



POLICY STATEMENT
Commonwealth of Pennsylvania • Department of Corrections

Policy Subject: Community Corrections Treatment Services		Policy Number: 8.4.1
Date of Issue: May 30, 2012	Authority: Signature on File John E. Wetzel	Effective Date: June 7, 2012

I. AUTHORITY

The Authority of the Secretary of Corrections to direct the operation of the Department of Corrections is established by Sections 201, 206, 506, and 901-B of the Administrative Code of 1929, 71 P.S. §§61, 66, 186, and 310-1, Act of April 9, 1929, P.L. 177, No. 175, as amended.

II. APPLICABILITY

This policy is applicable to all facilities operated under the jurisdiction of, or conducting business with the Department of Corrections.

III. POLICY

It is the policy of the Department to provide treatment services to offenders in Community Corrections.

IV. PROCEDURES

All applicable procedures are contained in the procedures manual that accompanies this policy document.

V. SUSPENSION DURING AN EMERGENCY

In an emergency or extended disruption of normal facility operation, the Secretary/designee may suspend any provision or section of this policy for a specific period.

VI. RIGHTS UNDER THIS POLICY

This policy does not create rights in any person nor should it be interpreted or applied in such a manner as to abridge the rights of any individual. This policy should be interpreted to have sufficient flexibility to be consistent with law and to permit the accomplishment of the purpose(s) of the policies of the Department of Corrections.

VII. RELEASE OF INFORMATION AND DISSEMINATION OF POLICY

A. Release of Information

1. Policy

This policy document is public information and may be released upon request.

2. Confidential Procedures (if applicable)

Confidential procedures for this document, if any, are not public information and may not be released in its entirety or in part, without the approval of the Secretary of Corrections/designee. Confidential procedures may be released to any Department of Corrections employee on an as needed basis.

B. Distribution of Policy

1. General Distribution

The Department of Corrections' policy and procedures shall be distributed to the members of the Central Office Executive Staff, all Facility Managers, and Community Corrections Regional Directors on a routine basis. Distribution of confidential procedures to other individuals and/or agencies is subject to the approval of the Secretary of Corrections/designee.

2. Distribution to Staff

It is the responsibility of those individuals receiving policies and procedures, as indicated in the "General Distribution" section above, to ensure that each employee expected or required to perform the necessary procedures/duties is issued a copy of the policy and procedures either in hard copy or via email, whichever is most appropriate.

VIII. SUPERSEDED POLICY AND CROSS REFERENCE

A. Superseded Policy

1. Department Policy

This document establishes procedures on this subject.

2. Facility Policy and Procedures

This document supersedes all facility policy and procedures on this subject.

B. Cross Reference(s)

1. Administrative Manuals

- a. 7.4.1, Alcohol and Other Drug Abuse Treatment Programs; and
8.3.1, Community Corrections Security Manual.

2. ACA Standards

- a. Administration of Correctional Agencies: None
- b. Adult Correctional Institutions:
- c. Adult Community Residential Services: 4-ACRS-2A-01
- d. Correctional Training Academies: None



PROCEDURES MANUAL
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Release of Information:

Policy Document: This policy document is public information and may be released upon request.

Procedures Manual: The procedures manual for this policy may be released in its entirety or in part, with the prior approval of the Secretary/designee. Unless prior approval of the Secretary/designee has been obtained, this manual or parts thereof may be released to any Department employee on an as needed basis only.

**8.4.1, Community Corrections Treatment Services Procedures Manual
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Section 1 – CCC Programs Overview

The Bureau of Community Corrections (BCC) offers a number of programming options to address targeted areas of risk and need to enhance an offender's potential for a safe and law-abiding re-entry into the community. BCC programming incorporates standardized therapeutic as well as, psycho-educational curriculums based on cognitive behavioral theory to address specific attitudes and behaviors related to antisocial behaviors. Evidence based practices increase the effectiveness of programming and delivery of services. Program Offerings for each State Community Corrections Centers (CCCs) and Community Contract Facilities (CCFs) are available on the BCC website on DOCNet. The below listed programs are available on-site in selected state-operated CCCs and selected CCFs to respond to offender needs upon transition/re-entry.

A. Alcohol & Other Drugs (AOD) Inpatient Treatment

1. Community Corrections AOD Therapeutic Community Centers

Community Corrections AOD Therapeutic Community Centers provide a continuum of AOD services that adhere to Department policy **7.4.1, "Alcohol and Other Drug Abuse Treatment Programs."** These services meet AOD treatment needs of both pre and post-release offenders. Standardized methods of delivering specialized AOD programs incorporate programming components mirroring the programming currently offered in state correctional facility therapeutic communities in order to provide quality and continuity of treatment services. The therapeutic community model includes Phase (1-II) system, structured format, and community environment, peer encounter groups, and peer role modeling per Department policy and procedures. The average duration of the CCC AOD Therapeutic Community Center is 90 days.

2. Contract Inpatient AOD Services

The BCC contacts with community treatment facilities, licensed through the Department of Health's Bureau of Drug and Alcohol Programs (BDAP), to provide inpatient AOD treatment programming for pre-release, parole, and State Intermediate Punishment (SIP) program offenders. The average program duration is 45-90 days.

3. Dual-Diagnosis Inpatient Treatment (DD)

Offenders with co-occurring mental health and substance abuse disorders are placed in CCFs, which provide intensive, inpatient dual-diagnosis treatment. These facilities, licensed through BDAP, offer variable lengths of stay ranging from short-term (28 days) to longer-term care options up to 90 days. The program was founded upon the Therapeutic Community (TC) model. In addition to the provision of AOD programming, these programs offer the professional expertise and experience (psychiatry and psychology staff) to address the special challenges arising from the interaction between substance abuse/addiction and mental health issues.

B. State Intermediate Punishment (SIP) Program

1. The SIP Program provides an option in State prison sentencing for those offenders who:
 - a. have AOD issues (addiction or offense motivated by use of AOD);
 - b. have less serious offense(s); or
 - c. would have received a sentence of 30 months or more.
2. When an offender qualifies for the SIP Program, the Department conducts an AOD assessment and a recommendation for the SIP program, along with an individualized treatment plan which is provided to the court.
3. If all parties agree, the offender is sentenced to the 24-month SIP program. The program consists of the following four levels:
 - a. Level 1 – Inpatient

Not less than seven months in a State Correctional Facility, with a minimum of four months of this time in a facility TC.
 - b. Level 2 – Inpatient

Not less than two months in a Community Based Therapeutic Community (BCTC).
 - c. Level 3 – Outpatient

Not less than six months in Outpatient (OP) AOD treatment while housed in a CCC, CCF, or an approved Transitional Residence.
 - d. Level 4 – Re-entry

The remainder of the 24 months will be a period of supervised reentry into the community while housed in a CCC, CCF or an approved Transitional Residence.
4. The SIP participant may transfer between different program levels, depending on his/her overall adjustment to the program.
5. Upon successful completion of the SIP program, the Department will notify the sentencing Court and all relevant parties. For additional details on the SIP program, please reference Department policy **7.4.1, Section 10**.

C. Specialized Center Programs

The purpose of a Specialized CCC is to provide housing for paroled violent offenders the Pennsylvania Board of Probation and Parole (PBPP) has identified as needing enhanced community based supervision and programming. The 12 session Violence Prevention Booster is the standardized curriculum offered. Offenders can be parole from the Specialized Program after 60 days of successful completion. The Specialized Centers are located at:

1. Region 1 – Philadelphia CCC#2, Kintock Erie, and Gaudenzia DRC (M/F);
2. Region 2 – Wernersville CCC, Harrisburg CCC, Minsec Hazelton; and
3. Region 3 – Erie CCC, and Renewal #1 (M/F).

D. Parole Violator’s Center Programs

1. The Parole Violator (PV) center logic model is a joint effort between the Department and PBPP to create an evidence-based strategy for managing technical parole violators (TPVs). The strategy aims to divert TPV’s from further incarceration while successfully addressing criminal behaviors and tendencies within a safe, secure, treatment environment using a Community Based Life Skills (CBLs) curriculum.
2. The BCC approved standardized CBLs curriculum components are designed to support the successful re-entry of PVs referred to Parole Violator Centers. The CBLs components include evidence-based practices that incorporate cognitive restructuring and skills practice. As a core curriculum of the PV Center programs, psycho-educational groups addressing social skills, critical thinking, and emotional coping skills are addressed. Completion of the CBLs components is mandatory for all offenders housed at a Parole Violator’s Center.
3. Each offender placed in a PV center will be required to participate in the CBLs Program (the “root” program for all participants) and assigned to one of three treatment options based on his/her recent behavior (e.g., type, severity, and nature of violation). The three treatment options include CBLs-Non AOD (without an AOD component), CBLs-AODM (Moderate level AOD education) or CBLs-AODH (High level of AOD education). Offenders can be paroled from the non-AOD and the moderate AOD programs after 60 days and the high level AOD program after 90 days.
4. The Parole Violator Centers are located at:
 - a. Region I – Coleman Hall;
 - b. Region 2 – Wernersville CCC; and
 - c. Region 3 – Progress CCC, Renewal, Gateway Erie, and Gateway Sheffield (female).

E. Standardized Curriculum

1. State-operated CCCs and designated CCFs offer standardized curriculums to respond to specific offender risks and needs that affect re-entry. Community corrections delivery of treatment also serves the purpose of providing continuity of care for offenders participating in treatment services prior to release into the community. Treatment delivery has been formed by evidence-based practices and addresses targeted criminogenic needs to include but is not limited to:
 - a. anti-social beliefs and attitudes;
 - b. negative peer associations;
 - c. temperament/personality;
 - d. substance abuse;
 - e. employment; and
 - f. familial factors.
2. Only the Department's standardized assessment tools and program curriculums are used unless a waiver has been requested and approved by the BCC's Deputy Director for Programs and Administration/designee. Program evaluations and site visits are conducted in accordance with this procedures manual for quality assurance.
3. Thinking for a Change (T4C)

Thinking for a Change is a 22-session program that uses cognitive restructuring and social skills interventions as methods of changing Criminal Thinking. This group targets offenders with poor decision-making skills to work on cognitive self-change, social skills improvement, and problem-solving skills development. The program is broken down into sessions focusing on communication skills, thinking processes, emotional interpretations, and problem solving. While all sessions use Cognitive Behavioral Interventions such as Journaling and Role Playing, the thinking process segments form the core of the Cognitive Behavioral approaches offered by this program.

4. Violence Prevention (VP)

The Violence Prevention Program is a program that provides an offender with appropriate alternatives for dealing with aggressive behavior and feelings of anger and frustration. Violence Prevention teaches positive coping techniques that reduce physical conflicts and confrontations in the facility, as well in the community. Violence Prevention moderate and booster version offerings are based on offender's risks and needs. The 26 session Violence Prevention Moderate program may be offered at any CCC; the 12 session Violence Prevention Booster is only offered at the Specialized Centers.

5. Batterer's Intervention (BI)

A primary goal for the 26 session Batterer's Intervention Program is to help an offender restructure anti-social attitudes and beliefs that precipitate abuse between intimate partners and assist with developing other non-violent strategies for dealing with intimate partners. Participants complete in-group and homework assignments which help them to identify specific actions, intents, beliefs, feelings, effects on their partner, how their past use of violence affected the situation, how they have minimized their actions, denied their actions or blamed their partner for their actions, and asked to identify and practice non-controlling behaviors to deal with the identified situation.

F. Targeted Services, Programs, and Initiatives

1. Mental Health Services (MH)

Offenders diagnosed with mental health problems are placed in CCFs which provide either on-site programming or case management services with referral to appropriate outpatient MH treatment services. In response to the specialized rehabilitative needs of this sub-population, mental health treatment services include, but are not limited to comprehensive assessment, psychiatric evaluation and consultation, individual and group counseling, medication compliance, case management, and coordination of treatment services.

2. Family Support Alliance Support Groups (FSA)

The main objective of the Family Support Program (FSP), through its parent affiliate, the Pennsylvania Family Support Alliance (FSA), is to enhance parenting skills of program participants and, in turn, prevent child abuse. The FSP is a weekly support group during which an offender, under the guidance of a professionally trained facilitator, learns to manage emotional stress and handle common parenting problems appropriately. The intended outcomes include an increased understanding of positive parenting skills, as well as an increased social support network for participants, which offers positive role models and safe people with whom to discuss parenting concerns.

3. Sex Offender Programming (SOP)

Offenders in need of sex offender evaluations and treatment are referred to community agencies. Offenders pay for services out-of-pocket or through third party payments.

4. Re-Entry Related Services

Community corrections counselors refer offenders to agencies for outpatient drug and alcohol evaluations (self-pay) and other re-entry related services, if unavailable within the centers. Services include but are not limited to local Careerlink, Department of Welfare, and Veteran's Administration offices.

5. County Jail Work Release Reentry Initiative

The Department is conducting a county jail work release reentry initiative and is partnering with county jails throughout the Commonwealth. The Department will place pre-release and parole offenders in county work release programs following the same guidelines outlined in Department policy **DC-ADM 805, “Pre-Release, Outside Work and Housing Assignments, Community Work Program, Escorted Leave, Armed Mounted Work Detail, Forestry Unit Programs and Temporary Hold-In Orders.”** All of these offenders would have successfully completed their correctional plan, be from the respective or surrounding county, and have plans to remain in the area when released. The expectation is that upon arrival to the county jail, county staff may perform their own re-entry assessment. Upon a positive county assessment, the offender will be placed in the County’s Work Release Center. County staff and local providers will then work with these offenders on life skills, finding employment, participating in on-going skills training, continue any necessary treatment in the community, and in some cases, identify permanent housing. The expectation of this program is that the offenders secure employment in their own region and successfully integrate back into society.

Section 2 – Specialized Community Corrections Centers

A specialized center is a Community Corrections Center (CCC)/Community Contract Facility (CCF), which houses Category 3 pre-release offenders and parolees stipulated by their Parole Board action for a minimum period of 60 days to complete required programming.

A. Location

The Specialized Community Corrections Centers are as follows:

1. Region 1 – Philadelphia CCC 2, Kintock-Erie, Gaudenzia Diagnostic Rehabilitation Center (DRC);
2. Region 2 – Harrisburg CCC, Wernersville CCC, Minsec Hazelton; and
3. Region 3 – Erie CCC, Renewal CCC.

B. Duration

1. A Category 3 pre-release or a paroled offender designated to a Specialized Center will be required to remain at the facility for a minimum period of 60 days and upon successful completion of his/her programming.
2. Upon discharge, the offender may either be paroled to an approved home plan, or be transferred to a non-specialized center for reentry services that is closer to his/her release destination. A Joint Case Review Team (JCRT), comprised of the Center Director, Counselor, and Pennsylvania Board of Probation and Parole (PBPP) Agent, shall determine if the offender will require placement at a non-specialized center.
3. All referrals to a specialized center should have a minimum of \$100.00 escrowed for release transportation and necessities upon completion of the program.
4. If placement is required, a second bed date will be requested at least two weeks in advance. Transportation to the transitional facility shall be the responsibility of the offender.

C. Offender Accountability and Daily Operations

1. Offenders placed in a specialized center shall be subject to limited movement with gradual privileges earned. Only pre-approved daylight trips into the community for necessities or Department of Public Welfare (DPW) assistance shall be approved by the Center Director/Parole Agent. These trips shall only be approved for the time needed to complete the objective and shall be documented on the **Pre-Planned/Pre-Approved Sign-Out for Specialized Centers (Attachment 2-A)**.

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2. A 1900 hour curfew is mandatory. Exceptions will be the rarity and must be jointly approved by the Center Director and the Parole Agent.
3. Within three days of arrival at the facility, the JRCT shall conduct an offender orientation. This shall include a formal overview of the specialized center, distribution of facility rules, and completion of the offenders Community Orientation and Reintegration (COR) Plan.
4. The Department's and PBPP's Universal Set of Rules shall be posted at the Center. Enforcement shall be the responsibility of Department, CCF (if applicable), and PBPP staff.
5. The following violations shall results in immediate violation of parole/revocation or prerelease status:
 - a. brining weapons into a facility;
 - b. bringing drugs or alcohol into a facility;
 - c. violence of any type;
 - d. positive urine (return to SCI for re-evaluation of AOD needs);
 - e. absconding from the facility/escaping from the facility; and/or
 - f. non-completion (unsuccessful discharge) of the program.
6. At least one Parole Agent shall be permanently assigned to work at the Center. The Parole Agent's office will have computer access. The Parole Agent must be present for offender orientation, JCRT meetings, weekly staff meetings, and house meetings as scheduled. Evening hour visits should be frequent and immediate response to emergencies is expected.
7. Center Monitors shall be assigned 24/7. Each Center shall have securable doors and windows with alarms as well as surveillance cameras to enhance security and offender accountability.¹
8. The PBPP hotline shall be used for after hours Parole contact and to request emergency agent support at the affected Center. The Center Director/designee must first designate the incident to be an emergency.
9. A **DC-716, Daily Activity Logbook** shall be maintained at the monitor's station to record daily activities and for the passing on of vital information.
10. All departures from the Center shall be pre-authorized and approved by the Center's staff (Center Director/designee and Parole Agent). Verification shall be done by staff

¹ 4-ACRS-2A-01

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(Center/PBPP) conducting site visits, requiring offenders to provide relevant documentation, and adhering to sign-in/sign-out procedures at all times.

11. The assigned Parole Agent(s) shall ensure that urine samples are obtained in accordance with PBPP policy and/or upon reasonable suspicion for urinalysis testing. All positive results of the tests shall be shared with the Center Director.
12. All offenders will be searched by Center staff upon return to the Center and at other times when deemed necessary by Center and/or PBPP staff.
13. Each Center shall have an area designed as a holding area in the event an offender needs to be temporarily detained.
14. Offender visits will initially be based upon the approved visiting list from the sending facility. Changes to the visiting list must be processed through the counselor with Center Director/designee approval.

D. Programming

1. Evidence-Based Practices – all assessment and treatment services shall be delivered in accordance with the BCC Standards.
2. If a Category 3 offender needs to complete a Therapeutic Community (TC) and a TC is not available at the designated Specialized Center, the TC program must be completed prior to the offender transferring from a State Correctional Institution.
3. Intake/Assessment – All Specialized Center referrals are to complete the Violence Prevention Booster program based upon their OVRT/Category 3 status. All offenders will be assessed jointly by center staff and PBPP staff to determine their need to complete Life Skills. Qualified PBPP ASCRA Agents will conduct NCTI Life Skills.
4. Group Sessions – number of offenders in a group shall not exceed 15 for treatment sessions (e.g., role-plays, tabletops, etc.). Group participation shall be documented by the facilitator for each offender in his/her respective Inmate Cumulative Adjustment Record (ICAR) when access is available or in progress notes if the ICAR access is not available.
5. Monitoring Process – Center Counselors must make contact with each offender at a minimum of twice per week; the contacts are to be documented in the ICAR when access is available or in progress notes if the ICAR access is not available.
6. Two weeks after admission to the specialized center, the JCRT shall review the offender's participation and determine whether he/she has made sufficient progress to earn gradual privileges (job search passes, home visits, use of vehicle, etc.). All privileges are to be approved by the Center Director/designee and PBPP Agent. This review team will continue to meet every two weeks to discuss the offenders release plans

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including home and job plans, outpatient services, and any other re-entry issues that need to be addressed.

7. Appropriate Use of Leisure Time – Offenders shall have adequate space, facilities, and sufficient opportunities to participate in recreational activities.
8. Volunteer Services – formal partnerships with community members shall be developed, and volunteers shall be used to supplement educational, reentry, spiritual, family, and associated programmatic services at the center/facility.
9. Program Completion – One week prior to discharge, the JCRT shall complete a Discharge Summary, and meet with the offender to finalize an aftercare plan that addresses targeted needs as related to successful community reintegration.

E. Managerial Visits

1. Specialized Center inspections will be conducted in accordance with Department policy **8.3.1, “Community Corrections Security,” Section 19.**
2. During Contract Facility Coordinator (CFC) visits, the CFC shall conduct case reviews of specialized offenders to ensure continuity of placement.

Section 9 – Program Audits

A. Program Audits Procedures

1. Each Bureau of Community Corrections (BCC) Regional Program Manager shall conduct formal, on-site, unannounced and announced programmatic audits at Community Corrections Centers (CCCs), Community Contract Facilities (CCFs), Contract County Jails (CCJs), and contracted Reentry Services Sites using the **Community Program Evaluation Tool (CPET) (Attachment 9-A, Page 1)** and/or the **Universal Community Corrections File Audit Tool (UCCFA) (Attachment 9-A, Page 4)**, and the **Quality Treatment Checklist (QTC) (Attachment 9-B)**. A **Program Evaluation Summary Report (PESR) (Attachment 9-A, Page 5)** should be completed with each review summarizing findings. The Regional program Manager will be responsible for conducting audits according to the BCC Program Audit Schedule located on DOCNet.
 - a. Minimum of once per quarter – A **UCCFA** shall be administered at all residential sites on a quarterly basis. If treatment or psychosocial educational groups are provided on site, one **CPET** shall be completed for each site as well.
 - b. Annually – The **QTC** shall be administered by the BCC Regional Program Manager annually on each residential program. The QTC can replace the administration of one quarterly **CPET** and **UCCFA**.
 - c. Minimum of Semi-Annually – A **UCCFA** shall be conducted at all contracted Reentry Services Sites on a semi-annual basis, based on the date of the effective date of the contract. If the Reentry Services Site offers treatment or psychosocial educational groups, a **CPET** shall be completed for each program located at the sites. The **UCCFA** can also be used by the Contract Facility Coordinator (CFC) during his/her site visits.
2. The Center Director/CFC shall ensure deficiencies are addressed and tracked on the **Center Corrective Plan of Action Progress Report** maintained by the CFC in accordance with Department policy 8.3.1, “**Community Corrections Security.**” The Program Manager shall advise the CFC by the third of each month of any program deficiencies documented during a program review conducted in the previous month.
3. The **Center Corrective Plan of Action Progress Report**, submitted by the facility to the CFC, is to be reviewed and approved by the Regional Program Manager if program related deficiencies are noted. A follow-up site visit will be conducted by the Regional Program Manager to ensure corrective action has been implemented. The Regional Program Manager will provide follow up information to the CFC for reporting updates.
4. The total score of a residential site quarterly program audit will be the sum of **CPET** and **UCCFA** scores. Quarterly or reviews conducted throughout the year will be aggregated for an annual program review score. All other contract requirements remain the same.

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5. Each Regional Program Manager shall complete and sign an **Individual Monthly Report of Center Inspections** in accordance with Department policy **8.3.1, Section 19** that documents the dates of his/her required visits, and submit the report to the BCC Director's secretary by the 5th working day of the following month, with a copy to the Deputy Director of Administration and Programs.

6. Completed program audit documentation shall be maintained by each Regional Program Manager and submitted for administrative review by the Deputy Director of Administration and Programs.

**8.4.1, Community Corrections Treatment Services Procedures Manual
Glossary of Terms**

Alcohol and Other Drug (AOD) Abuse – AOD abuse is a residual category for noting maladaptive patterns of behavior from AOD use, but does not meet the diagnostic criteria for AOD dependence. Inmates scoring one to two on the Texas Christian University (TCU) Drug Screen are classified as AOD abusers.

AOD Abuse Treatment – The provision of individual and group counseling or therapeutic services on a regular and predetermined basis including activities carried out specifically to affect the reduction or alleviation of the dysfunction of the inmate, including the consequences of AOD abuse.

AOD Information/Education – A program that presents the pharmacological, physical, social, and psychological effects of AOD use, abuse, and dependency. Information/education includes the use of videos, lectures, discussion groups, etc.

Community Contract Facility (CCF) – A group home operated by a private or public entity, designed to provide services to pre-release and parole residents.

Community Corrections Center (CCC) – A residential facility operated directly by the Bureau of Community Corrections to provide residential and treatment services to certain inmates selected for placement into a community setting prior to or as part of parole.

Community Corrections Center Daily Activity Log Book (DC-716) – A bound ledger book, with sequentially numbered pages, used for recording each shift's activities in each Community Corrections Center.

Community Parole Center – A facility that provides services to parolees encountering difficulties in the community.

Contraband – An item that an inmate is prohibited from possessing or an item that an inmate is permitted to possess, but which has been altered or is being used for something other than its intended purpose.

Contract Facility Coordinator (CFC) – An individual whose job function is to guarantee contact compliance with vendors who provide housing and treatment services in the community.

Drug and Alcohol Facilities (D&A) – Facilities that provide inpatient drug and alcohol services in the community.

Facility – A State Correctional Facility, Motivational Boot Camp, Community Corrections Centers or the Training Academy.

Facility Manager – The Superintendent of a State Correctional Facility or State Regional Correctional Facility, Director of a Community Corrections Center or Director of the Training Academy.

Facility Parole Supervisor – An employee of the Pennsylvania Board of Probation and Parole who works primarily in a State Correctional Facility supervising the Parole Office of that facility.

**8.4.1, Community Corrections Treatment Services Procedures Manual
Glossary of Terms**

Log Books or Log Records – The records which show when residents sign in and sign out of a Community Corrections Center including times, locations, etc.

Pennsylvania Commission on Crime and Delinquency (PCCD) – The PCCD promotes a collaborative approach to enhance the quality of justice through guidance, leadership, and resources by empowering citizens and communities and influencing state policy.

Parole – The granting of conditional community release of a resident by the legal authority of the Pennsylvania Board of Probation and Parole. The action will effect the legal transfer of supervisory jurisdiction from the Department to the Pennsylvania Board of Probation and Parole.

Parole Cases – This is the referral of an individual whose PBPP-15, Notice of Board Decision authorizes parole or re-parole on a certain date to an approved plan, however, they remain confined beyond that date due to the inability to formulate an approved plan.

Parolee – An individual who has been paroled from a State Correctional Facility and is under the jurisdiction of the Pennsylvania Board of Probation and Parole, but who may be lacking a specific approved home plan, employment, or who requires specific treatment programming prior to being placed in a private community residence.

Parole to Community Corrections Center – The parole of an individual under the jurisdiction of the Department, to jurisdiction under the Pennsylvania Board of Probation and Parole to reside in a CCC/Contract Facility.

Parole Holdover – An inmate in a State Correctional Facility who has been approved for parole by the PBPP but cannot develop an acceptable parole plan or is in need of participation in specialized programming as a condition of parole. Appropriate individuals in those categories are paroled from State Correctional Facilities to Community Corrections Centers or Contract Facilities.

Personal Property – Privately owned items, which are allowed in Community Corrections Centers.

Specialized Community Corrections Center – The purpose of a Specialized CCC is to provide housing for parole violent offenders the PBPP has identified as needing maximum or enhanced community based supervision and programming for the first 90 days (minimum) post incarceration.