and profiling.

During the ensuing weeks, the inmate receives I. Q. and personality testing from staff psychologists, academic achievement and placement testing from educators, and drug and alcohol screening. Additionally, interviews are held with a corrections counselor, psychologist, chaplain, and medical staff. These professionals obtain various testing data and socio-demographic information needed to properly classify the inmate and to make program recommendations to be followed throughout the inmate's incarceration. Additionally, the inmate's custody level is determined and needs assessment completed through the Pennsylvania Additive Classification Tool (PACT), which I will explain in more detail shortly.

A Classification Summary is developed for use by staff at the programming institution in working with the inmate. The summary includes the following: photo, physical description, problem areas, official version and inmate version of crime, criminal history, previous and current Institutional adjustment, education and work history, social history, medical information, the inmate's sentence, custody level and needs assessment information, as well as the classification counselor's recommendations for future programming.

The final step in the diagnostic and classification process is the classification staff meeting during which the initial institutional placement is recommended. This placement is based upon the individual's custody level, program needs, separation from enemies, as well as space availability.

Inmates are generally sent further from home initially, not to cause injury to the inmate or to his or her family, but to create an incentive for inmates to maintain good behavior and to involve themselves in recommended programs, thus

earning transfer to a facility closer to home. In Pennsylvania, we have no "good time" statute nor do we have many facilities located close to the population centers from which we receive the vast majority of our inmates. For example, in 1999, 50% of the Department's population was committed from Philadelphia and surrounding counties. The Department developed incentive-based transfers to reward those inmates who behave well and who involve themselves in programs in order to properly utilize bed space close to our population centers. At this point, it should be noted that prior to 1995, inmates were initially placed close to their home when feasible; however, this created an unfair situation for many of our inmates. Due to long-term inmates occupying a bed for extended periods of time, regardless of their adjustment, more deserving inmates were denied opportunities to get closer to home. The present system results in a fair and equitable process open to all who choose to follow the rules.

The transfer from the DCC to the receiving institution occurs when space becomes available. When the inmate is received at this institution, the corrections counselor in conjunction with the inmate develops a Prescriptive Program Plan (PPP), focusing upon the recommendations made while the inmate was in the Diagnostic and Classification Center. The PPP is intended to serve as a "road map" for the inmate to help him or her chart behavior and program activities during the term of incarceration. The PPP lists problem areas and treatment needs to be addressed by the inmate and enumerates specific programs, including release planning and payment of the ACT 27 fee. Additionally, the PPP makes it clear that the inmate is expected to maintain positive housing, work and school evaluations and to remain misconduct free. The PPP is signed-off by both the inmate and counselor and is reviewed and updated at least annually. The inmate has a clear picture regarding what is expected of him or her at all times. The results of the PPP are shared with the Pennsylvania Board of Probation and Parole so that the Board is made aware of programs that the inmate has completed.

Pennsylvania Additive Classification Tool (PACT)

The PACT is based upon the National Institute of Corrections (NIC) additive classification model. This model is currently being used in over two dozen state and metropolitan jurisdictions with several others in various stages of development. The basic NIC additive classification model has been in use since 1982. The classification instrument is utilized to determine the amount of control needed to manage inmates in the prison setting. Each inmate receives an initial classification upon reception to the Department of Corrections (DOC) and then annually until he or she is released. PACT is based upon a behavior-driven model.

PACT is predictive in nature. It was developed for the purpose of anticipating inmate misconduct and acting out behavior in the prison setting. This classification tool recommends custody levels ranging from: 2 (minimum), 3 (medium), to 4 (close). Program staff can override the PACT recommended custody level based upon their professional judgement of the case and do so at a seven percent overall rate. Custody level 1 (community corrections) or 5 (maximum) can be assigned based upon other program factors such as approval for residency in a community corrections center (1) or due to disciplinary problems (5). Inmates at lower custody levels receive more privileges as a result of their good behavior. These privileges include additional visits and telephone calls as well assignment to dormitory housing units.

Program codes can be assigned by staff to further define an individual's need for supervision. Program codes identify inmates cleared for programs such as outside clearance or pre-release programming or may be used to identify those who need single-cell assignments, close observation or who are capital punishment cases.

The multi-disciplinary committee that developed PACT selected a series of factors for the initial tool which, based upon "face validity," appeared to be predictive of inmate behavior in the prison setting. "Real world values" (public's perception of what is important) were taken into consideration when selecting the factors. Items selected for the reclassification instrument focused more on observed behavior in the incarcerative setting.

The prototype instruments were pilot-tested on a representative sample of the population. The results of the pilot tested classification tools were compared with each inmate's misconduct record, and the pilot demonstrated which factors were more predictive of institutional misconduct. Those factors were selected for inclusion in the final instruments. All factors are based upon objective, readily available data that is less subject to misinterpretation by staff utilizing the classification tool. The factors are as follows:

Initial Classification:

Severity of Current Offense
Severity of Criminal History
Escape History
Institutional Adjustment
Number of Prior Commitments

Time to Expected Release
Age
Marital Status
Employment

Reclassification:

Severity of Current Offense
Severity of Criminal History
History of Institutional Violence
Number of Disciplinary Reports
Most Severe Disciplinary Report in
Past 18 Months
Age
Escape History
Program Participation
Work Performance
Housing Performance

An override procedure was developed for staff to recommend changes in the instrument-generated custody level, based upon aggravating and mitigating factors not considered on the classification instruments. Overrides are expected to be used in 5% - 15% of all actions in that, although a tool should do a fairly accurate job of placing an inmate into a proper custody level, it is recognized that it cannot take the place of professional judgement in all cases. The DOC maintains an overall rate of seven percent, which indicates the tool is working. Approval of overrides is controlled centrally so as to maintain the integrity of the classification system.

PACT performance is monitored on an ongoing basis. On a monthly basis, reports are provided that break out the number of inmates classified into the various custody levels; these breakouts are compared to the percentages of CL 2, 3 and 4 inmates that the classification instruments were designed to produce (L2-37%, L3-39%, L4-17%). Additionally, the percentages of overrides are tracked on an on-going basis to ensure that the facilities are processing overrides in the expected range. The DOC also maintains an automated misconduct tracking system to track misconducts. On a monthly basis, the misconducts are analyzed in aggregate form and the results show a clear distinction between custody levels as measured by the number of misconducts. Our on-going evaluation of the data shows that custody level 4 inmates receive more misconducts and are involved in assaultive behavior at a higher rate than lower custody level inmates. This demonstrates that our classification system is working as intended and is able to identify inmates who are prone to engage in disruptive behavior.

The on-going validation and monitoring system helped to identify a problem classifying female inmates in 1997. Female inmates were being over-classified due to differing rates of misconducts than were anticipated. The Department was able to identify the discrepancy and adjusted the tool to more accurately classify this population.

The Department recognizes the importance of on-going validation from sources outside of the Department. Towards that end, the DOC has applied to the National Institute of Corrections for a technical assistance grant to contract with a national expert in the field of classification to assist us with a re-validation of our system. The Department has received tentative approval of that grant and we expect to begin the re-validation process later this year.

In addition to determining an inmate's custody level, PACT also enables staff to identify inmates' treatment and program needs. The following needs are identified as part of the classification process for each inmate: mental health,

substance abuse, educational, vocational training, sex offender treatment, and other needs specific to the inmate.

There are many benefits to a correctional system that employs an objective inmate classification system. PACT is a behavior-driven, "Just Desserts" model that allows staff to negatively reinforce disruptive behavior and to reward positive behaviors. It is an automated system that allows staff to study custody levels, inmate characteristics, and program needs by institution as well as system wide. PACT increases planning ability in the areas of housing, staffing and programs and permits decision-making based upon objective, readily available data that is less subject to misinterpretation (age, crime, number of misconducts, marital history, history of institutional violence, etc.)

The housing of inmates according to their custody levels also permits staff to re-allocate needed resources to properly supervise inmates requiring close supervision.

This concludes my remarks. I would be happy to respond to any of your questions.