

 <p>Good Life. Great Mission.</p> <p>DEPT OF CORRECTIONAL SERVICES</p>	<b>POLICY</b>		
	<b>OPPORTUNITIES FOR CHANGE</b>		
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#### SUMMARY OF REVISION/REVIEW

PURPOSE – Language updated. PROCESS – I. – Language updated. II. INTRODUCTION TO 5-KEY MODEL – Section completely rewritten. III. PROGRAMS – Section completely rewritten. IV.B. – Language updated. IV.C. – Section deleted. V. PROGRAM SPACE PRIORITIZATION – Section completely rewritten. VI. NON-CLINICAL PROGRAM MANAGEMENT – Section completely rewritten. VII. PROGRAM EVENTS – New section. VIII. INTERNAL FIDELITY MONITORING – Section completely rewritten. IX. EXTERNAL PROGRAM EVALUATION – New section. Minor grammar changes throughout.

APPROVED:

*Rob Jeffreys*  
 Rob Jeffreys (Dec 2, 2025 15:26:48 CST)

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## PURPOSE

The Nebraska Department of Correctional Services (NDCS) has adopted TRANSFORM Nebraska, an integrated framework which prioritizes the holistic development and well-being of incarcerated individuals, recognizing that successful reintegration into society requires addressing various factors contributing to criminal behavior by incorporating multiple dimensions of rehabilitation. Through TRANSFORM Nebraska, NDCS aims to address the complex needs of individuals within the correctional system, promoting personal growth, behavior change and ultimately increasing reintegration success. NDCS is dedicated to offering rehabilitative programs to support holistic wellbeing and successful reentry. NDCS employs a comprehensive approach to identifying and prioritizing structured program opportunities including clinical treatment, cognitive behavioral interventions, academic programs, employment preparedness, family reunification and reentry readiness. (Neb. Rev. Stat. §83-182.01)

Team members will use community resources, either through referrals for service or by contractual agreement, to provide incarcerated individuals with services to meet their program needs. NDCS will not discriminate based on an inmate's race, color, religion, sex, pregnancy, age, national origin, disability, marital status, or genetics in providing access to programs. (ACI-3D-04, ACI-5E-02, ACI-5E-05, ACRS-5A-11)

## PROCESS

### I. 5-KEY MODEL PHILOSOPHY

The 5-Key Model for Reentry and Well-Being Development™ (5-Key Model) is an evidence-based model that has identified five key ingredients to living a full and healthy life: positive relationships; positive social engagement; healthy thinking patterns; effective coping strategies; and meaningful work trajectories. Each program available to the NDCS population is intended to increase the presence of one or more of the keys.

### II. INTRODUCTION TO 5-KEY MODEL

Within 14 days of arrival at their initial facility following intake, all individuals will participate in Role Induction and Focus Mapping (RI/FM). RI/FM is comprised of two portions:

- A. *Role Induction* – This portion is provided in-person by a trained peer facilitator during facility orientation. Role Induction aims to establish rapport and a shared understanding of the 5-Key Model, clarifying participant and facilitator responsibilities. It provides a clear explanation of the 5-Key Model, fostering buy-in and engagement. Participants will learn how to use the information they learned in Role Induction to create a Focus Map.
- B. *Focus Map* – Following Role Induction individuals will complete a Focus Map. This document provides individuals with the means to define what each of the five keys means to them, identifying the influences and barriers that informed their definitions. The facility program logistics coordinator/designee shall record satisfactory completion of RI/FM in Nebraska Inmate Case Management System (NICaMS), Non-clinical Program Tracking (NCPT) screen and upload the original Focus Map as an attachment on the RI/FM program entry. The Focus Map can be independently updated by the individual as needed, or in conjunction with any success plan update, thereby serving as a dynamic tool throughout their engagement. Updated copies of the Focus Map shall be kept in the Inmate Management File (IMF).

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Individuals receive the opportunity to prioritize the order in which they will participate in 5-Key Model core programming during the RI/FM session by completing and submitting a Program Request Form (Attachment A) to the facility program logistics coordinator/designee who will then record program selections in NICaMS NCPT as an “individual request” within three days of request receipt.

In addition, individuals can request program participation at any time by writing an Inmate Interview Request (IIR) form to their unit case manager or facility program logistics coordinator. Individuals may also self-select into a program during their assigned success planning session. Success plans are discussed further in Policy 201.06 *Case Management Services*.

Prior to the completion of their first scheduled success plan individuals will be assigned the Reentry Well-being Assessment Tool (RWAT) to be completed on their tablet. The RWAT is a self-administered intervention tool intended to highlight key areas and generate discussion between the individual taking the assessment and their unit case manager. The RWAT assists both persons in identifying opportunities for meaningful engagement in programming. More about the RWAT and its application are available in Policy 201.06 *Case Management Services*.

Programs within NDCS facilities may be delivered in-person, virtually, or via correspondence as stated in the respective program protocol. Programs may be facilitated by NDCS team members, community partners, or peer facilitators consistent with applicable training and necessary credentials.

### III. PROGRAMS

To ensure the highest standards of quality and efficacy, NDCS consults best practices that are derived from comprehensive research and proven methodologies to determine programmatic offerings. Whenever possible, the use of evidence-based programming is preferred.

Individuals have the ability to begin participating in programming following arrival at their first home facility and are rostered for the classes they have requested based on their first eligible release date.

Cognitive Behavioral Interventions (CBI) programs are grounded in the principles of cognitive behavioral therapy and help individuals discover and change the thought processes that will lead to increased well-being. CBI programs emphasize personal accountability, help people understand the thoughts that lead to their choices, and teach alternative behaviors and thought processes.

A complete *Opportunities for Change* catalog is maintained by the Rehabilitative Services Division and available for reference in a centralized location and on the ViaPath tablet system.

The following are primary evidence-based cognitive behavioral interventions offered by NDCS. These programs can be facilitated by NDCS team members, peers, and community partners, in accordance with the respective program protocol.

#### A. 5-Key Model Core Programming

1. Express, Learn, Grow consists of three, four-week modules that can be completed individually and in any order. These modules are co-facilitated by one team member and one peer.

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- a. Unlocking Your Thinking empowers participants to navigate cognitive challenges, fostering constructive thought patterns that lead to positive actions
- b. Ideas for Better Communication encourages participants to build connections with others, develop effective listening and problem-solving skills, and break down destructive relationship roadblocks.
- c. Understanding and Reducing Angry Feelings teaches participants to identify anger triggers, differentiate between healthy and unhealthy anger, set goals, plan strategies for interrupting angry patterns, and utilize progressive muscle relaxation techniques.

2. Positive Relationships consists of two four-week modules that can be completed individually and in any order. These modules are co-facilitated by two peers.
  - a. Rewarding Relationships explores the subject of building positive relationships, setting personal boundaries, improving communication, and connecting with loved ones.
  - b. Building Social Networks allows individuals to complete a peer inventory, discuss surrounding themselves with friends who are positive influences, and identifies strategies for handling situations related to old friends or family members who are negative influences.
3. Power from Within consists of a two-week module that allows participants to consider past successes coping with anxiety, stress and feeling overwhelmed to develop strategies for improving these thoughts and feelings. This module is co-facilitated by two peers.
4. Spotting Your Positives consists of two multi-week modules that focus on individuals' daily, community and leisure activities, and can be completed individually and in any order.
  - a. Healthy Lifestyles increases focus and participation in positive lifestyle behaviors in addition to improving involvement in supportive actions. This module is seven weeks in length and facilitated by two peers.
  - b. Reentry Reality increases strategies to navigate disappointed thoughts and feelings, move past failures, cope with cravings and urges around unhealthy choices. This module is nine weeks in length and facilitated by one team member and one peer.
5. Now, Next, Later (NNL) includes 19 workshops to help participants prepare for a successful reentry to include interview skills, resume writing, renter responsibilities, financial literacy, etc. This curriculum is provided to individuals residing at NCCW, NCYF, NSP, OCC, RTC TSCI and WEC in five two-week modules. Participants can complete individually and in any order. Modules provided at the aforementioned facilities are facilitated by at least one team member or one community partner.

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For individuals residing at CCC-L and CCC-O, NNL is provided as 19 individual workshops. Workshops are provided as drop-in classes at the frequency identified in the 5-Key Model Program Protocol. Participants can complete workshops in any order. Workshops may be facilitated by at least one team member or one community partner or co-facilitated by two trained peer facilitators. Peer facilitators who provide NNL curriculum shall, in addition to having completed facilitator training, received screening to ensure they possess the programming, academic, and/or employment experience to provide to support effective facilitation of these workshops.

**B. Personal Development Courses**

In addition to the 5-Key Model core programming, NDCS provides a wide variety of pro-social programming options. These programs are listed in full in the [Opportunities for Change](#) catalog. These programs are organized into two subcategories:

1. Evidence-based cognitive behavioral interventions: Programs with a demonstrated effectiveness through rigorous scientific research. One example includes:
  - a. 7 Habits on the Inside is developed by Franklin Covey and based on the 7 Habits of Highly Effective People. It is designed to help participants develop personal effectiveness, take initiative, and learn how to balance key priorities. This cognitive behavioral program is co-facilitated by two peers.
  - b. Enrichment Programs: Structured programs that can add to an individual's sense of purpose and provide meaningful engagement opportunities for participants but may not yet have empirical evidence associated with them. Enrichment programs are also made available to individuals through the ViaPath tablet system. Thousands of hours of educational content and resources are available through the Edovo and Cypherworx tablet applications.

**C. Domestic Violence Intervention Programs**

Individuals who are currently incarcerated for any offense indicated on the Domestic Violence Assessment Form (Attachment B) or have an outstanding recommendation from the Clinical Violent Offender Review Team (CVORT) for domestic violence intervention will receive a recommendation in NICaMS NCPT for Domestic Violence Intervention (DVI). NDCS currently offers one DVI program:

1. Achieving Change Through Values-Based Behavior (ACTV) is a cognitive behavioral intervention, supported by the Nebraska Coalition to End Domestic and Sexual Violence, that addresses problematic thoughts that lead to the inappropriate behaviors of domestic violence and abuse. This program is co-facilitated by two team members. Satisfactory completion of ACTV is recognized by the Nebraska Board of Parole and the Nebraska Probation System.

**D. Nursery and Parenting Education**

Gender-specific parenting education is available at several facility locations.

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1. The parenting and nursery program at the Nebraska Correctional Center for Women (NCCW) provides incarcerated mothers the opportunity to gain skills in parenting and develop personal awareness and experience in social settings along with learning about pre- and post-natal health care of infants and children.

Together with mental health team members, the NCCW parenting and nursery coordinators ensure that pregnant individuals have access to comprehensive counseling and assistance in keeping with their expressed desires in planning for their unborn children. (ACI-5E-10)

2. Incarcerated fathers have the opportunity to participate in a multi-phase program consisting of the following courses:

Destination...Dad™ is an evidence-based suite of programs to enhance parenting and reunification between incarcerated men and their sons. It consists of three specific programs, provided by a contractor within NDCS facilities. Individuals are encouraged to participate at all stages of incarceration. Being a parent is not a prerequisite for enrollment. In addition to the program components listed below, participants have the opportunity for interaction with their children during special visits and events, creating opportunities for engagement such as videos for the child(ren) to have at home, video chats, Father Daughter Dances, Father Son Hang Outs, and other opportunities as developed.

Destination...Dad™ InsideOut Dad® - This parenting program gives incarcerated dads the tools they need to become more involved, responsible, and committed in the lives of their children.

Destination...Dad™ Within My Reach® - A skill-based program with tools to help participants interact in a more enriching and satisfying way with others in their lives.

Destination...Dad™ Common Sense Parenting® - Participants learn to build healthier connections with their children by using skills that help them encourage positive behavior, discourage negative behavior, and teach alternatives to problem behavior.

#### E. Vocational & Life Skills Grant Programs (VLS)

VLS programs are provided by organizations receiving grant funding and working in partnership with NDCS to facilitate vocational or life skills training to individuals while incarcerated, on parole, or under probation supervision and for up to 18 months after discharge.

VLS programs provide a variety of services aimed to lead to meaningful employment opportunities and to address stabilizing factors such as housing, education, mental health, substance use, and supportive relationships.

Referral to VLS programs is consistent with the design of the particular program to ensure adherence to the evidence-based model. The NDCS VLS program manager is dedicated to management of all VLS grant programs and reports to the assistant deputy director-reentry.

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**F. Education**

Participation in an educational program during incarceration is proven to increase an individual's success upon reentry and offer improved economic opportunities. NDCS provides educational services to all individuals regardless of age.

Education programs are available at all NDCS facilities and includes *Adult Basic Education* (ABE), *Adult Secondary Education* (ASE), *English as a Second Language* (ESL), high school diploma, *General Education Development* (GED), special education, employment preparation, vocational education, post-secondary education, and college correspondence courses.

All education services information including assessment, referral, progress, and outcomes will be entered and maintained in NICaMS.

The NDCS education program manager is dedicated to management of all adult education and post-secondary education programs and reports to the assistant deputy director--programs. See Policy 106.01 *Educational Services* for additional information.

**G. Industries Program**

Provided by Cornhusker State Industries (CSI), this program equips individuals for the workforce by providing certification and apprenticeship opportunities. To ensure the continued success and availability of this program, scheduled operations must be maintained.

Participation in the Industries Program is partnered with full and part-time employment opportunities in which individuals develop marketable job skills and positive work ethic. For information pertaining to these employment opportunities, see Policy 113.18 *CSI: Job Classification and Stipend Plan*, for additional information.

**H. Restrictive Housing**

Individuals assigned to a restrictive housing unit are provided with the opportunity to participate in tablet-based and in-person programming designed to help individuals be more successful upon assignment to a general population unit. For more information about restrictive housing programs refer to NDCS Policy 210.01, *Restrictive Housing*.

**I. Clinical Treatment**

Clinical treatment programs are designed to address specific mental health needs and are delivered by licensed mental health professionals. Selection of specific treatment curriculum, process, and offerings are determined by NDCS behavioral health clinicians.

Clinical treatment recommendations are determined by licensed and trained mental health team members in collaboration with the NDCS mental health review teams.

All referrals to clinical treatment will be entered into the Clinical Recommendation tab in NICaMS.

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Participants are generally eligible to participate in clinical treatment when they are within three years of parole eligibility date (PED), tentative release date (TRD), or scheduled parole board hearing, whichever is earliest. Prioritization for enrollment is based on multiple factors, including acceptance or refusal of treatment recommendation; sentence structure and proximity of release; behavior, including prior recent termination from clinical treatment; and participation in other clinical treatment or mental health services.

Clinical team members will ensure that all eligible participants will have a documented acceptance or refusal entered in NICaMS within the previous 90 days from treatment begin dates.

All outcomes of clinical treatment participation will be entered into NICaMS. When participants are terminated or withdrawn from treatment, appropriate description of reason for removal will be entered in the "Agency Viewable Notes" section of NICaMS Clinical Recommendations.

For specific information related to Clinical Treatment, see Policy 115.09 *Substance Use Disorder Treatment Programming*; Policy 115.12 *Special Needs Inmate Programs*; and Policy 115.23 *Mental Health Services*.

#### IV. NON-CLINICAL PROGRAM IMPLEMENTATION

##### A. Program Proposals

NDCS team members or community members/providers seeking to start any program type will submit a program proposal to the assistant deputy director-programs using a standardized *Non-Clinical Program Proposal* (Attachment C) and include specific curriculum to be used in the program.

Programs which are grant-funded will follow the process outlined in Policy 101.02 *Grants Administration*.

Programs which are contract-funded will follow the process outlined in Policy 113.07 *Service Contracts*.

The assistant deputy director-programs/designee will coordinate input from wardens, the assistant deputy director-reentry and other stakeholders as needed to identify applicability of the particular program in relation to organizational capacity and overall agency programming goals.

Within 30 days of receipt of the program proposal the assistant deputy director-programs/designee will provide the decision in a formal response.

##### B. Program Protocols

Prior to program implementation, a *Program Protocol* form (Attachment D) will be developed by the appropriate program manager and approved by the deputy director-prison operations and the deputy director-rehabilitative services. Protocols are specific and a detailed to guide implementation of a program at one or more facilities. At a minimum, program protocols will include the following components and ensure consistent application of program implementation across facilities.

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1. Program Overview – purpose and description of the program including details of program curriculum and expected outcomes of the program.
2. Program Management – determines specific roles of program partners, facilitators, NDCS team members, etc., including necessary credentials of program facilitators and level of training required for non-NDCS employed program facilitators (escorted/unescorted).
3. Program Materials – identifies equipment, books, connectivity, etc. needed to perform the program and how each are managed throughout the program.
4. Participant Data – outlines the process for tracking and storing program participant outcomes.
5. Communication Plan – for communicating program information, including marketing program availability to the population, and sharing data between NDCS and outside agencies, if necessary.

Program protocols will be effective upon approval and shall be centrally available to all team members.

#### V. PROGRAM SPACE PRIORITIZATION

Facility operational schedules and infrastructure design, including programming space and availability, shall demonstrate intentionality in supporting the delivery of corrections-based programming. Program allocation and prioritization shall aim to facilitate program delivery to the fullest extent possible, considering all internal and external factors.

Program management shall be guided by an approach that balances rehabilitative impact with legal, contractual and operational requirements.

A. The following factors shall influence prioritization and scheduling decisions:

1. Legal Obligations: Program mandates by statute, regulation or court order shall receive highest priority to ensure compliance. This includes but is not limited to parenting education.
2. Public Safety Obligations: Programs critical to public safety outcomes, such as domestic violence intervention classes, shall be prioritized to ensure all willing participants complete the program prior to parole eligibility.
3. Rehabilitative Impact: Programs with demonstrated high rehabilitative impact, such as the 5-Key Model core programming, shall be prioritized to achieve significant positive change in participant behavior and increased community reintegration success.

Facilities that have allocated specific locations for the provision of clinical programming, education, restrictive housing programming, nursery and parenting education and the industries program shall grant priority of that designated space to the respective program for which it was allocated.

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B. For programming space that has not been specifically allocated to a particular program type, or when a priority program has maximized the use of its designated space and additional availability exists, programs shall be prioritized in the following general order:

1. Clinical Programming
2. Domestic Violence Intervention
3. Nursery and Parenting Education
4. 5-Key Model Core Programming

5-Key Model core programming can be facilitated by NDCS team members, incarcerated peers and/or community partners. In the event a VLS or contract partner is facilitating a 5-Key Model program, the 5-Key Model prioritization shall apply.

5. NDCS VLS Programs and Contract Partners
6. Personal Development Courses
  - a. Evidence-based, cognitive behavioral programs
  - b. Enrichment programs

For more information about restrictive housing programs refer to Policy 210.01 *Restrictive Housing*.

## VI. NON-CLINICAL PROGRAM MANAGEMENT

### A. Facility Program Management

Each facility shall designate a position to serve as the facility program logistics coordinator to maintain a system with which day-to-day operations related to non-clinical programs function. This management shall include, at minimum, the following responsibilities:

1. Ensuring the appropriate number of non-clinical programs, specifically 5-Key Model core programs and ACTV, are occurring at all times.
  - a. Expectations related to program type, quantity of active cohorts and number of participants per cohort are found in Protocol EV005 *The 5-Key Model for Reentry and Well-Being Development™ Core Programming* and Protocol EV002 *Achieving Change through Value-Based Behavior (ACTV-NE)*.
  - b. Identify available facilitators, space, times and participants for active non-clinical programs. A complete list of staff, peer and community partner 5-Key Model core program facilitators is made available to facility program management in a central location.
2. Maintaining an accurate, up-to-date program schedule which must be accessible at minimum to the facility and agency leadership teams, assistant deputy director

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for programs, partnership program manager, non-clinical program manager, quality assurance specialists and NDCS communications team.

3. Verifying individuals (i.e., staff, peers, community partners) have the appropriate training to facilitate programs.
4. Ensuring facilitators and participants have the necessary curriculum and supplies.
5. Informing team members about current program offerings and serving as an ambassador for rehabilitative services.
6. Providing regular communication to the population marketing available programs and encouraging participation.
7. Ensuring the timely and accurate entry of program data into NICaMS.
8. Attending the monthly facility program logistics coordinator meeting.

**B. Agency Oversight**

The NDCS non-clinical program manager and partnership program manager each play a vital role in the oversight of opportunities for change. The partnership program manager shall be consulted regarding partner-led programming while the non-clinical program manager shall be consulted regarding NDCS-led programming. Overall, these program managers are responsible for ensuring consistent and effective program implementation in all agency facilities, as well as adherence to policy and protocol. These positions report to the assistant deputy director-programs.

The non-clinical program manager is specifically responsible for supporting the facility program logistics coordinators and facilitators with the successful implementation and maintenance of the 5-Key Model. To that end, the non-clinical program manager shall facilitate a mandatory monthly in-person meeting for facility program logistics coordinators.

For additional information regarding the partnership program manager and partner-led opportunities for change, consult Policy 105.01 *Community Partnerships*.

**C. Data Collection and Recording**

NDCS collects data on all structured programming available to the incarcerated population. All program data described in this section shall be recorded in NICaMS NCPT by a trained team member or community partner within 72 hours of program session.

While individual program protocols should be consulted for specific participant criteria, the following paragraphs contain general expectations with regard to overall program data collection and recording.

**D. Recording Program Selection and Enrollment**

As noted in the PROCESS section, individuals have the ability to prioritize the order in which they complete 5-Key core programming and can self-select into additional non-clinical programming. This is not applicable to domestic violence interventions as these

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programs are recommended by NDCS as a result of the individual's current offense. Following selection or recommendation of a program, a program entry is created in NCPT. This information serves as the basis for generating reports, including priority lists that determine participant selection for a cohort.

When a program cohort is being rostered, the responsible team member or community partner will offer enrollment to the individual face-to-face and will record the date of offer and type of response. The individual has, at the time of offer, the opportunity to be enrolled, to refuse participation completely or to defer participation until a later time. Should an individual wish to defer participation to a later date or refuse participation completely, the reason for this response will be captured in NCPT. The team member or community partner will ensure individuals who have previous refusals or deferrals will receive the opportunity for inclusion during the next enrollment.

#### **E. Active Program Participation**

The facility program logistics coordinator is responsible for ensuring that information pertaining to class start and end, as well as information pertaining to each program session is entered into NCPT for each applicable individual. A program completion date and outcome type shall be entered, along with a copy of the individual's program certificate if applicable.

"Successful Completion" will signify that the individual met all requirements of the program.

"Terminated" will be entered when an individual is removed from the program due to failing to meet the requirements, follow the rules of the program, or whose presence in the class poses a risk to other participants or the facilitator.

"Withdrawal" will be entered when an individual voluntarily removes themselves from the program, refuses to attend scheduled passes, or is transferred to another facility or mission specific housing prior to completion.

Individuals' program status will be considered prior to transfer. Whenever possible, individuals currently enrolled in programming should not be transferred unless they can continue seamless participation in an operating cohort at the transfer facility.

#### **F. Data Entry - Training**

A training video and guide are available for any team member or community partner with the need and approval to enter data into NICaMS. NDCS team members may contact the facility program logistics coordinator regarding access to this training. Community partners communicate with the partnership program manager or VLS program manager (if applicable) regarding access to this training.

Community partner program providers may be approved for access to NICaMS for the sole purpose of program data entry in the NCPT. All requests for NICaMS permission for non-NDCS team members requires completion of a *Consent to Access Secure Data and Agreement of Confidentiality* form (Attachment F) outlining the specific permissions granted and expectations. This form requires approval signature from the assistant deputy director–programs or assistant deputy director-reentry, respective to oversight. All forms will be stored and maintained in a centralized location. Additionally, each form is applicable

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only to the specified individual signee and is not transferable to anyone else in the program provider organization.

G. Data Auditing

NDCS program managers are responsible for ensuring data associated with their area of oversight remains current and accurate. This shall involve continuous collaboration with facility program management teams and transparent communication from all involved parties. Each of the following program managers shall run, at minimum, monthly audits to review their respective program's data in NICaMS: partnership program manager, non-clinical program manager, vocational and life skills program manager, career services program manager, education program manager.

VII. PROGRAM EVENTS

Recognizing an individual's participation in and completion of pro-social activities and programming is crucial to providing individuals with a sense of accomplishment, fostering positive self-esteem, and encouraging continued engagement in rehabilitative efforts. There are several types of program events. These include but are not limited to program completion ceremony, academic graduation ceremony, religious event or activity, club banquet or symposium and an individual program completion event. While each unique purpose may include their own event nuances, the general structure and management of program events shall be the same.

A. Event Types

1. Program Completion Ceremony - To maximize acknowledgement of rehabilitation efforts while minimizing impact on staffing and security, facilities shall conduct program recognition ceremonies at least quarterly. These events recognize individuals who have satisfactorily completed a full program (i.e., WRAP) or the cluster of programs associated with any of the 5 keys (i.e., Express, Learn, Grow).
2. Academic Graduation Ceremony - High school graduation, GED completions, and post-secondary graduations shall occur in accordance with the academic calendar. Graduation ceremonies for NDCS-provided education shall be planned and coordinated by a designated education team member. This includes completion of all necessary documentation. Collaboration with facility leadership and/or the facility program logistics coordinator is necessary to ensure a successful event. Postsecondary graduations shall be planned and coordinated by the education program manager in collaboration with the community partner college, facility leadership and facility program logistics coordinator.
3. Club Banquets and Symposiums – Club banquets and symposiums shall be conducted in accordance with club policy and bylaws. Facility recreation team members, in collaboration with the partnership program manager, facility leadership and facility program logistics coordinator, are responsible for planning and coordinating these events. This includes completion of all necessary documentation.
4. Religious Events and Activities – The facility religious coordinator, in collaboration with the partnership program manager, facility program logistics coordinator, and facility leadership, is responsible for planning and coordinating any religious or faith-based events. This includes completion of all necessary documentation.

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5. Individualized Program Completion Events – Programs with a duration of six months or longer (i.e., RISE Academy) may hold an individualized program completion event upon special request. The facility warden/designee shall review such requests and determine whether it is necessary to hold an individualized event separate from the quarterly program completion ceremony. When approved, the facility program logistics coordinator shall plan and coordinate the event. In addition to collaboration with facility leadership, it may be necessary to collaborate with a community partner organization and/or the partnership program manager.
6. Special Program Events and Activities – Programs that provide a specific service (i.e., parenting class) may hold special events or activities (i.e., Daddy- Daughter Dance, Art Night with Dad, etc.). These events, while largely designed by the service provider, require communication and collaboration with the facility program logistics coordinator to ensure safety and success.

#### B. Planning Documentation and Meetings

Each program event will utilize an ICS 202 Incident Objectives form (Attachment #), an ICS 204 Assignment List (Attachment #), an ICS 207 Incident Organization Chart and a Food Request Form (Attachment #). These forms support a structured approach to the management of program events, promote clear communication and ensure attention to safety.

ICS 202- This document shall be completed by the team member responsible for planning and coordinating the program event. The completed document shall include a pertinent event including date, time, purpose, location, an event agenda, attendee lists (incarcerated individuals, approved visitors, and approved community partners). This document does not replace processes regarding the approval of community partners and visits and shall instead accompany these processes. This form is due no less than 15 days prior to the event date and shall be submitted to the facility warden or designee.

ICS 204 – This document shall be completed by the team member responsible for planning and coordinating the program event. The completed document shall include specific and detailed information regarding the work assignment and responsibilities of each team member assisting with the program event. This form is due no less than 15 days prior to the event date and shall be submitted to the facility warden or designee. It is necessary for the team member responsible for the event to meet with all contributing team members and communicate through the information included in this document.

ICS 207 – This document is an organizational chart of all NDCS team members staffing the event and ensures all parties know who to communicate with for specific functions. This form is due no less than 15 days prior to the event date and shall be submitted to the facility warden/designee. It is necessary for the team member responsible for the event to meet with all contributing team members to ensure awareness of assigned roles.

Food Request Form - Food and beverage for program events are limited to the options included on the Food Request Form. All food and beverage shall be ordered from the respective facility kitchen. Orders shall be submitted to the facility kitchen supervisor no less than 15 days prior to the event date. Food from external vendors/providers are not permitted for program events.

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Photography - Photos of the program event shall be taken by NDCS or explicitly approved community partner organizations. Partners who wish to take photos at an event shall have a valid photography agreement with NDCS and shall receive authorization from the Assistant Deputy Director-Programs for each event in which photos will be taken. Incarcerated individuals may purchase a physical copy of an individual photo using a photo ticket. Alternatively, individuals may request a digital copy of an individual photo to be provided using the tablet system. Group photos or photos containing community partners/team members are not available for purchase by incarcerated individuals.

## VIII. INTERNAL FIDELITY MONITORING

Fidelity is the extent to which an intervention follows a program model. Maintaining program fidelity requires analysis and oversight to produce the behavior change or outcome the intervention is designed to achieve. Without ongoing quality assurance and fidelity monitoring to ensure adherence to the program model, over time, programs can become less effective.

Quality assurance (QA) shall monitor the fidelity of NDCS' primary evidence-based cognitive behavioral interventions (Section A: PROGRAMS). This requires QA and facility program logistics coordinator to collaboratively schedule observations in advance. Scheduling includes specifying the program, facilitator(s), time and location. Facility program coordinators are responsible for notifying QA when an observation cannot occur due to class cancellation. This notification shall be made with as much advance notice as possible, recognizing the nature of a correctional environment and its unpredictability.

Optimally, QA specialists will observe each active facilitator of these programs two to three times annually. During observation, the QA specialist shall maintain a non-intrusive presence. They shall not engage in facilitator coaching.

Observations will be documented using the *Fidelity Monitoring Tool* (Attachment H). Monthly feedback will be provided to the case management coordinator and non-clinical program manager for addressing individual performance and informing training needs.

All data collected from program observations will be stored electronically. Overall fidelity scores for each program will be submitted to the research director on a monthly basis. Public reports on program fidelity will be presented in aggregate form. A facilitator's individual performance will not be reported publicly or shared with a direct supervisor unless a policy violation has occurred.

## IX. EXTERNAL PROGRAM EVALUATION

Per Neb. Rev. Stat. §83-182.01(5), LB 605 (2015), NDCS shall evaluate the quality of programs funded by the department, including whether program participation reduces recidivism. The department shall contract with an academic institution located within the State of Nebraska for each program evaluation. Each program evaluation shall be standardized and shall include a site visit, interviews with key staff, interviews with offenders, group observation, if applicable, and review of materials used for the program. The evaluation shall include adherence to concepts that are linked with program effectiveness, such as program procedures, staff qualifications, and fidelity to the program model of delivering offender assessment and treatment. Each program evaluation shall also include a rating on the effectiveness of the program and feedback to the department and the office of Inspector General of the Nebraska Correctional System concerning program strengths and weaknesses and recommendations for better adherence to evidence-based programming, if applicable.

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The evaluation shall also make recommendations regarding the availability of programs throughout the correctional system, the ability to deliver the programs in a timely manner, and the therapeutic environment in which such programs are delivered at each facility and shall include a cost-benefit analysis of each program, if applicable. Program evaluations shall be prioritized in the following order: clinical treatment programs; nonclinical treatment programs; and other structured programs. Clinical treatment programs shall be evaluated at least once every three years and nonclinical treatment, and structured programs shall be evaluated at least once every eight years." (ACI-1F-12).

## X. PROGRAM AND PROCESS REVIEWS

The assistant deputy director-programs will submit an annual agency review to the director by February 1<sup>st</sup> identifying the needs of the incarcerated population to ensure the necessary programs and services are available. The review will include the number of individuals served, a description of the academic, vocational, library, religious, cognitive, and leisure time programs, and services available. (ACI-5E-04, CO-1A-23, ACI-1F-12)

## REFERENCE

### I. STATUTORY REFERENCE AND OTHER AUTHORITY

- A. Neb. Rev. Stat. §83-182, §83-182.01

### II. NDCS POLICIES

- A. Policy 002.01 *Access to Public Information*
- B. Policy 101.02 *Grants Administration*
- C. Policy 106.01 *Educational Services*
- D. Policy 113.07 *Service Contracts*
- E. Policy 113.18 *CSI: Job Classification and Stipend Plan*
- F. Policy 115.09 *Substance Use Disorder Treatment Programming*
- G. Policy 115.12 *Special Needs Inmate Programs*
- H. Policy 115.23 *Mental Health Services*
- I. Policy 210.01 *Restrictive Housing*
- J. Policy 201.06 *Case Management Services*

### III. ATTACHMENTS

- A. Program Request Form
- B. Domestic Violence Assessment Form
- C. Non-Clinical Program Proposal

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- D. Program Protocol form
- E. NDCS VLS Grantees and Contract Partners
- F. Consent to Access Secure Data and Agreement of Confidentiality form
- G. Food Request Form
- H. Fidelity Monitoring Tool
- I. ICS Form 202
- J. ICS Form 204
- K. ICS Form 207

IV. AMERICAN CORRECTIONAL ASSOCIATION (ACA) STANDARDS

- A. Expected Practices for Adult Correctional Institutions (ACI) (5th edition): 5-ACI-3D-04, 5-ACI-5E-04, 5-ACI-5E-01, 5-ACI-5E-05, 5-ACI-5E-06, 5-ACI-5E-08, 5-ACI-5E-10, 5-ACI-1F-12
- B. Standards for Adult Community Residential Services (ACRS) (4<sup>th</sup> edition): 4-ACRS-5A-02, 4-ACRS-7F-05, 4-ACRS-5A-07, 4-ACRS-6D-01, 4-ACRS-6D-02, 4-ACRS-5A-11, 4-ACRS-5A-12
- C. Standards for Administration of Correctional Agencies (CO) (2<sup>nd</sup> edition): 2-CO-1A-23