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7 Keys to "Make EBPs Stick": Lessons From the Field

Faye S. Taxman¹

George Mason University

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RECENT EVIDENCE TO improve the implementation of evidence-based supervision has focused on new training initiatives for staff. While training of staff is important to advance skills and knowledge about these practices, training can be very limited. Organizational strategies are needed to sustain the effort in evidence-based supervision. This article focuses on seven strategies:

1. *Build capacity through an organizational plan and structure that supports and sustains the implementation of evidence-based practices and quality supervision.*
2. *Build capacity through a revised Mission that focuses on the changes related to RNR supervision.*
3. *Build capacity by planning for change in key areas.*
4. *Build resiliency through internal supports and learn the skills, practice the skills.*
5. *Build resiliency through improvements in work processes.*
6. *Collaborate with agencies toward a common goal of improving offender outcomes and promoting public safety.*
7. *Build resiliency by altering offender involvement in key decisions.*

Together these strategies will help organizations reengineer supervision to be a more effective

tool to reduce recidivism.

The *new* approach to evidence-based practices (EBPs) is to train and then coach staff to use cognitive restructuring skills in supervising offenders. This new generation of trainings and curriculums is for pretrial, probation, parole, case managers, and other types of supervision officers to better use assessment tools, establish case plans, problem-solve, and use principles of motivational interviewing, cognitive restructuring, and cognitive behavioral approaches. These trainings have different names, including Effective Practices in Community Supervision (EPICS), Staff Training Aimed at Reducing Rearrest (STARR), Strategic Training Initiative in Community Supervision (STICS), Proactive Community Supervision (PCS), and the new web-based Skills for Offender Assessment and Responsivity in New Goals (SOARING2), but they have similar goals and draw upon similar skills for officers. Each has intensive training components (several days) followed by some type of booster or reinforcement efforts. Some use the new methods of audiotaping or videotaping several officer-offender interactions, grading the tapes, and providing feedback to the officer. This approach is now considered the *du jour* approach to EBPs. Trainers and organizations hope these new sets of training will galvanize and rally staff around the EBPs concepts. And, these trainings acknowledge and then reinforce that the EBPs are new, novel approaches that were not part of routine practices.

Like other efforts to reengineer the system by introducing new skills, programs or services, this new set is more likely to have traction if there are complementary organizational and systematic processes to integrate new skills into the existing environment. That is, giving officers new skills is likely to increase their job satisfaction, but it may not be likely to transform the supervision practice unless greater attention is given to placing these skill sets within the organizational context. This requires a companion set of organizational activities that can garner internal and external support for *this approach* to supervision, which is vastly different from the expectations and approaches used in prior years (when a more enforcement or compliance focus on accountability reigned). In fact, a growing group of scholars recognize that the policies of mass incarceration have fueled more punitive sanctions in the context of community supervision, which affects how the justice and (correctional system) responds. In other words, the “culture of control” (see Garland, 2001) invaded community supervision as the roles and expectations for probation supervision adapted and emphasized offender accountability, enforcement and compliance with conditions, and stiffer sentences with many conditions of release (see Taxman & Thanner, 2004). On the other hand, supervision under the EBP framework provides a balance between offender change and accountability while embracing a new tool-kit that officers can use to facilitate these goals (Taxman, Shepardson, & Byrne, 2004; Taxman, 2008).

The evidence-based supervision model (referred to as RNR Supervision) is landing onto an organizational landscape where the “culture of control” has existed for over 30 years. To successfully place RNR supervision within these existing organizations, with their mimic mass-incarceration policies and practices (i.e. punitive, severity, etc.), organizations need to address the systematic issues that have thrived and existed for the last 30 years—and that present barriers for the new innovation or refined probation practices to thrive and exist. In this article, the focus is on the organizational approaches and strategies to address the systemic and organizational issues that may prevent the uptake of RNR Supervision. Stated simply, a great need exists for ways to make evidence-based supervision “stick” or become glued to the foundation and norms of supervision organizations. Without attention to these organizational issues, it is likely that the current efforts to develop skills of offenders will be undermined by the work processes that support accountability and compliance management. In this article, we discuss six strategies that make things “stick” (sustain) to the organizational practices.

What Is all the Hoopla About?

The evidence-based supervision model identifies the officer as the facilitator of offender change

(Taxman, 2002; 2008) instead of merely an enforcer of conditions of release. The focus on the officer is novel in that the majority of the EBP literature is about correctional programs (whether they are cognitive behavioral therapy, therapeutic communities, counseling, employment preparedness, etc.) as the means to advance individual-level change. The evidence-based supervision notion is that the officer affects the degree to which the individual, justice-involved person (offender) understands his or her risk and why participation in a correctional program is important; the officer monitors and reinforces the importance of participating in programming and fulfilling the conditions of release, and uses incentives and sanctions to deal with how well the person is progressing on supervision. That is, the evidence-based supervision approach does not dismiss the importance of correctional programming but rather positions the programming as part of an integrated model that includes the supervision officer. And it empowers supervision officers to use their "leverage" or relationship as a tool to facilitate offender change and progress on conditions of release. In essence, the model bolsters the benefits that can be gained from correctional programming by emphasizing the importance of the officer-offender interaction. Officers need to develop the skill sets for this model because this new approach is not just about the style of supervision but rather about the fundamental role of the officer. However, it is unclear whether the officer sees the role change and consequent added responsibility in the areas of: → *Help offender understand the need for change* → *motivation for change* → *facilitate entrance into appropriate programming and services and work on criminal thinking* → *monitor entrance and progress including all conditions* → *incentive to maintain momentum in the change process*. This is where the rubber meets the road in terms of supervision, and where the officer, supervision agency, treatment agency or agencies, judiciary, prosecutors, defenders, and larger community must support this role change as part of the appropriate process for supervision. Essentially, the organization and system affects the success of the reengineering/change process.

As studies have emerged in this area of research, they are generally supportive of the approach but offer suggestions to advance the efforts to reengineer supervision to minimize the "culture of control" and to emphasize the importance of offender change. The Washington State Institute for Public Policy, an organization devoted to synthesizing the science and then placing efforts on a continuum of effectiveness, conducted one of the first efforts to understand the potential impact of the evidence-based supervision model, dubbed the Risk-Need-Responsivity (RNR) supervision model. Drake (2011) reviewed its effectiveness in a meta-analysis, finding that standard probation had no impact on recidivism but probation with treatment reduced recidivism by 10 percent and Risk-Need-Responsivity (RNR) supervision reduced recidivism by 16 percent. RNR involved several components, including reduced caseload size, use of a third-generation risk-need assessment tool, placement of offenders in appropriate programming, if warranted, and use of incentives and sanctions. The primary studies varied in terms of their emphasis on the various elements, but the core components were similar and echoed much of the evidence-based supervision models.

Recent evidence is accumulating about the impact of training officers that support the efforts to develop the specific skill sets to support RNR supervision. Taxman (2008) discussed how the training for the Maryland Proactive Community Supervision model focused on the four components of assessment, case planning, problem solving, and monitoring and the training's impact on reduced recidivism. Essentially, most studies find that officers do not understand the concepts behind criminal thinking and criminogenic risk factors, and therefore have difficulty in applying them in supervision processes (Oleson et al., 2012; Robinson et al., 2011; Bonta et al., 2011). For example, Bonta and colleagues (2011) and Bourgon et al. (2012) report on the STICS training, which discovered several interesting findings, including: 1) officers did not understand the concept of criminogenic needs, 2) exposure to the training improved an understanding and resulted in a greater adherence to the RNR principles, and 3) trained officers used cognitive-behavioral techniques and were more likely to address the procriminal attitudes of their clients. Offenders supervised by officers trained in STICS had slightly better outcomes than offenders supervised by traditional methods. For offenders under federal probation, Robinson and colleagues (2012) and a

small pilot study conducted by Smith and colleagues (2012) generally report that officers exposed to the training were more likely to use the techniques involved in RNR supervision, and that the offenders supervised had lower rates of reoffending or technical violations. There appears to be growing evidence that the specific trainings improve officers' skills, and that these improved skills, using techniques of cognitive restructuring and behavioral management, have a positive impact on offender outcomes.

The rationale for focusing on the officer is clear—the officer has tremendous discretion over what types of behaviors and performance of the individual offender are considered compliant or noncompliant. The officer exercises this discretion in determining what aspects of the conditions of release to emphasize, how best to respond to compliance (or noncompliance), and what types of behavior are sufficient to consider a probationer successful. In other words, the officer's response to the actions of the individual offender can determine outcomes. In addition, officers have different styles when they work with offenders, which may also affect outcomes. But most important, the general correctional literature reinforces that control-oriented supervision has no effect on recidivism, whereas supervision that involves treatment or use of the RNR supervision model improves offender outcomes (Drake, 2011). Helping officers learn to use discretion appropriately and to expand the tool-kit of how to "work with" an offender may therefore improve supervision and supervision outcomes.

The question about training is whether officers will sustain the new skills developed in the normal work processes of supervision. In a study of training probation officers in motivational interviewing, Miller and Mount (2001) found that within three months the probation officers were back to using their traditional strategies. All of the training studies cited above examine shorter-term outcomes (for a small number of officers). Prior research confirms that decay is a frequent occurrence. And, in fact, the organizational environment often affects whether officers use a new innovation or maintain it (even innovations such as skills). Makarios, McCafferty, Steiner, and Travis (2012) reported that parole officers did not use the administrative sanction grid in which they were trained and that their lack of use was tied to officers' perception of middle-management's support for the innovation. The limit on officer discretion in the sanctioning process was considered too great, and officers resisted losing that discretion. In a study of parole officers in California, Turner and colleagues (2012) also found that officers were hesitant to limit their discretion and that the use of the reform (sanction grid) was minimal. Rudes (2012), in an ethnographic study, found that parole officers developed strategies to deal with noncompliant offenders that defied management's desire for more correctional programming; among these strategies were *partnering* with police for searches, piling on charges, and using paperwork strategies to continue the control-oriented supervision. Miller and Maloney (2013) reported that risk and need assessment use in supervision decisions varied considerably and that the use depended on the practitioners' acceptance of the risk/needs tools, the efforts placed on the organization for training officers in using the tools in the monitoring of the offenders, and the officers' perception of procedural justice. The literature suggests that, in addition to initial training, organizations need a complementary set of organizational strategies to reinforce the innovation and ensure that it is valued in all aspects of the organization.

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Strategies at the Organizational Level: Complementing the Skill Building

In this section, we identify seven key strategies at the organizational level to facilitate greater officer appreciation and belief in the innovation (such as RNR supervision). These organizational strategies advance the adoption and implementation of EBPs to facilitate sustainability, or the routinization of the EBPs into the core business of supervision. Much of the material in this article draws on Taxman and Belenko (2012), *Implementation of Evidence-based Practices in Community Corrections*; Fabelo, Nagy, and Prins (2011), *Ten Step Guide to Transforming*

Probation Departments to Reduce Recidivism; and Crime and Justice Institute (2009), *Implementing Evidence-Based Policy and Practice in Community Corrections*. A common theme throughout these pieces is that more attention must be given to the organizational approaches to support RNR supervision and evidence-based supervision policies and practices in the broader context, and to integrating the officer skill sets into routine supervision practices. These sources also focus on two additional components: building capacity and building resiliency among the internal and external partners.

Strategy 1: *Build capacity through an organizational plan and structure that supports and sustains the implementation of evidence-based practices and quality supervision.*

RNR supervision cannot be successfully implemented without creating a learning environment that supports the capacity of the organization to understand and implement this new approach. The preparation of leaders and staff includes three main themes: 1) understand the science behind RNR/EBPs to comprehend the core components; 2) differentiate between RNR/EBPs and current practice and identify the steps needed to implement RNRs; and 3) learn the Plan_Do_Study_Act (PDSA)² and quality-improvement processes as a way of aligning RNR supervision with existing work processes. All three of these themes build the capacity of the organizations and the individuals within them.

To build knowledge, it is important to provide intensive training in five key areas: (1) assessment, (2) case planning, (3) the use of appropriate interventions and controls, (4) compliance management, and (5) working relationships with offenders. Continued training and staff development are needed to work with the offender population in a manner that supports behavioral change. Relevant skills include motivational enhancement strategies, problem-solving strategies, criminogenic needs assessment, offender engagement, development of target goals, performance monitoring, and feedback. These skills are needed in all four areas of the supervision process.

One first critical step is to provide a *visual or mental map* of how the revised RNR process will work. Along with the map should be the supportive evidence for each phase of the RNR supervision model. For example, engagement through assessment and case planning; early change through responsivity; sustained change through compliance management (sanctions and rewards) and building natural supports (i.e., family, friends, etc.), and work relationship with offenders (deportment, engagement). As shown in Figure 1, this mental map allows everyone to see how the new revised processes will work and also how existing supervision processes are integrated into redefined processes. This alignment, combined with the visualization process, is an important first step to assisting others to understand that quality supervision under RNR supervision is tied to what the officers are involved in, the processes used, and the emphasis on key components that ultimately affect offender outcomes.

As part of this visualization, there are three main components of the supervision process that affect offender outcomes and that require the officer to use good working relationship strategies to affect success. These include: 1) engagement (getting the offender to understand the criminogenic needs and supervision requirements), 2) early change (the formal and natural processes to facilitate offender change), and 3) sustained change (the environmental and situational factors that will facilitate a person's continued success in a crime-free, drug-free lifestyle). The intensive training needs should incorporate the supporting scientific evidence, the policies and procedures to support the new approach, and the desired outcomes.

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Strategy 2: *Build capacity through revised Mission that focuses on the changes related to RNR supervision.*

Many correctional and supervision agencies have embedded the use of EBPs in their mission and goal statements. Even more so, many state legislatures have mandated this as part of their efforts to reform the justice system. This is a core component of justice reinvestment where the goal is to reduce incarceration by investing in community corrections and expanding the use of evidence-based programming as a routine part of correctional practice. But these mission statements may not go far enough to affect the work processes and the integration of EBPs into daily routines.

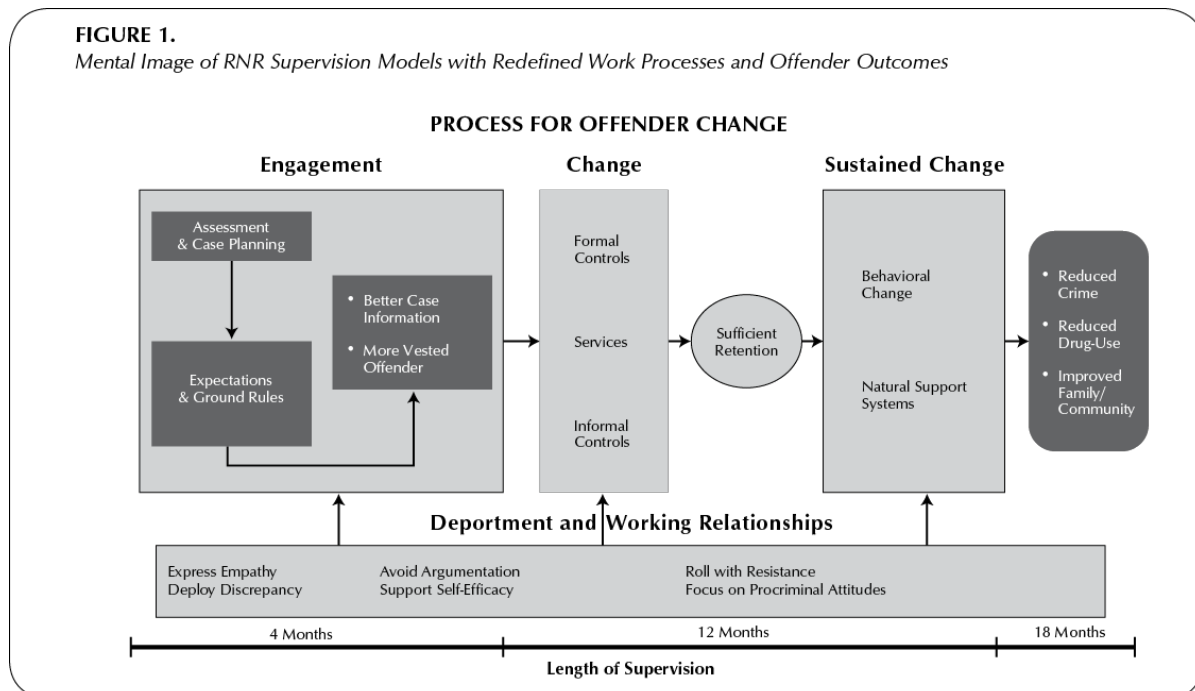
Below, we present a few mission statements from various state correctional systems:

Travis County Probation Department

Mission Statement: The mission of Travis County Adult Probation Department is to impact the community by making it safer and changing the lives of those placed under its supervision. We work with the community so each individual successfully:

FIGURE 1.

Mental Image of RNR Supervision Models with Redefined Work Processes and Offender Outcomes



Adapted from Taxman, Shepardson, & Byrne (2004)

- Makes restoration to the community/victims.
- Meets their supervision conditions.
- Fully participates in programs and services to positively change their lives and be law abiding. (doi: http://www.co.travis.tx.us/community_supervision/mission.asp)

California Department of Corrections and Rehabilitation

Mission Statement: The overarching mission is to improve public safety through evidence-based crime prevention and recidivism reduction strategies. (Doi: http://www.cdcr.ca.gov/About_CDCR/vision-mission-values.html)

With a specific mission for a subunit of the agency that focuses on programs and services, the mission of the Community and Reentry Services (CRS) unit is to provide evidence-based rehabilitative programming opportunities for individuals reentering their communities after a period of incarceration. CRS relies on individual assessments to identify the risks and needs of parolees in order to provide

programming that best meets those needs. CRS strives to ensure that parolees are immediately engaged in programs upon parole into the community, ensuring a seamless and effective community reintegration and ultimately reducing recidivism and increasing public safety. (doi: http://www.cdcr.ca.gov/rehabilitation/ofs/community_and_reentry_services.html)

Pennsylvania Department of Corrections

The Pennsylvania Department of Corrections operates as one team, embraces diversity, and commits to enhancing public safety. We are proud of our reputation as leaders in the corrections field. Our mission is to reduce criminal behavior by providing individualized treatment and education to offenders, resulting in successful community reintegration through accountability and positive change. (doi: http://www.cor.state.pa.us/portal/server.pt/community/about_us_our_mission/20857)

As shown in these mission statements, the emphasis is on the key components of mass incarceration (supervision) correctional programming and offender accountability. To embrace the importance of rehabilitation ideals in a punitive context requires a focus on what the offender should do (i.e., participate in treatment programming, be accountable, be integrated into programming, etc.) and not how the system should perform.

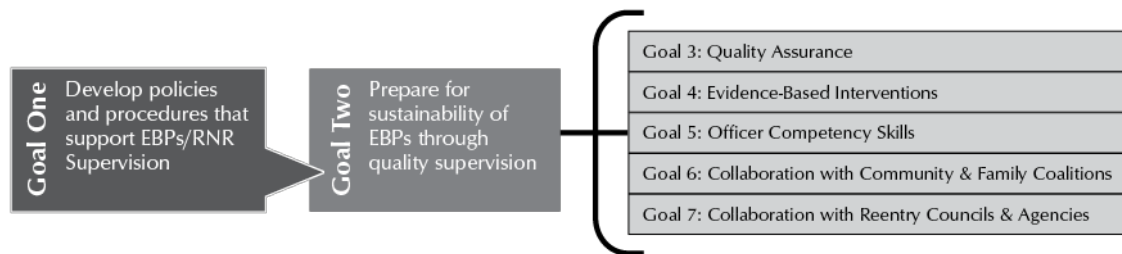
None of these mission statements acknowledge the change in mission, the change in roles and responsibilities of key staff, the change in relationship to organizations external to the corrections agency, and any other changes. That is, none of the statements emphasize the importance of these changes that are necessary to highlight how the agency is moving forward. While it may not be typical for mission statements to recognize the change, in an environment where the reengineering alters the work processes and makes drastic changes in the core functions of an agency, mission statements that highlight the change help visualize and dramatize the changes. This is consistent with Rogers' (2003) approach of exemplifying the added value of the innovations. A revised mission statement might emphasize:

The mission of [name of agency] is to use evidence-based practices to transform the corrections agency from one focused on public safety to public safety with humane and efficacious efforts to deliver correctional experiences that address the factors that affect the involvement of individuals in criminal behavior. To achieve its mission, [name] will provide: 1) Accurate and timely dissemination of evidence-based information to the community; 2) Accurate processes to integrate EBPs within the core functions of this agency; and 3) Bidirectional exchange of constructive knowledge related to effective programs and efforts to maintain public safety and reduce recidivism.

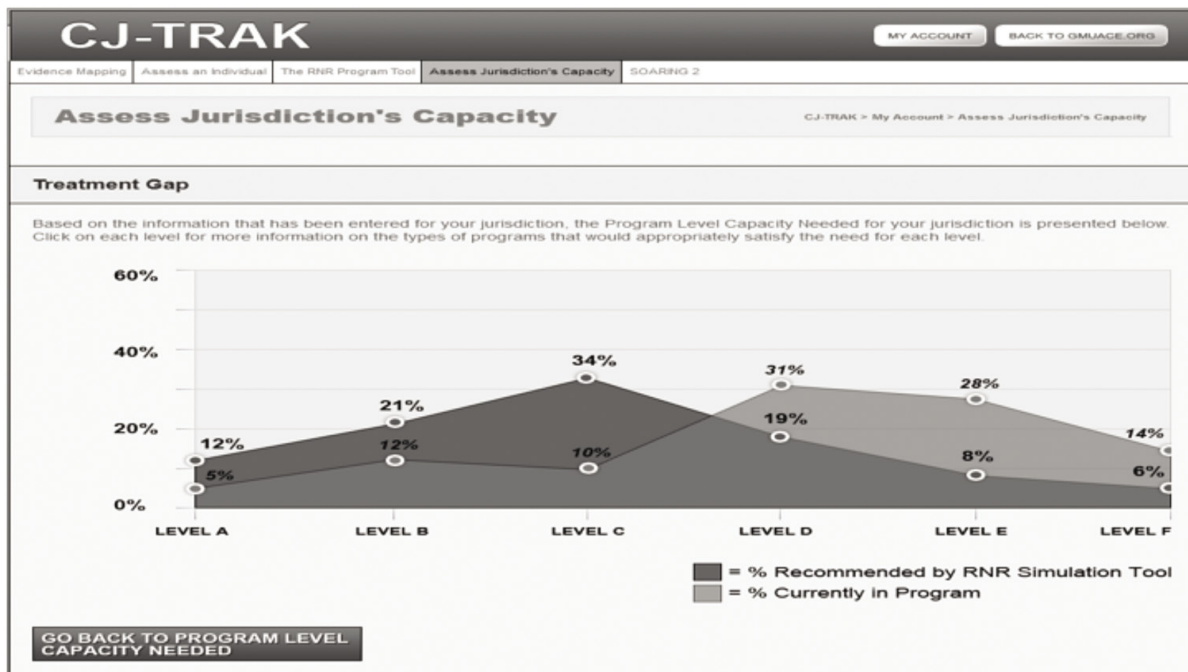
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Strategy 3: Build capacity by planning for change in key areas

A good strategic plan facilitates implementation at all levels of the agency. This plan should incorporate an acknowledgement of the supporting practices for the RNR Supervision model, including: 1) What instrument(s) will be used as the core assessment tool? 2) What case planning will be required and how will criminogenic needs be included? 3) What criteria will be needed to assign offenders with certain risk-need profiles to appropriate programs and services? 4) What rewards and sanctions will be used (and by whom) to respond in a way that shapes offender behavior? These decisions need to be supported from the beginning.

FIGURE 2.*Overview of Goals and Process to Develop RNR Supervision***Table 1.***Resources to Achieve Different Implementation Goals*

Goal	Resources
Goal 1: Develop the policies and procedures to support the use of RNR/EBP supervision in all offices and/or districts.	Taxman, Shepardson, & Byrne, 2004 Taxman and Belenko, 2012 Fabelo, Nagy, & Prins, 2011 Crime and Justice Institute, 2009
Goal 2: Develop an organizational structure that supports and sustains the implementation of RNR/evidence-based practices and quality supervision.	Taxman and Belenko, 2012 Fabelo, Nagy, & Prins, 2011 Crime and Justice Institute, 2009
Goal 3: Develop and implement a quality improvement process for each component of the RNR Supervision model (assessment, case planning, programming, rewards/sanctions, working relationship).	Howe & Joplin, 2005 Taxman, Shepardson, & Byrne, 2004
Goal 4: Assess the use of evidence-based interventions and controls in each office and then develop services that could be used more effectively to meet the risk-need profiles of offenders in your jurisdiction. Work with existing programs to ensure that programs and services use evidence-based curriculums, target key criminogenic needs, and address risk factors.	Taxman & Pattavina (2013) <i>RNR Simulation Tool</i> , www.gmuace.org
Goal 5: Implement a structure to support competency development for all staff in the five areas of RNR supervision.	Carey, 2010 EPICS STARR STICS PCS
Goal 6: Support meaningful and long-term community and family involvement in informal social controls (natural support systems).	Family Justice Program at Vera Institute (http://www.vera.org/centers/family-justice-program?qt-centers_family_justice_program=7#qt-centers_family_justice_program)
Goal 7: Collaborate with agencies toward a common goal of improving offender outcomes and promoting public safety.	Taxman & Belenko, 2012

Figure 3.*Gap Analysis in Evidence-Based Programming*

The plan needs to cover the following goals at each office within an agency. Having each office prepare a plan engages the staff and managers in the change process and allows local issues to be addressed (since not all issues exist in all areas). Each of these goals has a companion set of documents available in the field that organizations can use as resources.

For a further example, Goal 4 of Table 1, the RNR Simulation Tool (www.gmuace.org/tools), can assist with understanding the offender population through three processes: 1) assess the current/available programs and services in their jurisdiction according to the EBP treatment and control literature; 2) use the existing risk and need information to determine the treatment and controls needed to address offender's risk and needs; and 3) identify gaps in services to adequately serve and control offenders in that jurisdiction. Figure 3 outlines the distribution of existing programs and recommended program capacity. This jurisdiction has too much capacity in programs in categories D (interpersonal skills), E (life skills), and F (punishment only). More capacity is needed in program levels A (drug treatment for addiction disorders), B (criminal lifestyle and cognitions), and C (drug treatment for abusers or those with lifestyle).

Scenario: A probation agency trained its officers to use EBP supervision using the EPICS curriculum. A third of the officers received training in the strategy and these officers were encouraged to share the material with their colleagues. They were asked to speak at staff meetings about their experience in using the skills. Yet, each week, the supervisor sent out an email applauding the officer that upheld public safety by filing the most warrants for technical violations. Not unexpectedly, few officers were interested in discussing their use of the EPICS skills.

As shown above, mixed messages frequently occur that serve to reinforce existing goals and objectives, even when staff are trained in the new set of tool kits. Therefore a concerted effort is needed to alter the culture of the agency to align with the concepts of RNR supervision. One way of doing so is to establish a set of routinely used performance measures to signal when RNR processes are being used and when achievements are obtained. These measures can serve as benchmarks to monitor specific organizational initiatives to see if they are aligned with the principles of RNR supervision. The benchmarks can also provide monthly feedback on the acquisition of the goals (i.e., number of assessments that resulted in placement in a program,

number of offenders that were accountable, number of people supervised that did not have warrants (filed by risk level), number of offenders with jobs, number of offenders that participate in treatment, number of negative urine tests, etc.)—such feedback can then galvanize the office around these benchmarks. Refer to the Council of State Government’s *A Ten-Step Guide to Transforming Probation Departments to Reduce Recidivism* for other set of benchmarks for further information.

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Strategy 4: *Build Resiliency through internal supports and learn the skills, practice the skills.*

Although training and conferences are valuable for exchanging information, there are challenges to successfully transferring information from a seminar/conference to daily work. The seminar/training provides an opportunity to learn new information and skills, but often does little to assist staff in applying the material to existing work processes. In fact, research continues to find that less than 10 percent of the material covered in training is retained. As a result, the importance of booster sessions or refresher efforts has been emphasized to help jurisdictions integrate the material presented in training sessions into actual work components. Booster sessions reinforce the material and allow smaller groups to discuss and digest it.

A recent study of a randomized controlled trial examining the impact of three types of post-training booster sessions in a juvenile justice setting illustrates the importance of post-training efforts, particularly the value of different types of booster sessions. The study involved a three-day intensive training similar to the Proactive Community Supervision curriculum, with added material on youth developmental issues, risk and need assessment for youth, and use of motivational enhancements for youth. This was followed by: 1) use of internal experts to champion the change in practice and work on social support in the office; 2) use of an external consultant to provide booster sessions focused on learned material and emphasizing using the material provided in the training; and 3) a standard group that received no additional training. The study found that the social support and network boosters improved youth caseworkers’ perception of the importance of the new practices, helped staff learn to integrate them into their existing work (Taxman, Henderson, Young, & Farrell, 2012), and reduced the rearrest rate of youth supervised by caseworkers that used the new skills (Young, Farrell, & Taxman, 2012). In other words, both developing organizational support and providing boosters are equally important in supporting the use of materials learned in training and impacting the supervision of delinquent youth when it comes to introducing new initiatives. In fact, the findings suggest that boosters that merely focus on the learned material have no added advantage over any post-training efforts. Therefore organizations need to develop a supportive climate for change and develop internal champions for new practices in order to sustain new innovations. A recent study in Colorado that focused on building “communities of care” or internal champions also illustrates how useful these strategies are in improving outcomes when building new skills in staff (Bogue et al., 2013). As noted in the change literature, internal champions and opinion leaders are critically important to routinizing practices into work processes. Innovations can occur when organizations adopt techniques that involve building skills of staff while also building organizational capacity and resiliency around using the skills and modifying the workflow.

Building organizational expertise begins with some basic skill building. The new RNR supervision model requires professionals to depart from mass incarceration policies that emphasize compliance, the previous “law enforcement” approach, and offender accountability. The more balanced approach of the RNR supervision model requires behavioral management techniques that include cognitive restructuring and cognitive behavioral strategies. Internal processes including coaching and a community-wide approach play an important role in initial skill acquisition and long-term sustainability. Skill learning is a gradual process. One of the keys to this process is to get the participants (staff) to engage in the behavior immediately and repeatedly. Using

“champions” to facilitate practice with feedback, and then more practice, is critical to advancing staff’s knowledge of the new skill and comfort level in it. This occurs initially in training but must also be part of a continuous learning environment where people can learn and adapt the skills to their workplace and work processes. Figure 4 shows a number of integrated skills that need to be developed and worked through the internal processes for staff and managers to be competent in applying the RNR supervision model.

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Strategy 5: *Build Resiliency Through Improvements in Work Processes.*

A renewed interest in quality improvement (QI) processes emerged from the need to integrate the core components of RNR supervision into work processes, similar to Figure 1. That is, the techniques underscoring RNR supervision need to focus more on how to align the offender management process to integrate all of these skills. As noted in the article by Rudes, Viglione, & Porter (this issue), the quality improvement process is a rapid-cycle change process where staff members develop ideas, test the ideas, measure the outcomes, and implement them if the outcomes are desired. The *Plan_Do_Study_Act* (PDSA) model is an important tool that the coaches will learn and use to advance the achievement of performance objectives. QI processes integrated Strategy 3 (performance measures) with work processes to determine what impact the QI processes have on the ability of the organization to be responsive to the changes.

Attention should be given to modifying policies and procedures in the office to advance the use of RNR supervision. At this stage of the change process, the organization needs to equip supervisors with RNR supervision strategies and help each office develop its own policies and procedures to accommodate the RNR supervision vision. Each office should define and adjust its vision to the EBP supervision model, beginning with identifying a general vision for the agency that will inspire the development of their own policy and procedures to accommodate the vision, including: 1) understand the context of revised supervision policies and practices to achieve this vision; 2) learn some of the strategies to communicate motivationally to line staff; and 3) understand how to determine whether the risk and needs assessment is being used in case plans. Among possible sources of information for this third point are management audits of officers’ caseloads, the Quality Contact Standards form used in the Maryland Proactive Community Supervision (PCS) project (see Taxman, Shepardson, & Byrne, 2004), or other readily available information. The case study of Travis County, Texas (see Fabelo, Nagy, & Prins, 2011) also provides examples of how one jurisdiction improved its work processes under RNR supervision.

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Strategy 6: *Collaborate with agencies toward a common goal of improving offender outcomes and promoting public safety.*

The criminal justice system is like a village—it has a number of players and contributors that need to be comfortable with current policies and procedures. In order for change to be sustainable, vested stakeholders—reentry councils, law enforcement, courts, businesses, non-profits, former offenders, families and crime victims, treatment agencies, prosecutors, defenders, and others—need to be informed and participate in the reengineering activities. The village is needed to develop the resources, provide support for alternative approaches, and advance new ideas. Problem-solving courts are an example of criminal justice reforms that garner political support for change in practice and policies.

Figure 4.
Core Skills that Require Internal Champions



Adapted from EPICS, SOARING2 and PCS curriculums

There are generally three concepts to consider in creating collaborative environments that support reengineering efforts. The first is *policy and system integration*, in which the organizations (justice and community) have complementary policies regarding the use of risk and need assessment instruments, eligibility for different programming, type of programming and controls needed to manage the offender population in the field, criteria for success and failure of individuals (offenders) and programs, and roles of each party. These policies are needed to ensure that there is general agreement across the vested interests in efforts to administer and manage the system. The second is *service integration*, in which the services and programs are integrated at the operational level and players are involved as appropriate for their position in the justice, health, and community. Service integration focuses on delivering the broader range of “services” (i.e., programs, tools, use of registries, etc.) that are relevant for different offenders based on their risk and need profiles. At the service level, as shown in Figure 5, there are different levels of integration; the more integration that occurs, the more likely that system is to adopt new innovations (Taxman & Belenko, 2012) and to deliver programs and services that meet the needs of the community. The items on this checklist are designed to assess what practices exist that would support a collaborative, integrated model of service delivery—these items were used in a series of analyses to illustrate the importance of more service integration to improve system performance. The third component is *person integration*, in which the offender and victim are integrated into the decision-making processes. Including victims in some of the options can further restorative justice and help offenders better understand the impact of their options.

To build and sustain the village, a multipronged strategy is needed that involves: 1) disseminating information about the rationale for and the likely policies and practices of the new RNR supervision process to the judiciary, prosecutors, defenders, treatment providers, and other agencies; 2) forming or expanding community partnerships (including partnerships with local colleges, treatment agencies, and policy groups) to garner further support for the policies and to build resources to support supervision goals; 3) assessing existing collaborations and information sharing through joint staffings, reporting joint-policy manuals and procedures, pooled funding for key initiatives, modified protocols to meet the needs of multiple agencies, treatment plans, shared budgetary oversight, program oversight, staff cross-training, and written protocols for sharing electronic data (see Figure 5 and Taxman & Belenko, 2012, for a discussion); and 4) providing performance measures to the group to assess progress, to garner support for difficult issues, and to identify systems and service integration issues that the stakeholders need to address. Partnerships are bidirectional and the information needs to flow in these different directions.

Figure 5.

Measuring Interagency Collaboration at the Operational Level: The Collaboration Index Tool (see Fletcher et al., 2009; Taxman & Belenko, 2012)

Below is a list of common activities that sometimes occur between agencies. In the columns, indicate the name of the organizations that your agency routinely works with; feel free to add more columns. Please check the activities that you routinely engage in with your service provider agencies regarding the treatment programs or services that are provided to offenders in your jurisdictions. (Check all ☐ that apply for each row.)

	Work with substance abuse treatment programs	Work with judiciary	Work with other service agencies
a. We share general information about the overall needs of offenders in our system but not specific to a person	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Our organizations have agreed to use similar requirements for program eligibility across our programs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. We have written agreements for space for (substance abuse) services for some programs in our facilities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. We hold joint staffings/case reporting consultations, involving players from many agencies	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. We have developed joint policy and procedure manuals for our programs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. More than two organizations have pooled funding to offer offender (substance abuse) services	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. We have modified some program/service protocols to meet the needs of other agencies	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. We share budgetary oversight of some treatment programs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. We share daily operational oversight of some treatment programs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
j. Our organizations cross-train staff on EBPs and services	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
k. We have written protocols for sharing offender information such as HIPAA, CFR 42, and CFR 25.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
TOTAL	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

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Strategy 7: Build resiliency by altering offender involvement in key decisions.

The RNR supervision model positions the offender as a participant with a decision-making role in the process. Under the enforcement model of supervision, the officer has an authoritarian role in terms of determining what the offender should do; therefore, this model is not compatible with the RNR supervision model, which elevates the role and responsibilities of the offender to those of a partner in decisions that are made. For cognitive restructuring to occur, the offender must be offered opportunities to make decisions, to learn about alternative decisions, to test out decisions, to be successful (and fail), and to accept the consequences, whether positive or negative. If the goal is to facilitate change, particularly better decision making, then the offender needs to be part of the process. This subtle change is critically important to include in all organizational work, since mass incarceration policies have positioned offenders to be recipients and not co-decision-makers.

What is the importance of this new position for offenders? The American Psychological Association’s two recent task forces—*Empirically Supported Therapy Relationships* (Norcross, 2002) and *Empirically Based Principles of Therapeutic Change* (Castonguay & Beutler, 2005)—identified that outcomes are a result of client characteristics, nature of the therapy (intervention), nature of the clinicians/therapists, and the client-therapist relationship. The two task forces find that client-therapist rapport is more important in affecting patient outcomes than the type of therapy provided. Significant factors in the therapeutic alliance or working endeavor include how the client interacts with and values the input of the therapist; perceptions of trust (i.e., the client is willing to be honest and open), caring, and support in the change process are factors in this alliance. These factors have been identified as important in justice settings where offenders are asked to change their behaviors (Taxman, 2002; Taxman & Ainsworth, 2009; Skeem & Manchak, 2008). The person being asked to change is unlikely to do so unless he or she has a “voice” in the process (Walters et al., 2007); therefore, it is important for people to feel that they are valued and part of the process (Tyler, 2010).

Prochaska, DiClemente, and Norcross (1992), who proposed the stages of change model (precontemplation, contemplation, determination, action, and maintenance), suggest that more attention should be given to the precontemplation and contemplation phases, where the client is ambivalent about the prospects of change and uncertain that the new altered behaviors will be “worth the effort” (similar to the issues of making good). Focusing on these early stages in the change process recognizes that motivation coming from within an individual rather than from others (such as the state in coerced treatment models) is more likely to result in long-term change (Miller & Rollnick, 1991). In the correctional literature, this is consistent with efforts to focus on motivation to improve outcomes (McMurran, 2009). Overall, motivational enhancement therapy is recognized as an evidence-based practice in the substance abuse treatment literature (National Institute on Drug Abuse, 2000). It is through attention to intrinsic motivation that the offender can become aware of the change process, assume responsibility, and define his or her own action plan.

Another related theory is shared decision-making. Most patient education models are based on the individual understanding the nature of their disorder, which then leads to improved compliance. The individual has choices regarding the nature of the intervention, and these choices are bounded by cost, safety, impact on others, and alignment with values. This is relevant in justice settings. As defined by Légaré et al. (2008):

The health decision-making process is complex, as it brings together a health professional, considered a scientific content expert, and an individual, considered an expert in his own personal values. It is in this context that there is considerable interest today in the process of shared decision-making (SDM). SDM is defined as a decision-making process jointly shared by patients and their health care provider, and is said to be the crux of patient-centered care. It relies on the best evidence

about risks and benefits associated with all available options (including doing nothing) and on the values and preferences of patients, without excluding those of health professionals. Therefore, it includes the following components: establishing a context in which patients' views about treatment options are valued and deemed necessary; reviewing the patient's preferences for role in decision-making; transferring technical information; making sure patients understand this information; helping patients base their preference on the best evidence; eliciting patients' preferences; sharing treatment recommendations; and making explicit the component of uncertainty in the clinical decision-making process.


The shared-decision making process recognizes that the offender is a contributor to the process. The RNR supervision model is built on a similar principle that the offender jointly develops the supervision plan. Both the motivational enhancement and shared decision-making theories are built on the common ground that the individual needs to be part of the process, and that action by correctional or supervision staff needs to involve the offender in the planning and discharge process. The goal is to have the offender involved in outlining the plan for change, setting target behaviors for progress, and reviewing their progress with appropriate action based on performance.

Under a shared decision-making role, organizations must embrace the sharing of information with offenders and offenders must be offered the opportunity to participate in decisions that are made. This is the essence of cognitive restructuring. In a practical sense, this requires the supervision agency to provide the offender with: 1) results from the risk and need assessment, including an explanation of factors that affect these risk and need assessments and choices that can be made that can facilitate change; 2) options regarding programming, services, controls, with a preference for the offender selecting the best option; 3) review of progress, where the offender is asked to assess how well he or she has done; and 4) changes in the supervision plan based on the offender (and the officer in a shared decision-making model) input. These may appear to be subtle changes; however, these changes are critical to advancing an offender's ability to benefit from RNR supervision. This means that officers and supervision agencies that are hesitant to share the results of a risk and need assessment with the offender will not be able to properly implement and sustain RNR supervision. Without this clear restatement of the role of the offender, followed by policies and procedures that support this effort, then the system will "regress" to prior supervision practices where the offender is "told" what to do. Such efforts undermine cognitive restructuring. This subtle change requires the organization to emphasize that offenders are customers of this service. The legitimacy of RNR supervision and the ability to overturn policies that emerge from mass incarceration efforts hinges on accepting that cognitive restructuring is a process where the offender needs to have a key role in decision-making.

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Conclusion

In the past several decades or so, the policies of mass incarceration have affected the policies and practices of community supervision. The RNR supervision model, armed with evidence that practicing this form of supervision reduces recidivism, is being promoted in community correctional agencies. New training and skill-building strategies have evolved to train and prepare supervision staff to use the approaches. But unless the supervision agencies and the companion stakeholders accept this form of supervision, then it is unlikely that advances will be routinized. This paper has outlined seven organizational strategies to make RNR supervision stick—or glue it to the core components of community corrections. These strategies are designed to build capacity and resiliency, and to expand implementation to allow RNR supervision to become routine. RNR supervision is possible if these organizational strategies are used.

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