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, Department employees, volunteers, contract personnel, visitors, and inmates.

III. POLICY

It is the policy of the Department to:

A. protect public safety by sufficiently preparing offenders for community reintegration;

B. provide a continuum of care and necessary resources for the successful coordination of appropriate aftercare services upon release. The Department also recognizes that community resources play a critical role in preparing inmates for transition from prison to home. This is all achieved through a comprehensive and collaborative process shared by many stakeholders; and
C. collaborative case management begins within the walls of the facility and extends into the community upon release but not without the transition phase that is vital to the success of the reintegrating inmate.

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

7.3.1, Inmate Reentry and Transition, issued January 5, 2006, by former Secretary Jeffrey A. Beard, Ph.D.

2. Facility Policy and Procedures

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

B. Cross Reference(s)

1. Administrative Manuals
   a. DC-ADM 812, Inmate Visiting Privileges
   b. DC-ADM 816, Inmate Compensation
   c. 1.1.4, Centralized Clearances
   d. 1.1.6, Volunteers and Interns in the Department
   e. 2.3.1, Information Technology
   f. 6.3.1, Facility Security
   g. 7.2.1, Counseling Services
   h. 8.1.1, Community Corrections Centers
   i. 11.5.1, Records Office Operations
   j. 13.2.1, Access to Health Care
   k. 13.8.1, Access to Mental Health Care
2. ACA Standards
   
a. Adult Correctional Institutions: 4-4428, 4-4431, 4-4442

b. Adult Community Residential Services: 4-ACRS-3A-03, 4-ACRS-3A-04, 4-ACRS-5A-04
### Policy Document

**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.
# 7.3.1, Reentry and Transition Procedures Manual

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A. Central Office

The Regional Reentry Administrator (RRA), under the direction of the Executive Deputy Secretary of Corrections, shall:

1. provide oversight of and direction to his/her respective region’s reentry programs in alignment with the Department’s Reentry Strategy;

2. coordinate the Department’s reentry efforts within his/her region;

3. serve as a liaison for the Department with other governmental agencies and with local community agencies and organizations regarding reentry issues;

4. coordinate and provide reentry resources and serves as the primary consultant to Department facilities and staff regarding the Department’s reentry projects and initiatives;

5. meet with the Reentry staff from each facility, within his/her designated region, during annual audits;

6. provide updates to the Reentry staff regarding available community resources, programs, and contact persons;

7. coordinate with the Department of Labor and Industry (L&I) to stay abreast of available incentives for employers to hire persons with a criminal history and to ensure that prospective employers and Department staff are aware of these incentives;

8. coordinate with the PA Department of Transportation (PennDOT), Department of Human Services (DHS), Office of Vocational Rehabilitation (OVR), Social Security Administration (SSA), and all other agencies and organizations that may serve as a resource for inmates engaging in the release planning process;

9. collect information from the Deputy Superintendent for Centralized Services (DSCS)/Reentry staff/designee regarding the facility’s designees for reentry-related activities, such as the SSA Memorandum of Understanding (MOU) signatory list, the PennDOT Mainframe access list, and the names of facility staff assigned to serve as Reentry Coordinator, Reentry Specialist, etc., and maintain this information and list and update them as necessary;

10. compile reentry-related information that is forwarded to him/her from the facilities and make available to Department personnel on DOCNet;

11. serve as a liaison to the Transitional Housing Units (THUs) and Reentry Services Offices (RSOs), in accordance with Section 3 of this procedures manual; and
12. visit the THUs/RSOs during reentry audits and visit independently the THUs/RSOs at least one other time annually.

B. Office of Population Management (OPM)

1. Maintain current open bed space and waiting lists via monthly reports from each individual institution.

2. THU availability shall be monitored through the Transfer Petition System. The facility shall be responsible for entering a transfer petition for each inmate that they recommend for the THU. The Office of Population Management (OPM) shall determine placement of an inmate based on Reentry Service eligibility and the operational capacity of a respective THU facility. Bed space availability for a THU may require placement in an alternate THU.

3. Institution staff may check the Transfer Petition System Inquiry to determine THU status and transportation dates.

C. Facility

1. The Facility Manager/designee shall:
   a. provide overall leadership for all reentry efforts at the facility;
   b. develop local procedures to ensure that the release planning or transfer of an inmate is completed in a timely manner and in accordance with the applicable statutes and policies that govern the transfer or release of inmates;
   c. designate a staff member from the Diagnostic and Classification Center (DCC), if applicable, to provide a hard copy of the DL200 DEPARTMENT OF CORRECTIONS RELEASE APPLICATION FOR PENNSYLVANIA DRIVER LICENSE OR PHOTO IDENTIFICATION CARD (available on Department of Corrections [DOC] Info under “Reports,” “Pre-release”) along with the Memo to Short Min Inmates (Attachment 1-A) for use by inmates identified with Short Minimum sentences. Prior to transfer from DCC, the hard copy DL200 shall be collected from the inmate and placed in the DC-14 for transfer. The DL200 shall then be electronically completed at the parent institution by the Corrections Employment Vocational Coordinator (CEVC)/Reentry staff/designee;
   d. designate a Facility Veterans Coordinator to identify inmate veterans and coordinate veteran services, to include Veterans Service Unit (VSU) referrals and transfers. Further information regarding veteran identification and the veteran services process can be found in Section 7 of this procedures manual;
   e. designate a Unit Manager as well as a Corrections Counselor in each THU, if the State Correctional Institution (SCI) establishes a THU. The Corrections Counselor shall act as the Reentry Specialist;
f. designate a Corrections Counselor/Social Worker to act as the Reentry Specialist, if the SCI establishes a RSO;

g. based on facility need, the Reentry Specialist's caseloads will include only those inmates who have been identified for placement on a THU or are receiving services through the THU/RSO;¹ and

h. designate a Reentry Coordinator if the facility does not have a THU/RSO.²

2. The Deputy Superintendent for Facilities Management (DSFM) and/or the Major of Unit Management shall:

a. provide general oversight to the THU; and

b. supervise and monitor the THU Unit Manager.

3. The Corrections Classification Program Manager (CCPM)/THU Unit Manager/Reentry Coordinator shall:

a. ensure that there is direct communication and routine networking with other facility staff, to include Unit Management, Treatment, Medical, Mental Health, Educational/Vocational, Activities staff, and Parole staff;

b. serve as a local point-of-contact for Community Corrections staff, community service providers, Parole Supervision staff, the RRA and Bureau of Community Corrections (BCC) Regional Program Managers;

c. monitor procedures regarding parole and any other program or process designed to assist inmates in their return to the community;

d. work with and assist the facility Parole staff in the coordination of inmates’ release;

e. monitor and work closely with the Reentry Specialist/Case Manager/Social Worker who is assigned inmate caseloads;

f. ensure that there are reentry resources available for the families and friends of inmates within visiting rooms at facilities;

g. ensure that the visiting room remains stocked with both the English and Spanish versions of *The Handbook for Family and Friends of PA DOC Inmates*;

h. ensure that the facility library and the THU provide inmates with access to the PA County Resource Directories and disseminates the reentry/resource information that is listed on DOCNet;

¹ 4-4442
² 4-4442

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i. coordinate with the RRA and/or BCC Regional Program Manager to identify community resources that can assist an inmate in his/her reentry planning and make presentations to community and faith-based organizations that are designed to promote community involvement in the reentry efforts of the inmate population;

j. schedule and coordinate opportunities for individuals and agency representatives from the community to speak with inmates, interview inmates, facilitate presentations in the THU/RSO (if applicable), and take applications for community services. These services may include, but should not be limited to, employment counseling, housing assistance, emergency financial public assistance, medical assistance, drug and alcohol counseling services, mental health counseling services, educational opportunities, money management, and veterans' benefits;  

k. supervise and work closely with all other staff assigned to the THU/RSO, if applicable; and

l. maintain and track all reentry activity occurring at the facility and forward this information to the RRA on a quarterly basis. This information shall be entered on the quarterly report form provided by the RRA.

4. The Reentry Specialist shall:

a. review the inmate’s Integrated Case Summary Application (ICSA) and gather other collateral information on the inmate in order to assist the inmate to develop an individualized reentry plan that also includes selection of THU workshops. Individualized Reentry Plan templates shall be provided on the Reentry website or offered by the RRA upon request;

b. in conjunction with the Unit Manager and BCC Regional Program Manager/RRA, ensure that services are provided to all eligible inmates who are preparing for parole to Community Corrections Centers (CCCs)/Community Contract Facilities (CCFs), home plans, or release on maximum dates;

c. ensure that all inmates assigned to the THU possess PennDOT photo identification, social security card, and a birth certificate prior to leaving the facility;

d. review all referrals to the THU to determine inmate eligibility based upon risk/needs, including review of referrals from other facilities when an inmate has been transferred;

e. work closely with facility Alcohol and Other Drug (AOD), Psychology, Social Worker, and Health Care staff to ensure that inmates with substance abuse/mental health/medical needs are linked to community services prior to release;

3 4-4428, 4-4431
7.3.1, Reentry and Transition Procedures Manual  
Section 1 – Reentry Staffing and Responsibility

f. ensure that an exit survey is completed by each inmate completing the THU in accordance with the **THU Workshop Satisfaction Survey** (refer to **Section 3** of this procedures manual); and

g. perform other duties related to THU operations.

5. The Corrections Health Care Administrator (CHCA)/designee shall ensure continuity of care planning for an inmate with a chronic medical condition, in accordance with Department policy **13.2.1**, “**Access to Health Care.**”

6. The Licensed Psychology Manager (LPM)/designee shall ensure continuity of care planning for an inmate with mental health issues, in accordance with Department policy **13.8.1**, “**Access to Mental Health Care.**”

7. The Reentry Parole Agent (RPA) shall perform reentry duties and services as outlined by the Pennsylvania Board of Probation and Parole (PBPP).

8. The Social Worker shall:

   a. be responsible for the completion of the COMPASS application for consenting inmates and submit no sooner than 15 days prior to the inmate’s release and no later than five days prior to the inmate’s release. This includes chronic medical cases. Medical shall continue to complete COMPASS for inpatient stays; and

   b. ensure continuity of care planning for Hard to Place (HTP) and mental health roster inmate cases, in accordance with **Section 4** of this procedures manual and Department policy **13.8.1**.

9. The HTP point of contact, as designated by the Facility Manager, shall ensure that the tasks and procedures assigned to designated staff for reentry of HTP inmates are followed and that all pertinent staff work collaboratively for release of the HTP inmate in accordance with **Section 4** of this procedures manual.
Section 2 – Case Management

As part of the classification process, each inmate received into the Diagnostic and Classification Center (DCC) will be evaluated utilizing various actuarial assessment instruments to determine his or her criminogenic risks and needs in accordance with Department policies.

A. Case Management Staff Duties

In addition to procedures required in Department policy 7.2.1, “Counseling Services,” the Corrections Counselor/Reentry Specialist/Social Worker shall:

1. identify, during initial interview, whether inmate is a veteran as well as those inmates who may currently reside on unit. Ensure the veteran is given and completes a 10-10EZ, VA Application for Health Benefits form and SF180 (DD214) to return to his/her counselor or Veterans Coordinator. The counselor/Veterans Coordinator will send out the 10-10EZ and SF180;

2. identify the inmate’s needs regarding reentry resources such as aftercare in the community, make recommendations about the same, when appropriate. Note his/her needs and any recommendations made in his/her Inmate Cumulative Adjustment Record (ICAR);

3. review the inmate’s DC-43, Correctional Plan with him/her at annual case review, semi-annual case review, and during the parole consideration interview (hereinafter referred to as parole staffing). The DC-43 will also be reviewed prior to his/her parole, release to a Community Corrections Center/Community Contract Facility (CCC/CCF), or transfer to a Veterans Service Unit (VSU), or Transitional Housing Unit (THU);

a. upon the inmate being considered for parole, any disagreement between the agencies on recommended programming is to be resolved between the Corrections Classification Program Manager (CCPM) and the Parole Manager; and

b. should the Department and the Pennsylvania Board of Probation and Parole (PBPP) staff be unable to agree upon a plan, the plan shall be referred to the Joint Resolution Committee (JRC) for determination.

4. assist the inmate with the acquisition of the appropriate forms of personal identification immediately upon making the determination that the inmate has a short minimum status;

5. explain the importance of possessing/applying for personal identification such as non-driver’s license/driver’s license, birth certificate, and social security card;

6. document Medicaid benefits prior to his/her incarceration and, if a case number is assigned to the inmate in COMPASS, document that number in ICAR. Express the significance of applying for any available social security and/or welfare benefits as part of his/her release planning;
7. encourage the inmate to save money in preparation for his/her release. Discuss transportation upon release such as mode, fares, time of departure/arrival etc.;

8. make routine entries regarding the inmate's reentry planning in his/her ICAR. Specifically, such entries should be made, upon commitment, annual case review, parole staffing, upon placement in a THU/VSU or assignment to the Reentry Services Office (RSO), upon completion of a comprehensive Reentry Planning Worksheet (refer to Section 3 of this procedures manual), and when changes must be made to the Reentry Planning Worksheet; and

9. provide the inmate and his/her family with information regarding reentry resources such as the Finding a Place to Live booklet, the PA Reentry Survival Manual, and County Resource Directories, which are available through the Interactive Community Services Map on DOCNet. This information will be available to the inmate at annual case review, parole staffing, or when the inmate is placed in a THU/RSO or VSU. Copies of these resources are also made available to the inmates in the Reentry section of the institution library.

B. Annual Review and Parole Staffing

The Corrections Counselor/Reentry Specialist/Social Worker shall:

1. ensure that Department policy 7.2.1, and Section 7 of this procedures manual have been followed prior to parole staffing and/or the inmate’s placement in the THU/RSO or VSU;

2. during parole staffing, review THU/RSO program with inmate to determine volunteer participation;

3. if deemed appropriate for THU participation and approved by vote sheet, submit transfer petition; and

4. the status of the inmate’s personal identification is to be reviewed again during annual review, semi-annual review, and parole staffing to ensure that he/she has an appropriate form of personal identification.

C. Release Planning

The Corrections Counselor/Reentry Specialist/Social Worker shall:

1. outline the planning necessary to prepare the inmate for parole and eventual release and document this information in/on the inmate’s ICAR and Reentry Planning Worksheet;

2. determine if the inmate has been issued a valid driver’s license or other state-issued identification card (hereinafter referred to as “non-driver’s ID”), by contacting the Business Office regarding inmate business/property file;
3. document whether or not the inmate has a driver’s license or non-driver’s ID, birth certificate, and social security card in the inmate’s ICAR and THU/RSO Reentry Planning Worksheet;

4. if the inmate’s required photo, signature, and DL-200 were submitted two years prior to his/her anticipated release date, contact shall be made with the facility’s Business Office to ensure that the ID on file has a valid date and will not expire prior to his/her release;
   
   a. if the inmate has a valid driver’s license that is being held by someone in the community, he/she shall be instructed to have the driver’s license sent to the facility so that it can be kept in the Business Office in preparation for his/her reentry. At a minimum, the inmate will be encouraged to have a copy of his/her identification sent to the facility addressed to the attention of his/her Corrections Counselor/Reentry Specialist; and
   
   b. if the inmate has a driver’s license that is suspended, he/she will be instructed to request a restoration letter through his/her Corrections Counselor/Reentry Specialist. The inmate will also be instructed to make arrangements to surrender the license to the Pennsylvania Department of Transportation (PennDOT) so that the process to reinstate it can be initiated (refer to Section 5 of this procedures manual).

5. notify the CCPM/Deputy Superintendent for Centralized Services (DSCS)/designee when an inmate’s Recidivism Risk Reduction Incentive (RRRI) certification status should be reviewed;

6. work with the Social Worker to assist with the screening of the inmate for Supplemental Security Income (SSI) eligibility, Social Security Disability Income (SSDI) eligibility, Veterans benefits, and/or Social Security Retirement Benefits (refer to Section 4 of this procedures manual);
   
   a. check the Department of Human Services (DHS) COMPASS website to determine whether the inmate collected Medicaid benefits prior to his/her incarceration and, if a case number is assigned to the inmate in COMPASS, document that number and ensure that it is included in any application for Medicaid benefits that is prepared on the inmate’s behalf and submitted to the DHS via COMPASS;
   
   b. notify the Regional Reentry Administrator (RRA) at Central Office in the event the facility’s assigned Social Security Administration (SSA) Office refuses to process a claim.

7. create and review the inmate’s Reentry Plan to ensure that all of the inmate’s responsibilities are met prior to his/her parole staffing. Reentry Plan templates shall be provided on the Reentry website or offered by the RRA upon request;

8. work with the Bureau of Community Corrections (BCC) Referral Unit, Facility Parole Staff, Community Corrections staff, Health Care, Psychology staff, Veterans Services when applicable, and any other Department staff or community representative vital to reentry
planning. Specific inmate concerns will be discussed prior to the transfer of the inmate. Specific concerns to be discussed may include, but are not limited to family support and dynamics, medical and mental health needs, criminogenic behavior, and other therapeutic programming needs;

9. collaborate with other facility staff i.e. Medical, Psychology, Social Worker, Treatment, etc. and Parole Staff when coordinating the inmate’s aftercare plan to ensure that the appropriate scheduling of any necessary appointments in the community is completed;

10. meet with the inmate within one month of his/her anticipated release date to offer him/her information and counseling concerning his/her return to the community. Review with the inmate his/her individual needs, financial needs, support system, strengths, and weaknesses related to his/her reentry and transition;

11. provide the inmate with contact information for outside agencies, such as Pharmaceutical Assistance Contract for the Elderly (PACE) and/or Patient Assistance Program (PAP) – a PA Medicaid Program, Clearinghouse, SSA, etc. and;

12. document all reentry planning in the inmate’s ICAR and the **Reentry Planning Worksheet**.

D. Release Preparation/Exit Interviews

The Corrections Counselor/Reentry Specialist/Social Worker shall:

1. immediately notify the appropriate agency via the chain of command, upon becoming aware of any threats made by an inmate to do harm to a victim or others upon his/her release. If the inmate is being paroled, contact the PBPP. If the inmate is being released upon his/her maximum sentence (Final Discharge Maximum Expiration [FDME]), notify the Unit Manager/designee and he/she shall then notify the appropriate local law enforcement agency and document in the unit management system;

2. if an inmate is being released to a CCC/CCF, under the State Intermediate Punishment (SIP) program, complete the BCC Referral Coversheet in accordance with Department policy 8.1.1, “Community Corrections” and include the checklist with all electronic referral packets; and

**NOTE:** If the inmate is paroling to a CCC/CCF, the BCC Referral Coversheet shall be completed by the facility parole agent.

3. provide the inmate, upon release, a copy of the PA Reentry Survival Manual, the *Finding a Place to Live* booklet, a County Resource Directory for his/her intended county of residence, and other documents such as: treatment and work progress reports, program completion certificates, employer letters of interest, resume and job search histories, as well as any other information that would assist in the reentry process; a photo ID; all personal documents secured in the Business Office; and medication (if applicable).
NOTE: All reentry resources listed above should be downloaded to a USB drive for provision to the inmate upon release, in accordance with Department policy 2.3.1, “Information Technology.” Treatment and work reports shall include the DC-43, and the Inmate Progress Report (refer to Department policy DC-ADM 816, “Inmate Compensation”).

E. Reentry Services

1. The following inmates shall be referred to the BCC Referral Unit for reentry or residential processing in accordance with Department policy 8.1.1:
   a. inmates with positive paroling actions and no home plan;
   b. inmates requiring placement in a Specialized Center;
   c. inmates requiring reentry services in the community (see BCC Contracted Reentry Services [Attachment 2-A]);
   d. inmates requiring residential services;
   e. SIP inmates;
   f. Board stipulated placement in a CCC or CCF;
   g. inmates requiring inpatient Alcohol and Other Drug (AOD) treatment to include co-occurring disorders;
   h. inmates requiring veterans bed placement in contracted CCC/CCFs;
   i. parolees requiring placement in a Parole Violator Center (PVC); and/or
   j. inmates that require county jail work release placement.

2. Department and PBPP facility staff shall also consider where an inmate plans on residing and where he/she wishes to be employed, which may require specific documentation/resources for use upon the inmate’s release. The required documentation and resources may include:
   a. personal identification;
   b. a BCC Reentry Services Referral Form (Attachment 2-B);
   c. medical prescriptions;
   d. job training certificates/apprenticeship papers; and
   e. SSI/SSDI benefits/public assistance documentation/applications.
Section 3 – Safe Community Reentry Programs/Transitional Housing Units (THUs) and Reentry Services Offices (RSOs)

The 2012 PA Act 122 requires the Department and Pennsylvania Board of Probation and Parole (PBPP) to collaborate to establish a Safe Community Reentry Program that will reduce recidivism and ensure the successful reentry of inmates into the community.

Safe Community Reentry Programs include three State Correctional Institution (SCI) models:

1. **Reentry Services Office (RSO) Model** – a centralized department whose purpose is to provide reentry services to inmates residing throughout general population in institutions requiring only designated unit/cell space to deliver reentry workshops/services/activities;

2. **Transitional Housing Unit (THU) Model** – a designated housing unit for eligible inmates on which to reside and voluntarily participate in reentry services; and

3. **Hybrid** – a designated unit/cell space to accommodate residential participation while still allowing other inmates not residing in that area to participate in reentry workshops/services/activities, etc.

These models are designed to provide inmates with increased opportunities to reestablish ties with their community, former employers, and family members.

A. **THU/RSO Transfer Eligibility and Petition Process**

1. The Department shall house inmates at facilities within their home region to promote the concept of bringing the community into the facility to aid in the reentry process. When the Department cannot place inmates within their home region as a permanent placement, the Department will consider transferring them to their home region when they are nearing their anticipated release date. This will provide inmates with increased opportunities to reestablish ties with their community, former employers, and family members.

2. Eligibility includes the following:
   a. the inmate has initiated a request for participation in the THU/RSO and has signed the participation agreement;
   b. the Department recently (within the previous six months) recommended the inmate for parole, per the DC-46, Vote Sheet;
   c. the inmate is program compliant. Additional approval may be required by the Regional Reentry Administrator (RRA) for those cases deemed partially compliant;
   d. the inmate has not received any Class 1 misconducts since the last parole recommendation;
3. Inmates who are within 12 months of Sentence Complete (SC) should be staffed for THU/RSO transfer if their adjustment is positive.

4. Inmates who have active detainers or orders for deportation MAY NOT be considered for THU/RSO transfers.

5. Sex offenders with positive paroling actions, but no home plan, should be considered for transfer within 36 months of their maximum date with the exception of Sexually Violent Predators (SVP). In those cases, he/she will not be considered for transfer until 12 months to his/her maximum date.

6. Participation in THU/RSO is voluntary. When the inmate agrees to participate in the THU/RSO, he/she must sign the THU/RSO Voluntary Participation Transfer Form (Attachment 3-A) at time of staffing. The signed THU/RSO Voluntary Participation Transfer Form will be filed in the DC-14, Cumulative Adjustment Record. When recording the transfer petition entry in the Inmate Cumulative Adjustment Record (ICAR), the sending SCI shall also record when the THU/RSO Voluntary Participation Transfer Form was signed.

7. Transfer petitions will be entered into the DOCNet Case Management System utilizing the THU “Boilerplate” Transfer Template (Attachment 3-B) once the Integrated Case Summary Application (ICSA) is completed and routed to PBPP.

8. Upon review and approval for transfer, the Office of Population Management (OPM) will notify both the sending and receiving institutional parole offices to ensure that the inmate is scheduled for an interview at the receiving institution. This allows the inmate maximum opportunity to participate in the THU workshops at the other institution, while ensuring that the parole interview is not delayed due to the transfer. Inmates should not be transferred if within one month of the board interview (docket).

9. THU/RSO transfers shall be treated the same as incentive-based transfers as it pertains to employment and pay rates. The following addendum will also apply to the inmate’s pay rate:

Inmates transferred to a THU/RSO shall resume the pay rate of the sending SCI when he/she:
a. is enrolled into the THU/RSO;

b. submits a request for placement on a waiting list for employment when a job is not immediately available; and

c. fully participates in the THU. Participation in the THU includes obtaining identification when possible; formulating a S.M.A.R.T. reentry plan, participating in recommended workshops, attending speaker presentations, etc.

10. Failure to participate in programming at the receiving SCI may result in return to the sending SCI. Additionally, failure to maintain employment, failure to participate in mandatory education, and unfavorable institutional adjustment shall also result in removal from the THU/RSO.

11. In the event that a THU participant receives a negative paroling action with a review of nine months or more, he/she may be transferred from the THU to general population.

B. Transition and Reintegration Initiatives

1. THUs and RSOs have been established to provide reentry services/workshops for inmates in preparation for anticipated release to approved home plans, Community Corrections Centers (CCCs) or Community Contract Facilities (CCFs), or for inmates reaching their maximum sentence dates. These units will be facilitated in accordance with the THU Inmate Handbook (Attachment 3-C).\(^1\) Inmates maintain their facility employment while participating in the THU and RSO. An RSO may be established in facilities for which housing in a designated unit is not practical or a Hybrid model may be adapted utilizing the strengths of both models.

2. Utilizing an individualized approach to reentry, inmates will be assessed to determine their specific reentry needs. Plans will be developed utilizing the Reentry Planning Worksheet (THU) (Attachment 3-D)\(^2\) to address those needs that will include assignment to appropriate workshops as outlined in the THU/RSO Workshops Matrix (Attachment 3-E). Workshops will be provided by a combination of facility staff, peer assistants, Community Corrections staff, parole agents, community stakeholders, and volunteers.\(^3\)

3. When a THU model is not ideal for the SCI based on geographical location, population, etc. the RSO model may be used. The RSO provides reentry services to every inmate as noted in Subsection B.1. above.

4. Department staff are strongly encouraged to allow current parolees and inmates who have Central Office clearance and who are listed on the Speaker Bank list to come to the facility to speak to THU/RSO inmates to share their experiences and provide positive role

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\(^1\) 4-ACRS-3A-03, 4-ACRS-3A-04, 4-4442

\(^2\) 4-ACRS-5A-04

\(^3\) 4-4431
modeling for inmates. Staff shall follow Department policies 1.1.6, “Volunteers and Interns in the Department” and DC-ADM 812, “Inmate Visiting Privileges” when reviewing and approving appropriate candidates on an individual SCI level.

5. Staff will refer eligible inmates that receive positive paroling actions to the BCC Reentry Services, in accordance with the BCC Reentry Services Referral Form (refer to Section 2 of this procedures manual).

6. In addition to the reentry services offered through BCC, the Department and PBPP will actively work with outside entities to refer inmates to other reentry services. The Department will invite those organizations and agencies, which provide a variety of services to inmates, into the facilities. Organizations and agencies may include the Office of Vocational Rehabilitation, county mental health office, members of the faith-based community, local reentry coalitions, veterans groups, and others.

7. The PBPP has designated agents to deal with local resource issues. Assessment, Sanctioning, and Community Resource Agents (ASCRAs) are the local experts on available community resources. Several of the THUs and RSOs have designated Reentry Parole Agents (RPAs) specifically dedicated to providing services in the THU/RSO. Their role is to provide workshops and work individually with inmates in preparation for release.

8. The PBPP has developed a list of community entities available in each PBPP district:
   b. additional Parole reentry information is available on their website: [www.pbpp.pa.gov](http://www.pbpp.pa.gov);
   c. the ASCRAs in each district maintains district directories and are available for supervision staff;
   d. the Department lists County Resource Directories to include interactive mapping: [www.cor.pa.gov](http://www.cor.pa.gov); and
   e. other reentry resource information (such as Fairshake.net), is available through the THU/RSO Library computers, or available in paper copy through the THU/RSO resource area or library.

9. Prior to release from the THU, facility staff will provide the THU Satisfaction Survey (Attachment 3-F) for each inmate to complete. These surveys shall be reviewed by THU staff for feedback and recommendations on possible improvements. The RRA and BCC Regional Program Managers shall also review samples of these surveys quarterly to determine whether changes should be made to THU services/workshops offered.

10. Reentry Computer Usage – Internet Access, in accordance with Department policy 2.3.1, “Information Technology,” inmates will be permitted to have limited access to
the internet for legitimate reentry functions such as job searches, educational opportunities, social services, continuity of care planning, housing, and other reentry related purposes. This information along with additional documentation such as resumes and other documents, may be saved to a CD or flash drive, which will be maintained by supervising staff, and later transferred to a Universal Serial Bus (USB) flash drive for issue and use by the inmate upon release. These resources may be further utilized by inmates releasing to a CCC/CCF or to his/her home plan.

11. Participation in internet use requires the authorized inmate to be compliant with the procedures outlined in policy and advised of the limitations of use in accordance with the Offender Internet Acknowledgment form. Staff must ensure computers are only accessible to inmates while under direct supervision of assigned staff. Staff oversight may be provided by any THU/RSO/Veterans Service Unit (VSU) staff member, including but not limited to the Unit Manager, Counselor, Sergeant, or Officer as determined by the Facility Manager/designee. A sign up process shall be implemented to allow for ample lab availability, and each inmate must be assigned to a specific time slot and computer terminal. This information will be logged and maintained as part of the Offender Internet Lab Scheduling Sheet and Offender Internet Lab Log Sheet.

12. USB flash drives shall be prepared upon receipt of a formal release date for the inmate. The USB will be red in color and will be engraved with inmate’s name and DOC#. The USB may include such items as the reentry resource guide, Resource Guide Link, resume, program completion certificates, letters of work history, work reports, references, applications, medical records (if requested and approved per established procedures), and other reentry related documents. The USB drive will NOT include personal photos, videos, or non-reentry related materials. This provision shall not preclude providing the above information by other available means.

13. CCC/CCF staff and THU/RSOs shall establish procedures regarding usage of computers and USB use at their facilities.

a. In the event that an inmate is transferring for THU/RSO purposes to another SCI, the sending institution shall notify the receiving SCI of the presence of the USB in the inmate’s property.

b. Additionally, CCC/CCF staff also shall permit the inmate to maintain the USB with their center property.
Section 4 – Medical and Severe Mental Health Reentry

A. Identification

1. The Facility Manager shall designate the Corrections Classification Program Manager (CCPM)/designee as the State Correctional Institution (SCI) Hard To Place Point of Contact (HTP POC) for his/her facility. The SCI HTP POC will:

   a. ensure that the tasks and procedures outlined in the Hard To Place (HTP) Timeline for Positive Board Actions, Special Probation, and Final Discharge Maximum Expiration/Expired (FDME) (Attachment 4-A) are followed by the designated staff;

   b. review all referral packets for outside service agencies and/or the Bureau of Community Corrections (BCC) to ensure accuracy and uniformity of information;

   c. attend and participate in monthly Quality Improvement meetings to review HTP cases, as needed; and

   d. when necessary, hold multidisciplinary team meetings to discuss HTP cases.

2. The HTP categories include, but are not limited to, inmates with:

   a. mental health needs/intellectual disabilities;

   b. significant medical conditions that may require some level of skilled and/or continued care (including dementia, personal care, skilled care, hospice care, etc.). Placement may require skilled medical facility placement or some level of personal care housing upon release from the Department of Corrections (DOC);

   c. a lack of familial resources;

   d. a nature of conviction/offense history (including, but not limited to, sex offenders); and/or

   e. any combination of the above.

3. Any inmate who meets the above criteria and who has received a paroling action, is past his/her minimum sentence date, and who has not developed a viable parole plan, can be identified as HTP by accessing the Parole Release Pending List (parole holdover list) generated by Pennsylvania Board of Probation and Parole (PBPP) staff at each facility or by routine counseling contacts. These lists should be reviewed at the monthly Quality Improvement meetings by the SCI HTP POC, Medical, Psychiatry, Psychology staff, and the Social Workers (SW) to ensure that collaborative steps are taken to expedite and assist in the release of eligible HTP inmates.

4. Additionally, if a member of the Unit Management team is aware of an inmate who meets the HTP criteria and has received a paroling action, is past his/her minimum sentence
date, and who has not developed a viable parole plan or is 12 months from his/her max date, he/she shall report the HTP case to the SCI HTP POC.

5. The SCI HTP POC will notify the Unit Manager (UM), CCPM, and/or the Deputy Superintendent for Centralized Services (DSCS) when an inmate falls into this category to verify any necessary collaborative processes.

6. The Plan of Action for FDME and HTP From form (Attachment 4-B) shall be initiated for each identified HTP case to establish and document baseline, ongoing processes.

7. The BCC shall designate a HTP POC to address HTP cases requiring residential placement and/or reentry services.

8. SCI Waymart (WAM) shall serve as the statewide point of contact for HTP cases where an SCI is unable to secure housing and/or vital reentry services after all they have done.

9. When appropriate, the Facility Manager/designee shall communicate with SCI WAM and Central Office using the Central Office HTP distribution address to ensure uniform clarity and guidance on the progress or assistance needed on HTP cases. The Central Office HTP distribution email address is: CR-CENHardtoPlace@pa.gov

B. Follow Up and Follow Through

1. Once an inmate is identified and approved by the CCPM/SCI HTP POC as HTP, the CCPM/SCI HTP POC will schedule a meeting with the UM, Corrections Counselor, Corrections Health Care Administrator (CHCA)/designee (if applicable), Licensed Psychology Manager (LPM)/designee (if applicable), SW, and facility Parole staff to discuss with the inmate his/her options for parole.

2. The facility Parole staff member will be encouraged to take an active role in the placement process for HTP cases and he/she will serve as the liaison with the Reentry Parole Agent (RPA), Assessment, Sanctioning, and Community Resource Agents (ASCRAs), and the PBPP Bureau of Offender Reentry. The RPA and ASCRA will work with community-based programs and/or the BCC to facilitate placement and/or services, as needed. Note that facility staff may contact the PBPP Bureau of Offender Reentry, the RPA, and ASCRA directly.

3. The SCI HTP POC/SW and the facility Parole staff member will be encouraged to attend and participate in Psychiatric Review Team (PRT) meetings for HTP cases involving mental health concerns.

4. The inmate, SCI HTP POC, Unit Management Team, SW, and the facility Parole staff member must be resourceful and creative in exploring release-planning options. An interactive Reentry Map is available via DOCNet and the Department’s public website. These directories include agencies, support groups, and individuals that may provide release assistance for a HTP inmate and will be located in the facility library and on the Transitional Housing Unit (THU). Additional reentry resource information is available
through the BCC, Parole, and National Reentry Resource Center websites, as well as the links associated with the **HTP Timeline**.

5. The SW/SCI HTP POC/designee will develop and establish a release plan and request assistance from staff and other facility resources based on the specific needs of the HTP inmate. He/she will:

   a. collaborate with staff, as well as other state and community agencies, to identify and pursue housing options and reentry services (medical, mental health, etc.) as part of the release planning process;

   b. ensure that appropriate release of information and referral documents are completed and properly assembled. The SW supervisor or second staff member must review the referral packet before it is sent to BCC or community providers to ensure medical information is consistent, signatures are provided where required, and that dates are accurate; and

   c. assist with the release planning process of HTP cases per the **HTP Timeline**.

6. When necessary, the CHCA/designee shall work collaboratively with the SCI HTP POC to ensure continuity of care for a HTP inmate with a significant medical condition, in accordance with Department policy **13.2.1, “Access to Health Care.”** The CHCA/designee shall be notified when a HTP inmate is scheduled for a community corrections center placement, parole, or sentence complete in order to obtain medical clearance for transfer.

7. When necessary, Psychology staff will work collaboratively with the SCI HTP POC to ensure continuity of care for mentally ill inmates, in accordance with Department policy **13.8.1, “Access to Mental Health Care.”**

8. The SCI HTP POC will ensure that the names and numbers of inmates who have been identified as HTP will be reported monthly to the Regional Deputy Secretaries and BCC Referral Unit as part of the Parole Release Pending List.

9. In the event that institutional staff have been unable to establish a viable release plan for the HTP inmate’s release to the community, the SCI HTP POC will notify SCI WAM and the Central Office HTP POC using the HTP Distribution List – **CR-CENHardToPlace@pa.gov**.

   The following measures must be completed before Central Office HTP POC is contacted.

   Social Worker/SCI HTP POC/designee:

   a. has pursued and recorded all attempts to contact and establish resources and services noted on the **HTP Timeline**;
b. compiles and includes in the email to Central Office HTP POC a copy of all documents and summaries used in the release planning process, to include time-lined efforts and documented steps in the Plan of Action for FDME form, and

c. ensures that all documents are consistent, accurate, with appropriate signatures provided where required.

10. SCI WAM HTP POC shall schedule a meeting with the referring SCI HTP staff to confirm efforts, provide support, and discuss and develop a plan of action for the HTP case.

11. SCI WAM HTP POC and facility staff will work collaboratively with PBPP, Community Corrections staff, and when appropriate, the Health Care Advocate and/or Mental Health Advocate, and/or the Regional Reentry Administrators (RRAs) to ensure that effective release plans are developed and executed.

12. In the event that within three months from release a case becomes HTP due to unforeseen circumstances, an email shall be sent to the distribution list address; CO HTP staff will determine the lead for that case.

13. The Central Office HTP POC staff are:

   a. offense related and lack of familial resources – the Eastern and Western RRAs.

      (1) Eastern Region includes: Benner Township, Camp Hill, Chester, Coal Township, Dallas, Frackville, Graterford, Huntingdon, Mahanoy, Muncy, Retreat, Rockview, Smithfield Waymart, Harrisburg CCC, Philadelphia CCCs #2 and #4, Scranton CCC, Wernersville/Pathways CCC, and York CCC.

      (2) Western Region includes: Albion, Cambridge Springs, Fayette, Forest, Greene, Houtzdale, Laurel Highlands, Mercer, Quehanna, Pine Grove, Somerset, Johnstown, Riverside, Erie, and Sharon CCCs.

   b. Mental Health – Mental Health Advocate;

   c. Medical – Health Care Advocate; and

   d. in the event that the case involves both mental health and medical issues, the Mental Health and Medical Advocates will review the case and determine the Central Office HTP POC lead.

14. In the event that the HTP inmate refuses to sign a release of information to pursue appropriate avenues for housing/placement, the SCI HTP POC will convene with SCI UM, PRT, and/or Medical to determine the HTP inmate's level of function, level of medical/mental health needs, and available resources. Only after a thorough consideration of factors have been exhausted shall staff pursue consideration for involuntary commitment. In some cases, due to unstable or fragile conditions, steps may need to be revisited more than once during the course of the release process.
Collaborative communication and accurate documentation will be key to successful placement.

15. Under the continuity of care provisions of the Mental Health Procedures Act, even when an inmate refuses to sign a release of information, the Department of Human Services may be included on the release of any mental health information. This is to ensure that the inmate receives needed mental health services through reentry.

C. Social Security Disability Income (SSDI)

1. Department facilities shall utilize the following guidelines when collaborating with their assigned Social Security Administration (SSA) Office on Social Security Disability Income (SSDI):

a. the SSA defines disability as the inability to engage in any substantial gainful activity by reason of any medical determinable physical or mental impairment(s) which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months;

b. SSDI is for an individual with a disability and a history of employment for at least five of the last ten years; and

c. Social Security Retirement Benefits are based on the inmate’s age and whether he/she has worked and contributed to Social Security for the required number of quarters.

2. If the inmate has been deemed eligible for SSDI as outlined in Subsection C.1. above, the inmate should begin the application process upon parole staffing and recommendation, or if within six months of his/her maximum sentence date. The Corrections Counselor/Reentry Specialist/SW shall:

a. meet with the inmate to discuss and educate him/her regarding eligibility requirements and to assist in initiating the application;

b. assist with the completion of any/all forms required by the SSA when processing benefits applications;

c. request that the Medical Department provide documentation, if required, to include one year or more of current medical/psychological records to support a medical claim. (Medical examinations must be within two to three months of application. The form must be completed by the physician, physician assistant, certified registered nurse practitioner, registered nurse, or licensed practical nurse. Consultative examinations for applicants will be paid by the SSA Bureau of Disability Determination. These may require x-rays and/or blood tests.); and

d. request that psychiatry or a clinical psychologist perform an examination and sign the SSA application, if required.
3. All forms required for the SSDI application process, to include the SSA-827, Authorization to Disclose Information to the Social Security Administration (Attachment 4-C) and the SSA-3368-BK, Disability Report-Adult (Attachment 4-D) are available online at www.ssa.gov/reentry.

D. Supplemental Security Income (SSI)

The DOC and the SSA have a memorandum of understanding to assist inmates who meet SSI criteria to apply prior to release.

1. Identification. The SCI will identify potentially eligible SSI inmate applicants no less than 120 days from release; hereafter referenced as prerelease applicants/applications.

   a. “Potentially Eligible Prerelease Applicants” shall be those inmates who are 65 years of age or older and, in the determination of the SCI, appear to meet the SSA’s definition of disabled as defined in 42 U.S.C. 416(i), “Disability; Period of Disability.” There, the term disability is defined as:

      (1) inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months; or

      (2) blindness; and the term “blindness” means central visual acuity of 20/200 or less in the better eye with the use of a correcting lens. An eye which is accompanied by a limitation in the fields of vision such that the widest diameter of the visual field subtends an angle no greater than 20 degrees shall be considered for purposes of this paragraph as having a central visual acuity of 20/200 or less.

   b. The SCI shall have full discretion in determining who qualifies as a potentially eligible prerelease applicant by interpreting SSA’s eligibility requirements as defined above.

   c. Individuals who do not appear to meet the SSI income and resource criteria or are potentially not entitled to Social Security benefits will not be referred to the SSA. SSI income and resource criteria will be based on the provided SSA guidelines.

   d. The SCI will identify individuals, either through their own verification or through an inmate’s self-report.

2. Applications. Upon receiving notice of an inmate’s anticipated release date, but not more than 120-days from the anticipated release date, the SCI will interview the inmate and fill out the prerelease applications.

   a. Prerelease Applications include:

(2) the Disability Starter Kit, https://www.ssa.gov/disability/Documents/SSA-1170-KIT.pdf;

(3) the Authorization to Disclose Information to the Social Security Administration (SSA), Form SSA-827 http://www.ssa.gov/forms/ssa-827.pdf; and


b. SSA shall provide written notice to the DOC Point of Contact in the event changes are made to any of the application forms referenced herein.

c. DOC shall ensure that the inmate and the assigned counselor or reentry coordinator assisting the inmate sign and date the SSA-3288, listing the SCI under “NAME” AND “ADDRESS” as authorized to receive information from SSA about the inmate through the expected release date.

3. Information provided to local SSA office. The following information will be provided by the SCI through the Application for Supplemental Security Income (SSI), Form SSA-8001-BK, the Disability Starter Kit:

a. The individual’s name, social security number, date of birth, and anticipated discharge date within 120-days of the anticipated discharge date;

b. The individual’s nonmedical information for development of whether the individual meets all SSI eligibility requirements; and

c. The individual’s current medical evidence consistent with SSA guidelines and recommendations of the Disability Determination Services (DDS) and a statement about the individual’s ability to handle funds.

4. A cover letter on SCI letterhead shall be included with the application packet to read:

The enclosed Supplemental Security Income packet contains the following documents:

a. the Application for Supplemental Security Income (SSI), Form SSA-8001-BK;

b. the Disability Starter Kit;

c. the Authorization to Disclose Information to the Social Security Administration (SSA), Form SSA-827; and

d. the Consent for Release of Information, Form SSA-3288

This packet of information is for inmate:
5. The SSI information packet shall be mailed with a tracking number to the SSA Office assigned to the SCI as noted in the SCI SSA SSI Resource Account and SSA SSI POC Information (Attachment 4-E).

6. Notification

   a. In order to ensure a timely response, a distribution electronic mail account for each SCI has been created and listed in the Social Security Office/DOC Facility Contact List. This list shall be updated periodically with the current contact information and distributed to the parties.

   b. Staff at the SCI shall provide notice via the SSA distribution electronic mail to the local SSA office of any changes that could result in discharge over 30 days after the notice of the eligibility decision;

   c. The SCI shall provide notice of discharge via electronic mail to the local SSA office as soon as the SCI discharges the inmate; and

   d. DOC staff at each SCI shall:

      (1) handle all referrals;

      (2) notify the local SSA office of any pertinent changes; and

      (3) respond to any local SSA office inquiries.

7. In the event that the assigned SSA Office is unclear as to whether an application for SSI/SSDI or retirement benefits can be made prior to the inmate’s release, the Department’s facility staff will contact the RRA.

E. Sex Offender Placement

   Sex Offenders with a positive paroling action and who have been unable to secure a home plan shall be referred to a Community Corrections Center (CCC)/Community Contract Facility (CCF) in accordance with Department policy 8.1.1, “Community Corrections Centers,” Section 4. Efforts should be made to determine whether an identified sex offender is sentenced as a Sexually Violent Predator (SVP). This information shall be included in the referral information provided to BCC. The corrections counselor or SW shall
verify status by checking Meghan’s Law website, Records and Parole. Those sources may verify the inmates tier. If the inmate is identified as an SVP after a CCC/CCF bed date has been assigned, BCC must be notified.

F. Transportation of Hard To Place (HTP)

SCI HTP POC/SW/UM/designee shall coordinate any necessary transportation for the HTP inmate. Transportation needs will be relayed to PBPP and BCC, as needed.
Section 5 – Personal Identification

Receipt of all forms of identification should be documented in the Inmate Cumulative Adjustment Record (ICAR) upon receipt of confiscation slips via Counselors/Reentry Specialists/designee.

A. Duplicate Social Security Cards

1. The Social Security Administration (SSA) has agreed to permit the Department to request, process, and maintain a duplicate Social Security Card (SSC) for an inmate whose application is received by the SSA no more than 180 days and no less than 30 days before his/her release. An exception to the 180 day timeframe would be if a SSC is required to process a PA Non-Driver’s Photo ID card; i.e., an inmate that has never had a PA Non-Driver’s Photo ID.

2. To apply for a duplicate SSC, an inmate must be a U.S. citizen, have an existing Social Security number, and all information on his/her application must exactly match the information in the SSA’s record. A request for a new SSC, changes to SSA records, or a request from a non-U.S. citizen will not be processed by Department staff. An inmate 18 years of age or older who has never been assigned a Social Security number must apply in person upon release to his/her community.

3. As part of reentry planning, the Counselor/Reentry Specialist/Social Worker will determine if an inmate needs to apply for a duplicate SSC no later than six months prior to release. Procedures are located in the Duplicate Social Security Cards, Application with Confirmed Driving Record and Birth Certificate, Appendix 5-A.

B. Obtaining a PA Driver’s License or Non-Driver’s ID

1. An agreement between Pennsylvania’s Department of Transportation (PennDOT) and the Department allows inmates to apply for a PA Non-Driver’s Photo ID card, duplicate valid PA Driver’s License, or renew an expired PA Driver’s License, in preparation for release. A DL-200, Application for a PA Non-Driver’s Photo ID Card, Renewal of an Expired Non-CDL PA Driver’s License, or Application for a Duplicate valid Non-CDL PA Driver’s License (available on Department’s DOCNet) may occur two years prior to an inmate’s anticipated release. If the inmate is a short-min inmate, his/her application to PennDOT shall be immediately sent from the Diagnostic and Classification Center (DCC).

2. Each facility shall have the Counselor/Reentry Specialist or designated staff meet with each inmate to initiate the DL-200 fill-in application. Inmates will be scheduled via callout to initiate the DL-200 application based on reentry eligibility.

3. One staff member at each facility, Corrections Employment Vocational Coordinator (CEVC)/Reentry Specialist/designee, is granted access to the PennDOT Mainframe Database. Any change in responsibility is to be reported to the Regional Reentry Administrator at Central Office.
4. The Counselor/Reentry Specialist or designated staff will forward the DL-200 applications to the CEVC/Reentry Coordinator/designee for review in the PennDOT mainframe database. The PennDOT identification number is added to the application at this time and all information is verified for accuracy prior to submitting to staff that have access to the photo imaging system to take a PennDOT photo (on PennDOT blue background) and signature. It is important that the inmate’s signature on the DL-200 form matches the name as designated in the PennDOT mainframe for the document to be processed.

5. CEVC/Reentry staff shall check the PennDOT mainframe database to determine whether the inmate’s driving privileges have been suspended prior to submitting an application for a driver’s license renewal on behalf of the inmate. In the event that the inmate’s driving privileges have been suspended, the inmate shall be given his/her restoration letter and he/she shall be advised that all of the listed conditions in the restoration letter must be met prior to the submission of his/her application for driver’s license renewal. The inmate shall apply for a Non-Driver Photo ID if his/her Driver’s License is suspended.

6. An inmate who has a valid or suspended Pennsylvania Driver’s License can apply for and retain a Non-Driver Photo ID card.

7. A Commercial Driver’s License (CDL) is not included on the DL-200 application for license renewal and, therefore, will not be processed at the facility. It is also not possible to acquire a “copy” of a PA driver’s license.

8. A camera card will be issued by PennDOT and forwarded to the inmate when a family member or significant other of the inmate submits renewal paperwork and pays the renewal fee on his/her behalf. In accordance with the Memorandum of Understanding (MOU) between PennDOT and the Department, any and all camera cards received by the facility will be confiscated and maintained with the inmate’s property in the Business Office until his/her release. Camera cards will not be processed at the facility. Inmates may visit any PA Driver’s License Center to have them processed after his/her release. Confiscation slips for camera cards, Driver’s License, and Non-Driver Photo ID cards should be forwarded to the inmate, Corrections Counselor, and Reentry Coordinator, in accordance with Appendix 5-A.

9. PennDOT will process applications received electronically as outlined in this policy only. The DL-200 was specifically developed for use by the Department and is to be used only with the procedures outlined in this policy. The form is not to be given to the inmate for use after release or to mail home and have family members process. All DL-200 forms received by PennDOT via the United States Postal Service (USPS) will be returned to the sending address and will not be processed. This includes those received via USPS from the facilities. The electronic process is to be strictly followed.

C. Birth Certificates

1. An application for a birth certificate may be processed at any time and may be necessary for application for a Non-Driver Photo ID or a duplicate SSC. The inmate should be encouraged to obtain an official copy of his/her birth certificate upon commitment to the facility.
Department. Pennsylvania Veterans are entitled to receive an official copy of their birth certificates free of charge.

2. Birth certificate applications for all 50 U.S. states and its territories are accessible via the internet or through email correspondence with the Regional Reentry Administrator at Central Office in accordance with Appendix 5-A. The cost associated with such an application will vary by state. The cost will be incurred by the inmate. Inmate General Welfare Funds (IGWF) may be used to secure a copy of the birth certificate for any inmate that is unable to secure a photo ID, is indigent, and preparing for release within the next 12 months.
CONFIDENTIAL

7.3.1, Reentry and Transition

Appendix 5-A

This Appendix is confidential and not for public dissemination.
Section 6 – Mentor Program

The purpose of the Reentry Mentoring Program is to provide inmates with support and guidance regarding their eventual release and transition into the community, to promote the effective development of a positive community-based support system, to enhance inmate’s employability and job readiness, and to promote healthy family and interpersonal relationships. Mentoring is most beneficial during the critical adjustment period between incarceration and the inmate’s return to the community. Eligible inmates must be within one year of their anticipated release date in order to participate.

A. Responsibilities

1. At the Central Office Level, the Regional Reentry Administrators (RRA) shall oversee and monitor all institutional inmate mentoring programs endorsed by the Department.

2. At the Facility Level:

   a. A staff member will be designated by the Facility Manager at each facility to serve as the Mentor Coordinator and, in conjunction with the Corrections Classification Program Manager (CCPM)/Volunteer and Internship Coordinator, he/she shall be responsible for coordinating, monitoring, and tracking all approved Mentoring Programs and mentor activity within the facility, to include notifying the inmate population of a mentor opportunity; and

   b. In accordance with Department policy 1.1.6, “Volunteers and Interns in the Department,” the facility Volunteer and Internship Coordinator/Security Office will conduct a clearance check on all potential mentors, to include the Reentry Service contracted providers, and enter all approved mentors into the Centralized Clearance System, in accordance with Department policy 1.1.4, “Centralized Clearances.” Clearance recommendation will be provided to the Mentor Coordinator by the Security Captain/Volunteer and Internship Coordinator/designee. Clearance dates and the renewal of clearance dates should be tracked by the Mentor Coordinator.

B. Mentors

1. Criteria for Mentors

   a. Current Department employees and Contract Service Providers are not permitted to serve as mentors unless contracted to provide mentoring services and under those terms through the Bureau of Community Corrections (BCC).

   b. Official visitors and volunteers may serve as mentors upon approval by the Department, in accordance with policy. While serving in that role, however, these individuals will only be permitted to provide mentoring contact through the visiting room and will be subject to the same regulations and expectations of any visitor in accordance with Department policy DC-ADM 812, “Inmate Visiting Privileges.” Official Visitors of the PA Prison Society may serve as mentors; however, in the role
of mentor they will have access to the visiting room only, and will be subject to the same regulations and expectations of any mentor in the Department.

2. The Mentor Coordinator shall provide a mentoring application package to individuals interested in mentoring an inmate. The application package will contain the following documents:

   a. a Welcome Letter (Attachment 6-A);

   b. a Mentor Coordinator Cover Letter (Attachment 6-B);

   c. a PA Department Mentor Application (Attachment 6-C);

   d. a Centralized Clearance Request Form in accordance with Department policy 1.1.4; and

   e. a copy of the Department’s Mentoring Basics: The Do’s and Don’ts publication (Attachment 6-D).

3. In alignment with the Pennsylvania Board of Probation and Parole (PBPP) policy regarding parolee participation in mentor groups facilitated by successful reentrants, the Mentor Coordinator will maintain a list of successful reentrants to be considered as candidates for mentors. The Mentor Coordinator will communicate with facility parole, the Reentry Parole Agent (RPA), and other parole staff to develop and share this list.

4. The Mentor Coordinator will validate the information contained within the Mentor Application and provide a summary of his/her findings to all reviewing administrators.

5. The Mentor Coordinator, CCPM, Deputy Superintendent for Centralized Services (DSCS) or Deputy Superintendent for Facility Management (DSFM), and the Facility Manager/designee must recommend the mentor and duly note their approval on the Mentor Application prior to the application being forwarded to the Office of Special Investigations and Intelligence (OSII) for the final security check.

6. The completion of a final security check approval/disapproval will be communicated to the Mentor Coordinator who will then file the applicable Mentor Application at the facility for record keeping purposes. It will be the responsibility of the Mentor Coordinator to inform the mentor applicant of the Department’s approval/disapproval of his/her participation in the Mentorship Program.

7. Mentors must coordinate their visits with the Mentor Coordinator and are required to abide by all visiting room rules in accordance with Department policy DC-ADM 812. Mentors are not permitted to bring anything into the visiting room with the exception of a pad and pencil (no spring-loaded pens/pencils, no loose leaf paper, no hardboard journal) and other items pre-approved by the Mentor Coordinator prior to the visit. Any additional information (i.e., program pamphlets etc.) must be mailed directly to the inmate.
8. All mentor visits will take place in the facility visiting room during regular visiting room hours and under the supervision of security staff. Abusing the mentor privilege may result in the suspension/removal of a mentor as deemed appropriate/necessary by the Facility Manager.

9. Mentors may visit different inmate mentees on the same day; however, the mentor may visit only one inmate mentee at a time and may not visit an inmate mentee more than twice per month. Mentor visits shall not count against the number of regular visits approved for the inmate’s custody level. Mentor visits will be tracked in the Visitor Tracking System. Mentors will submit a quarterly report regarding the progress of the mentor/mentee relationship to the Mentor Coordinator. Mentor Coordinators will record mentor/mentee progress updates in the Inmate Cumulative Adjustment Record (ICAR) notes.

10. If an inmate is placed in the Restricted Housing Unit (RHU), mentor visits may continue in accordance with Department policies DC-ADM 801, “Inmate Discipline,” and DC-ADM 802, “Administrative Custody Procedures.”

C. Mentor Speaker Databank

1. The RRAs will maintain a Statewide Mentor Speaker Databank comprised of approved successful reentrants and reentry affiliated professionals willing to speak or mentor at multiple facilities. This database will be accessible to all Mentor Facilitators to aid in generating a statewide network of contacts, mentors, supports, and speakers.

2. The Mentor Coordinator shall submit applications and clearances for speakers directly to the RRA for processing and approval in cases where the prospective mentor or speaker is interested in presenting at more than one state facility. Central Office will conduct a clearance check on all potential mentors or speakers, to include the Reentry Service contracted providers, and enter all approved candidates into the Centralized Clearance System, in accordance with Department policy 1.1.4. Clearance recommendation will be provided to the Mentor Coordinator by the RRA. Clearance dates and the renewal of clearance dates should be tracked by the Mentor Coordinator who initiated the application. The RRA will add the approved mentors and speakers to the Statewide Speaker Databank.
Section 7 – Veteran Identification and Services

A. Responsibilities

1. The Statewide Veterans Coordinator shall:

   a. serve as the Department’s Incarcerated Veterans Program Manager and serve as the point of contact for the Facility Veterans Coordinators as well as the liaison with the U.S. Department of Veteran Affairs (VA);

   b. coordinate all the Department’s facility veterans’ service programs to include the Veteran Service Units (VSU);

   c. serve as the primary contact between the Department and other agencies involved with incarcerated veterans to include; the VA, the Department of Military and Veterans Affairs (DMVA), and the Pennsylvania Board of Probation and Parole (PBPP);

   d. ensure the appropriate VA forms such as the **SF180 (DD214)** and **10-10EZ (VA Application for Health Benefits)** are available to Facility Veterans Coordinators and educate them to fill out the forms correctly and completely; and

   e. develop and maintain an informative Veteran Services link via DOCNet (Bureaus/Offices) as well as a tracking mechanism that all agencies and Department staff can use to better meet the needs of our incarcerated veteran population.

2. The Facility Veterans Coordinator shall be a veteran whose responsibilities shall include, but are not limited to, the following:

   a. identify veterans that are currently housed within the facility via the Veteran Reentry Search Service (VRSS) and/or **DD214**;

   b. organize and facilitate appropriate services for inmates that have been identified as veterans, while being familiar with the use of the Veteran Services link via DOCNet (Bureaus Offfices);

   c. provide inmate veterans with assistance in obtaining their **(SF180) DD214** [http://www.archives.gov/veterans/military-service-records]. Once the **DD214** is received, a copy must be placed in the **DC-14, Cumulative Adjustment Record**, with the original document going to the Business Office. All steps in this process must be noted in the **Inmate Cumulative Adjustment Record (ICAR)**;

   d. assist inmate veterans with completing and mailing the **10-10EZ** [https://www.1010ez.med.va.gov/sec/vha/1010ez/]. All steps in this process must be noted in the ICAR;

   e. serve as a general point of contact for all veterans services available to inmates during incarceration and upon release; and
f. refer eligible and interested inmate veterans to the Statewide Veterans Coordinator for VSU consideration. If approved and supported via a vote sheet, initiate a transfer petition using the following VSU template:

This inmate is being referred for placement in the Veteran Services Unit (VSU) at SCI_______. The inmate meets the established criteria for VSU admission and is not currently enrolled in any other programming. This inmate is a custody level ____ with the following program code(s) _____. The inmate has a roster rating ____. (If the inmate has a roster rating of “D” the inmate has been stable on medication for ____ days/months, the PRT review has been completed, the inmate has been recommended by the PRT, and the staffing vote sheet has been approved.) Is the inmate an STG? _______. If yes: which STG? ______________ Set: ________________ Rank: ________________.

B. Identifying Veterans

1. When a newly committed inmate is received at the Diagnostic and Classification Center (DCC), Records Office staff shall ask the inmate if he/she has served in the United States Armed Forces. If yes, the Records Specialist will enter the inmate’s number, dates of service, and type of discharge in the Inmate Records System (IRS) on the 75 screen. In addition, the Reception Counselor will provide the identified inmate veteran with an Inmate Veteran Information Packet. This packet will include an informational cover sheet, a SF180 (DD214) application, a 10-10EZ, and a VSU brochure/poster. The Facility Veterans Coordinator will assist inmate veterans who require assistance with completing the SF180 (DD214) and 10-10EZ applications.

2. Once inmate veterans complete the SF180 (DD214) and 10-10EZ applications, the Classification Counselor/designee will collect and file the applications into the DC-14, which will be marked with a “Veteran” identifier.

3. When the inmate veteran is received at the permanent facility, the Corrections Counselor and/or Facility Veterans Coordinator will review both applications and mail them to the respective addresses provided (please use permanent facility address as the return address for SF180 applications). Once the DD214 is received, a copy will be placed in the DC-14, and the original document will be secured in the Business Office until the inmate is released. All steps in this process must be noted in the ICAR. (NOTE: Inmate veterans who previously received a copy of their DD214 may retain said document in their possession.)

4. If an inmate is identified as a veteran and did not have the veteran services process started at the DCC, the Inmate Veteran Information Packet (located on the Veteran Services link via DOCNET [Bureaus/Offices]) shall be provided to the inmate and processed by the assigned Corrections Counselor and/or Facility Veterans Coordinator at the permanent facility.
5. A current list of veterans, by facility, may be obtained by request to the Statewide Veterans Coordinator as well as through the utilization of the Department's Veteran Services link via DOCNET (Bureaus/Offices). The VRSS list shall be utilized to:

a. determine an inmate’s veteran status; and

b. identify inmates that are potential referrals to the VSU as indicated in Subsection D. below.

6. Staff from the VA Medical Center may contact the facility and interview the inmate to further determine his/her eligibility and to screen the inmate for services and benefits.

7. The Facility Veterans Coordinator will request that the VA notify him/her of the results of the eligibility screenings that indicate that the inmate is eligible for benefits.

8. If the inmate is eligible for benefits, the Facility Veterans Coordinator will notify the Corrections Health Care Administrator (CHCA) and Unit Manager of the inmate’s eligibility status.

9. The Corrections Counselor and/or the Facility Veterans Coordinator will assist the inmate with applying for any appropriate programs offered at the Lebanon VA Medical Center and/or with locating appropriate services offered at other VA Centers near or in the community to which the inmate will be returning.

10. Veterans, honorably or dishonorably discharged, may be referred to the Bureau of Community Corrections (BCC) for release placement.

C. Veteran Community Providers

Various veteran-related community providers and other organizations work with VSU inmates to provide stable environments, shelter, food, transportation, and other services upon release. For example:

1. the Pennsylvania Prison Society will coordinate vocational training, family counseling, and reentry-related supports to veterans returning to the community;

2. a Pennsylvania Justice Project legal representatives may or could provide pro bono services to incarcerated veterans; and

3. the Delaware Center for Homeless Veterans may assist veterans in securing housing.

D. Veterans Service Unit (VSU)

The Department currently has Veterans Service Units (VSU), which are located in each region of the Commonwealth.
1. The VSU will prepare veterans for successful release back into society. The VSU will improve life skills, and will address PTSD (Post Traumatic Stress Disorder), Traumatic Brain Injury, anxiety disorders, depression, substance abuse issues, and homelessness.

2. The following needs will also be addressed: vocational, financial, family-related, medical, educational, veterans’ services, peer support/mentoring, and connecting to community resources. Treatment programming for moderate to high risk inmates will also be offered.

3. VSU staff will assist veterans in obtaining vital documents needed for successful reentry such as: PA Identification Cards, Birth Certificates, Social Security Cards, and DD214s. Veterans will be aided with the enrollment for VA benefits via the 10-10EZ form as well as connecting them with various veteran service organizations. Social Workers will support veterans by collaborating with VA Health Care for Reentry Veterans (HCRV) staff to facilitate the ability of veterans to effectively connect with VA resources.

4. The admission criteria for the VSU’s are as follows:
   a. verified military service (any military discharge status is acceptable);
   b. be within 36 months of their minimum sentence or potential release date; however long-term inmates may be considered for program enrichment;
   c. sex offenders may be considered for participation on a case-by-case basis; however, sex offender programming must be completed prior to transfer;
   d. establish and maintain a positive institutional adjustment;
   e. must be motivated to complete programming recommended on the DC-43 Correctional Plan; and
   f. inmate veterans with a D-stability rating will need to meet the following criteria in order to participate:
      (1) medication stability for 30 days;
      (2) out of observation status for 30 days; and
      (3) reviewed and recommended for transfer/participation by the Psychiatric Review Team (PRT).

**NOTE**: Please refer to the Veterans Service Unit Manual (Attachment 7-A) for specific information in regard to the above.
10-10EZ – The application for health care services submitted to the Veterans Administration.

Assessment, Sanctioning, Community Resource Agent (ASCRA) – This is a Pennsylvania Board of Probation and Parole (PBPP) staff member that is dedicated to facilitating effective community resources for use by PBPP supervision staff.


Community Partner – Each facility must be registered as a community partner with the Department of Health Services (DHS) to successfully submit COMPASS applications electronically. A user agreement is necessary for each individual at the facility assigned to submitting these applications. Forms are available on the COMPASS website accessible via DOCNet.

COMPASS – Refers to the online application for assisting inmates in applying for Medicaid just prior to their release from a state correctional facility.

Criminogenic Risks and Needs – Criminogenic risks and needs are determined from assessment instruments such as the Level of Service Inventory – Revised (LSI-R), Criminal Sentiments Scale – Modified (CSS-M), Risk Screen Tool (RST), and the Texas Christian University Screen (TCU). These instruments provide the overall risk an inmate presents for reoffending and identifies the treatment/reentry needs of the inmate.

Department – The Pennsylvania Department of Corrections.

DL-200 – The application used by the Department and submitted to the Pennsylvania Department of Transportation (PennDOT) to assist inmates in renewing PA Driver’s Licenses or apply for Non-Driver Photo ID cards.

Employability Form (PA 1663) – This form accompanies the COMPASS (Medicaid) application and is signed by a medical doctor in regard to the employability status of inmates leaving our system. The form accompanies the inmate upon release so he/she can present it at the County Assistance Office (CAO) when following up on Medicaid eligibility.

Facility Reentry Coordinator – A Unit Manager or someone of higher rank assigned to oversee reentry at the facility. The staff member designated is responsible for coordinating a facility’s reentry programming both inside the facility and with community stakeholders and for ensuring that each inmate has a reentry plan established prior to release that maximizes facility and community resources in order to achieve a successful transition from the facility to the community.

Facility Veterans Coordinator (Replaces Veterans VA Coordinator) – The Facility Veterans Coordinator is a staff member assigned by the facility to assist inmate veterans with various veteran related services and support. He/she also coordinates contacts and veteran related information between the facility and the Statewide Veterans Coordinator at Central Office.
FDME – Final Discharge Maximum Expiration/Expired.

Finding a Place to Live – A workbook for inmates found on the Bureau of Treatment Services (BTS) website.

Handbook for Family and Friends – A booklet outlining guidelines for the friends and family members of the incarcerated inmate. The booklet is specific to Pennsylvania Department of Corrections and is maintained in the visiting room of all facilities.

Hard to Place (HTP) – This phrase refers to a group of inmates identified as hard to place into the community upon release due to specific criteria such as nature of offense, severe mental health issues, or no familial support.

Health Care Release Planner – An individual assigned to this position is responsible for the overall health care release managing of inmates. Staff will be assigned as the Health Care Release Planner at the discretion of the Corrections Health Care Administrator (CHCA)/Facility Manager.

Health Sustaining Medication Form (PA 1671) – This form accompanies the COMPASS (Medicaid) application and is filled in by facility health care staff. The form accompanies the inmate upon release so he/she can present it at the CAO when following up on Medicaid eligibility.

Initial Reception Committee (IRC) – A committee of staff generally composed of the Corrections Classification Program Manager (CCPM), a Unit Manager, custody staff, and other professional staff whose responsibility is to screen new receptions and assign them to appropriate housing and to a counselor.

Mentee – Refers to the inmate being mentored.

Mentor – An individual from a community or faith-based organization that agrees to guide and assist an inmate for eventual reintegration into the community.

Mentoring Coordinator – The individual assigned to oversee all mentoring programs at the facility. This role is typically undertaken by the Facility Reentry Coordinator.

Needs Assessment – The assessment facilitated in the Transitional Housing Unit (THU) to identify current reentry needs for an inmate preparing for release.

PennDOT Database – Each facility has a staff member assigned that has access to this database for printing restoration letters and checking for driving histories.

Pennsylvania County Resource Directories – Resource directories exist for each of the 67 Pennsylvania counties, they include contact information for agencies, organizations, and programs that provide services in drug and alcohol treatment, employment and vocational guidance, financial aid and insurance/medical assistance, food assistance, housing and transportation assistance, mental health assistance, parenting services, and education. These
directories are available via DOCNet for staff. Hard copies are maintained in the facility library for access by the population.

**PRDL** – A PennDOT computer application access under DOC APPS that consists of a listing of all inmates within two years or less of their minimum release date and the status of their Pennsylvania driver’s license.

**Pre-Release Application** – A computer application accessed under Inmate Apps that consists of the DL-200 PennDOT application form.

**Recidivism Risk Reduction Incentive (RRRI)** – A type of sentence for eligible inmates in which the court imposes a regular minimum and maximum sentence and an RRRI minimum sentence. Eligible inmates will have the opportunity to serve ¾ of the minimum sentence for sentences up to three years, and 5/6 of the minimum sentence for sentences greater than three years by completing recommended programs and maintaining positive adjustment.

**Reentry Parole Agent (RPA)** – The parole staff that is specifically assigned to the THU for focusing on inmate reentry.

**Reentry Planning Worksheet** – An individualized plan established by staff and the inmate prior to release that maximizes facility and community resources in order for the inmate to achieve a successful transition from the facility to the community.

**Reentry Services Office** – A centrally located site within a facility where reentry programming and activity is routinely held. This is also the location from which a Reentry Specialist operates in the absence of a THU.

**Reentry Specialist** – A corrections counselor/social worker assigned to the THU or the Reentry Services Office that specializes in reentry and release planning and carries a case load of inmates preparing for release.

**Reentry Team Member** – An individual employed by the Department and working at some capacity on release planning and/or within reentry or a community stakeholder routinely visiting the facility and contributing by way of workshop facilitation, a presentation, mentoring, etc. in regard to reentry and release planning for the inmates preparing to reintegrate back into the community.

**Referral Specialist** – An individual employed by the Department in a Community Corrections region with the job responsibility to evaluate inmates and parolees in state correctional facilities for placement in a Community Corrections Center.

**Referral Unit** – A unit within the Bureau of Community Corrections (BCC) that processes referrals from the Department and the PBPP for reentry services, residential services, group homes, Alcohol and Other Drug (AOD) treatment, mental health programming, veterans services, Parole Violator (PV) Centers, the State Intermediate Punishment (SIP) Program, Transitional Residents (Halfway Back), County Jail Work Release, County Jail Back on Track Services, and inmates with positive paroling actions but no home plan.
Regional Reentry Program Manager – A Central Office staff member assigned to the Reentry Office who is responsible for overseeing coordination of all Department reentry programming, grants, and initiatives.

SF180- DD214 - Official Military Record of Service.


SS-5 – The application form for applying for a duplicate Social Security card.

SSA-3288 – The Social Security Administration consent form that accompanies the SS-5 application for a duplicate card.

Statement of Intent – The agreement signed by the mentor that contains guidelines for effectively mentoring an inmate and covers the significant importance of confidentiality.

Successful Transitions Booklet – A publication created and maintained by the Reentry Office that consists of contact information for numerous community resources across the Commonwealth.

Transitional Housing Unit (THU) – A unit on the facility that is designated specifically for reentry preparation with inmates approaching their release date and reintegration back to their community.

Transitional Housing Unit (THU) Manager – A staff member assigned to oversee the daily operations of the THU.

Veterans Administration (VA) Guidebook – Reference book detailing benefits for the incarcerated veteran; it is maintained in the facility library for access to incarcerated veterans.

Veterans Coordinator – See “Facility Veterans Coordinator.”

Veterans Service Unit (VSU) – A housing unit on a facility that prepares veterans for successful release back into the community.