I. AUTHORITY

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

II. APPLICABILITY

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

III. POLICY

It is the policy of the Department to provide a system of data organization that provides a uniform document to efficiently manage and prescribe programming to the inmate while incarcerated. This document will serve as a reference guide to Department staff, the Pennsylvania Board of Probation and Parole (PBPP), the Courts, and the Board of Pardons.

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

11.4.1, Case Summary issued June 14, 2011, by Secretary John E. Wetzel

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 805, Approval for Pre-Release and Outside Work Programs

   b. DC-ADM 003, Release of Information

   c. DC-ADM 005, Collection of Inmate Debts

   d. 1.1.1, Policy Management System

   e. 1.2.1, Victim Services

   f. 7.2.1, Counseling Services

   g. 8.1.1, Community Corrections Centers

   h. 11.2.1, Reception and Classification

   i. 11.5.1, Records Office Operations

   j. 11.6.1, Sexually Violent Offender Registration

   k. 11.6.2, Act 57 DNA Data and Testing

   l. 13.2.1, Access to Health Care

   m. 13.8.1, Access to Mental Health Care

2. ACA Standards

   a. Adult Correctional Institutions: 4-4286, 4-4298, 4-4304

   b. Adult Community Residential Services: None
Policy Subject:  
Case Summary  
Policy Number:  
11.4.1  

Date of Issue:  
February 12, 2013  
Authority:  
Signature on File  
John E. Wetzel  
Effective Date:  
February 19, 2013  

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.
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Section 1 – General Procedures

This manual establishes procedures, sets forth the organizational framework, and describes criteria and content standards for preparation of various reports regarding inmate classification in the Department.

A. Functions and Objectives

1. The Classification Summary is a basic working document in correctional administration; it focuses on information that is generally verifiable as indicated on the face sheet, which provides a broad snapshot overview of the inmate’s classification information.

2. Information following the face sheet will focus on criminal behavior, facility adjustment, social history, family constellation, education and employment history, the inmate’s financial situations, mobility, martial history, domestic violence, substance abuse history, medical and mental health history, assault history, minor victims, escape history, and additional information.\(^1\)

3. An Integrated Classification Summary Application (ICSA) Classification Summary shall be created for every inmate committed to the Department. With the aid of the report, the Department and Pennsylvania Board of Probation and Parole (PBPP) may make appropriate decisions concerning facility placement, degree of custody required, facility and community supervision risk/need, program needs, parole recommendations, and special needs/conditions during the inmate’s incarceration, parole, and community supervision, and where to locate an absconder.

4. All information contained in the Classification Summary is to be regarded as confidential and may only be disseminated in accordance with Department policy DC-ADM 003, “Release of Information.”

5. The Classification Summary shall not be transmitted by email unless secure mail is used.

6. Other reports are developed outside of ICSA as outlined in this procedures manual. These reports serve specific purposes and provide additional information, observation of the inmate’s reaction to various situations, response to programming, and as an assessment of growth, self-responsibility, and overall prognosis.

B. Integrated Case Summary Application (ICSA)

1. The ICSA has been developed through collaboration with the PBPP and provides essential information that is readily available and presented in a readable fashion.

2. The ICSA shall be used to create specific types of inmate classification summaries (Initial, Parole Violator, Continuation, Classification Update, and Parole Summary).

\(^1\) 4-4286, 4-4298

Issued: 3/27/2014
Effective: 4/30/2014
3. The staff that are assigned to the case are responsible to secure, assimilate, and prepare the Classification Summary using the automated ICSA.

C. Content Requirements

1. Staff are required to meet or exceed the content requirements contained in the ICSA Help Sections within the application; these requirements are also contained in this manual.

2. Modifications to content requirements shall be promulgated by means of updates to the ICSA Help Sections in the application as needed, and by annual review and revision of this manual to incorporate modifications to the ICSA Help Sections.

3. Narrative form shall be used to enter data in text boxes in the ICSA application.

D. Quality Assurance

1. The Unit Manager or Counselor Supervisor is responsible for quality assurance for all Classification Summaries produced by the staff that he/she supervises. The Unit Manager or Counselor Supervisor shall ensure that:

   a. Classification Summaries have been completed timely;
   b. the correct document type has been selected;
   c. Records Office staff has cross referenced the inmate number, if applicable;
   d. an up to date photo displays on the Face Sheet;
   e. content requirements have been met or exceeded; and
   f. an updated Psychological Report has been prepared, if appropriate, for the ICSA document purpose.

2. The Corrections Counselor assigned to the case is responsible for:

   a. timely producing the Classification Summary of the correct type;
   b. ensuring that Records Office staff has cross referenced the inmate number, if applicable, before creating the Classification Summary;
   c. ensuring that an up to date photo displays on the Face Sheet;
   d. meeting or exceeding content requirements as specified in the ICSA Help Sections within the ICSA application for ICSA documents;
e. meeting or exceeding content requirements as specified in pertinent sections of this manual for other types of Classification Summaries; and

f. ensuring that an updated Psychological Report

E. ICSA Document Types

1. The Initial Classification Summary shall be created for all new commitments in accordance with Section 2 of this procedures manual, except as discussed in Subsection E.6. below.

2. The Parole Violator Summary shall be created for all re-committed Parole Violators in accordance with Section 3 of this procedures manual, except as discussed in Subsection E.6. below.

3. The Continuation Summary shall be created for all inmates that continue to a new number in accordance with Section 4 of this procedures manual, except as discussed in Subsection E.6. below.

4. Classification Summary Updates shall be created in accordance with Section 5 of this procedures manual.

   a. when the current offense charges change or there is a significant change to the sentence structure;

   b. when a Commutation Summary is required (see specific content requirements as outlined in Section 9 of this procedures manual);

   c. for lifers and long term inmates whose Department reception pre-dates the ICSA application and an ICSA document does not exist;

   d. when it is necessary to correct inaccurate data in a closed Initial or Continuation Summary;

   e. for Interstate Transfer Progress Reporting; and

   f. a Classification Summary update cannot be created to update a Parole Violator Summary.

5. The 13A, Parole Summary shall be created for all inmates that are being considered for Parole, Parole Review, and Re-Parole Review in accordance with Section 6 of this procedures manual. The 13A shall also be created in lieu of other document types under the following circumstances:

   a. Initial Classification Summary for cases being processed at the Diagnostic and Classification Centers (DCCs) as Short Min Cases (12 months or less remaining to expiration of the minimum sentence upon reception in the Department);
b. Parole Violator Summary with a review date within six months of the recommitment action; and

c. Continuation Summary with a minimum of six months or less;

6. For Parole Violators who are received with PBPP Board Actions to re-parole upon completion of a program:

a. Parole Violator Summary is required, but a 13A shall not be created because there is a paroling action; and

b. if the inmate is not re-paroled (for example, if the program is not completed) a new PBPP Board Action will be issued with a review date, and a 13A is required.

F. Additional Comments

Additional comments, in accordance with Section 7 of this procedures manual, shall be entered for a closed 13A to explain a content error or change in the recommendation.

G. Integrated Case Summary Reports

1. A non-confidential ICSA report is available and provides general information to all staff that have access to DOCNet in DOCInfo under Reports. This report displays all information except the Criminal History, Medical, and Psychological sections.

2. A confidential ICSA report is available to all staff that have access to the ICSA application in DOCInfo under Inmate Apps. This report displays all information including the Criminal History, Medical, and Psychological sections. The confidential report shall be included in staffing packets and Parole packets. The confidential report shall be filed in the DC-15, Inmate Records Jacket in accordance with Department policy 11.5.1, “Records Office Operations,” and in the DC-14, Counselor File in accordance with Department policy 7.2.1, “Counseling Services.”

3. For additional information, the Personal Data Questionnaire (Attachment 1-A) is placed into the inmate’s DC-15, for further reference and a copy to the DC-14. The psychological evaluation is filed in accordance with Department policy 13.8.1, “Access to Mental Health Care,” governing the maintenance of that information.

4. The ICSA Dashboard in DOCInfo displays all open ICSA documents that are owned by the application user.

5. The ICSA Tracking Report allows Administrative staff to view a list of all open ICSA reports sorted by facility or by specific staff and document type.
H. Document Types Other than ICSA

1. A County Parole Summary shall be created in accordance with Section 10 of this procedures manual.

2. A Court Ordered Evaluation shall be created in accordance with Section 12 of this procedures manual.
Section 2 – Initial Classification Summary

A. Current Offense

1. The first section in the drop down menu under ‘edit’ in the Integrated Case Summary Application (ICSA) is divided into two sub sections: Sentence Information and Official Version.

2. Sentence Information: Enter the controlling sentence structure, commitment offenses, minimum and maximum expiration dates, and Recidivism Risk Reduction Incentive (RRRI) minimum date (if applicable) in narrative form.

3. Official Version: An official version is required for crimes of violence and for Driving under the Influence (DUI) offenses, and must include the blood alcohol content (BAC) for DUI offenses. When the official version is required but unavailable for crimes of violence or for DUI offenses, a request to obtain the information must be forwarded to the facility Parole Office and documented in this section.
   a. Enter a synopsis of the official version. Do not copy the official version verbatim, but be specific and address who, what, when, where, how and why. Explain whether or not a weapon was present. Provide the name, age and relationship of co-defendants as well as the age and relationship of victims. Do not include names of victims. Include the official version of the original commitment offenses and probation violations (if applicable).
   b. If an official version was previously entered in Classification Narrative Summary (CNS) or ICMA, it will display in the application for review.
      1. If the previously entered official version is accurate and complete, the No Change Required box may be checked, and the previously entered official version will display in the ICSA report.
      2. If the previously entered official version needs to be edited, copy and paste procedures can be used to enter and display appropriate information in the ICSA report. Do not copy and paste the name of the person who previously entered the information.

B. Inmate Version

This is the second section in the drop down menu under ‘edit’ in the ICSA.

1. Inmate version in this context does not refer to a written version provided by the inmate as required by the Pennsylvania Board of Probation and Parole (PBPP) for parole processing. The Department has no similar requirement for the inmate to provide a written version, and it is not a requirement for completing a classification summary in ICSA.
2. Summarize the inmate’s version of the original commitment offense(s) and probation violation(s) (if applicable) as obtained during the in-person interview. Do not copy the inmate’s version verbatim from the inmate’s written version if one is available.

3. The reader should be able to understand the inmate’s point of view regarding what occurred during the offense(s) and during supervision violation(s).

4. The inmate’s version should be brief, but it should be specific and address who, what, when, where, how, why. When the inmate’s version differs from the Official Version, include the inmate’s explanation for the difference. If the inmate was under the influence of alcohol or other drugs, this information must be included in the inmate’s version. Include details regarding participation by co-defendants and the degree to which the inmate accepts responsibility for the offenses:
   a. accepts full responsibility and expresses remorse;
   b. accepts full responsibility but lacks remorse;
   c. accepts partial responsibility; or
   d. denies responsibility.

5. A new Inmate Version is required each time a document is created. Do not copy and paste a previous inmate version. Do not enter a statement indicating that the inmate reports no change to a previous version. A No Change Required box is not available in this section of the ICSA application. DO NOT TYPE “NO CHANGE REQUIRED” in this section.

C. Offense History

1. The third section in the drop down menu under ‘edit’ in the ICSA application is divided into two sub sections: Juvenile Offense History and Adult Offense History. Each subsection includes an area for numerical summarization and an area for information about specific offenses. Completion of the juvenile numerical summarization is not required except for Probation/Parole Revocations. Completion of the adult numerical summarization is not required except for Probation/Parole Revocations. The numerical entry of any probation or parole revocation in the adult numerical summary will result in a “V” in the corresponding problem area on the face sheet. Information that was previously entered in other applications will be pulled into the ICSA application, but some ICSA fields may be blank. Completing the blank criminal history information fields for offense information that is pulled into the ICSA application from other applications is not required. The following optional fields are available in the ICSA application for each specific offense: source of information, date of arrest, place of arrest, charge code, charge description, disposition and adjustment. However, the offense history may be summarized in both subsections as described below.
2. Juvenile Criminal History: Summarize the juvenile offense history including offenses and placements. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the offender’s history and offense pattern. The focus shall be on recording adjudications, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior juvenile criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

3. Adult Criminal History: Summarize the adult offense history including offenses and commitments. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording convictions, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior adult criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

4. Detailed offense history data that was entered in a previous document by the PBPP shall not be deleted by Department staff.

D. Facility Adjustment

1. The fourth section in the drop down menu under ‘edit’ in the ICSA is divided into two subsections: Move Information and Overall Adjustment.

2. Move Information: The moves in this subsection are pre-loaded from other applications. Any misconduct information that is inserted with the move information must be deleted. Describe significant behavior that resulted in a separation or transfer in the comment boxes.

3. Overall Adjustment: This subsection must address any adjustment issues during the inmate’s current commitment, as well as prior Department and county confinements. Clarification must be provided for any misconduct charge within the last year where the actual circumstances are not clear (for example, describe the contraband for the misconduct charge Possession of Contraband).
E. Social History

1. The fifth section in the drop down menu under ‘edit’ in the ICSA application is divided into nine sub sections: Family/Siblings, Education, Employment, Finance, Mobility, Marital, Domestic Violence, Drug and Alcohol, and Medical.

2. The Social History section should contain the required information in narrative form with special focus on any association of relationships and critical life events with criminal activity.

3. If information was previously entered in the CNS or ICSA social history sections, the information displays in a box at the top of each Social History section tab in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified.

4. If the information is accurate, it may be copied and pasted for display in the appropriate subsection of the Social History in the ICSA report.

5. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report.

6. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each subsection.

   a. Family/Siblings

      (1) In a narrative format, record the names of the inmate’s parents and describe their marital status throughout the inmate’s childhood. If the inmate was raised by someone other than the parents, record the name of the primary caregiver and the circumstances that resulted in the relationship. Describe any domestic violence that occurred between the parents/caregivers (domestic violence is violence between intimate partners). Identify any current paramours of parents or step-parents. Describe any verbal, physical, or sexual abuse that the inmate experienced while growing up, including the identity of the perpetrator and the inmate’s age at the time of the abuse.

      (2) In a narrative format, record the names of the inmate’s siblings and the relationship (biological, half sibling, step sibling, etc.). Describe any criminal record in the inmate’s family constellation including who was arrested and for what. Describe any substance abuse history in the family constellation including who abused what substances. Describe the inmate’s relationship with the family including how was the upbringing, were needs met, and with whom contact is maintained.
(3) Select from the drop down menu in the application the types of abuse suffered as a child if applicable.

b. Education
   (1) The focus should be on achievement in the school setting. Include the highest grade completed and the year. Identify the name and location of the high school if the inmate graduated. Identify the year if the inmate received a GED. Explain why the inmate left school or was ever expelled or suspended. If the inmate attended college, technical school or other specialized training, identify the name and location, dates attended and if the inmate graduated or completed the training. Include any educational/vocational participation in the institutional setting.
   (2) Complete the following data entry fields in addition to the text boxes: grade last completed and whether a GED has been obtained.
   (3) Select the appropriate radio buttons for continued education needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

c. Employment
   (1) Describe the inmate’s history of employment up to the time of arrest for the current commitment offenses with a special focus on the most recent employment. Identify the position held and related job duties. Include any military service and type of discharge, as well as any knowledge of job-related skills. If the inmate was not employed at the time of arrest, describe the source of financial support. Describe the inmate’s relationship with co-workers and supervisor, and identify if the inmate was ever fired or quit before being fired.
   (2) Complete the following data entry fields in addition to the text boxes: Employed six months or longer and needs continued vocational training.
   (3) Select the appropriate radio button for continued vocational needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

d. Finance

Identify whether the inmate received Public Assistance prior to incarceration and describe the reason if the inmate receives Social Security Income (SSI). Describe the inmate’s current significant assets or debts including personal property, savings/checking, fines, costs, restitution, bills, loans, and credit cards.
e. Mobility

Identify prior cities or states of residence and any arrests, convictions, or incarcerations in other states. Describe indications of a transient lifestyle and identify the place of residence at the time of arrest for the current commitment offenses. Note whether the inmate resided in a high crime area at the time of arrest.

f. Marital

(1) Describe the inmate’s marital status in narrative form:
   (a) single;
   (b) married: spouse’s name and years married;
   (c) separated: spouse’s name, years married, and when separated;
   (d) divorced: ex-spouse’s name, years married, and when divorced; or
   (e) widowed: spouse’s name, years married, and how and when deceased.

(2) Identify the inmate’s children: include names, dates of birth, other parents’ names, child support amount, current/arrears, where the children are living, and current relationship with the children.

(3) If the inmate is in a current relationship identify the partner’s current employment status and any arrests or drug/alcohol use. If the inmate is not in a current relationship, describe why the most recent significant relationship ended.

7. Domestic Violence

a. Identify and describe if the inmate ever physically, sexually or emotionally abused an intimate partner. If verification is needed to confirm or refute the existence of a possible history of domestic violence, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

b. Select the appropriate radio button for domestic violence history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected. If this problem area is “Not Verified”, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

c. If the inmate admits to domestic violence this is considered a “Verified” problem area.
d. Indicate if one or more of the following apply for intimate partner relationships to ensure that the inmate will receive Domestic Violence Protocol supervision by PBPP:

(1) instant offense in which the official version indicates a crime or crimes involving domestic violence against an intimate partner;

(2) past criminal conviction(s) involving domestic violence against an intimate partner;
(3) current Protection from Abuse (PFA) order or a PFA issued against the inmate at the time of arrest for the instant offense;

(4) inmate threatened or abused an intimate partner(s) while incarcerated or under supervision; and/or

(5) collateral sources (or the offender) disclose credible evidence of domestic violence.

8. Drug/Alcohol

a. Identify all substances the inmate has abused (including inhalants and solvents), the length of the substance abuse history, any treatment programs he/she attended in the community, and progress in the programs. Identify information that is self-reported.

(1) Drugs: Explain when use began, identify substances used, describe the amount, frequency, and method of use, and the date of last use.

(2) Alcohol: Explain when use began and the amount and frequency of use.

(3) Treatment: Describe where, when, intensity level (inpatient, out-patient, self help groups), and length of treatment programs that the inmate has participated in. Include whether participation was voluntary or court ordered, and successful or unsuccessful.

b. Data for Drug and Alcohol problem areas on the Face Sheet is pulled in from the Mainframe Classification Background Data fields. Data is entered in these mainframe fields during Pennsylvania Additive Classification Tool (PACT) classification and must be accurate at the time the ICSA document is being created.

9. Medical

Focus on the inmate's overall level of health and on any known functional medical problems that would impact facility placement or continuity of care upon transfer to Community Corrections or release to parole supervision:

a. describe any special medical needs or accommodations the inmate requires (such as work or housing restrictions, assistive devices, transportation issues, etc.);
b. include a statement regarding medication compliance if applicable. Do not include specific medications in this section;

c. include a statement regarding a history of mental health issues, hospitalizations and suicide attempts; and

d. DO NOT ENTER CONFIDENTIAL INFORMATION. The DC-481, Medical Release Summary will be provided to PBPP by the Medical Department, and the Psychological Report will be provided to PBPP in the parole packet.

F. Counselor Evaluation

1. The sixth section in the drop down menu under ‘edit’ in the ICSA application is divided into four subsections: Custody Level, Program Codes, Correctional Plan; Offense Summary; Boot Camp; and Mental Health.

2. If information was previously entered in the corresponding subsections, the information displays in a box at the top of each sub-section in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified. If the information is still accurate, it may be copied and pasted for display in the appropriate subsection of the Social History in the ICSA report.

3. If the information meets or exceeds the requirements below, the ‘No Change Required’ box may be checked and the information will display in the ICSA report. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

a. Custody Level, Program Codes, and Correctional Plan

   (1) Custody Level: Enter the current Custody Level from PACT and Custody Level override reason if applicable.

   (2) Program Codes: Identify Program Codes that are assigned in PACT. Provide an explanation if program code O, Z, or H is assigned.

   (3) Correctional Plan

      (a) The following sections of the Correctional Plan will be automatically displayed from the Unit Management System: Recommended Programs, Currently Enrolled, and Previously Enrolled.

      (b) Correctional Plan Comments: Observations regarding motivation to participate in recommended programs and attitude/behavioral changes that may be attributed to program participation should be recorded here.
(c) Counselor Evaluation Summary: Address security concerns, separations, special needs, and any information not included in other areas of the summary that will affect care, custody and control of the inmate.

b. Offense Summary

(1) Assault History

(a) Select the appropriate radio button for assault history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

i. Verified: The inmate must have been convicted of a violent offense as defined by the PBPP or have a history of institutional misconducts for assault or threatening behavior.

ii. Not Verified: Select “Not Verified” if neither requirement for “Verified” applies and DOC staff perceives that the inmate's offense had assault potential.

iii. Select “No” if none of the above applies.

(b) Describe any history of assaultive behaviors in the text box.

(2) Minor Victim

(a) Identify the age(s) of the minor victim(s), whether or not there have been multiple minor victims, the sex of the victim(s), and the inmate's relationship to victim(s) if known.

(b) Select the appropriate radio button for minor victim. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(3) Sex Offender History

(a) In narrative form, include present or past convictions for sexual offenses or sexual misconducts that are violations of the crimes code in the text box in this section.

(b) **Act 98 of 2000 (42 Pa. C.S. §9718.1)** requires that inmates convicted of crimes, committed on or after December 20, 2000, covered by this legislation must participate in Sex Offender Treatment in order to be eligible for parole. Inmates who have not participated are not eligible for parole. Indicate whether or not the inmate is participating in a sex offender program.
and accepts responsibility for his/her offense. Describe progress and recommendations for continued treatment.

(c) The Sex Offender Treatment Evaluation shall be forwarded by treatment provider to the facility parole office.

(d) Select the appropriate radio button for sex offender history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(4) Escape History

(a) Indicate the month and day if known. The year must be indicated.

(b) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(c) As defined by Department policy 11.2.1, “Reception and Classification,” Section 3, describe juvenile and adult behavior: any escape conviction (this does not imply that only convictions are reported; report documented behavior), juvenile escapes from secured facilities, escape related detainers, possession of implements of escape when intent and/or sufficient materials exist.

(5) Walk Off History

(a) Indicate the month and day if known. The year must be indicated.

(b) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(c) As defined by Department policy 11.2.1 Section 3, describe juvenile and adult behavior: absence from court ordered programs, fleeing and eluding, military Absent without Leave (AWOL), failure to appear in court, default appearance, failure to report on probation or parole, fugitive from justice warrants, absconding from bail, misconduct for CCC escape (no conviction), misconduct for failure to return from furlough (no conviction), walk away related detainers. Exclusions: Late return from furlough and Resisting Arrest.
c. Boot Camp

Statutory eligibility is automatically populated. Indicate whether or not the inmate desires to participate in the Boot Camp program and enter pertinent comments in the text box.

d. Mental Health

Information in this section is automatically pulled from the psychological assessment applications. The information shall be reviewed to ensure that the information is current, and Psychology staff shall be contacted if the information needs to be updated in the psychological assessment applications. If the information is outdated, the ICSA document shall not be routed or closed until the psychological information is updated. The psychiatric and suicide problem areas on the face sheet are updated (verified, not verified or blank) based on the information in the psychological applications.

G. Additional Information

The seventh section in the drop down menu under ‘edit’ in the ICSA application is divided into three subsections: Re-entry information, Act 84, and Act Related.

1. Re-entry information

   a. Face Sheet: Other problem areas – this entry should be limited text and identify any problem area that is not already identified on the Face Sheet if it could affect the parole decision or placement decision (for example: history of weapons, significant health issues). Text will display on the Face Sheet.

b. Documents Received

   (1) Drivers License: Check the box if the inmate has a driver’s license or non driver’s photo ID. Enter the driver’s license or non-driver’s photo ID number along with the state, the class of license and the country if any of the information is available.

   (2) Birth Certificate: Check the box if the inmate has a birth certificate.

   (3) Medical Assistance: Check the box if the inmate has applied for medical assistance.

   (4) SSI: Check the box if the inmate has applied for SSI.

   (5) SS Card: Check the box if the inmate has a Social Security Card.

   (6) Medical Release Applicant [formerly Act 84 or 2008 (compassionate release)]: check the box if the inmate has applied for Medical Release.
(7) Commutation: Check the box if the inmate has applied for commutation.

(8) Additional SS #’s: Enter any additional Social Security numbers that do not display on the face sheet. Once a number is added it can not be deleted or modified.

2. Act 84 documents: Act 84 Documents will be preloaded from the Inmate Records System, if available in the mainframe. If additional documents are in inmate’s files, check the appropriate box.

3. Act Related
   a. Megan’s Law Registration: This section must indicate whether or not Megan’s Law Registration applies to the inmate (refer to Department policy 11.6.1, “Sexually Violent Offender Registration” for the list of covered Megan’s Law offenses and registration procedures). If registration is required, enter the most recent date of registration.
   b. DNA Data and Testing
      (1) Act 57 of 2004 requires inmates convicted of certain offenses to submit a DNA sample.
      (2) Indicate if a DNA sample is required and the date it was drawn (if known), not drawn, or not required. Refer to Department policy 11.6.2, “DNA Data and Testing” for specifics on who are required to provide a DNA sample.
   c. Crime Victims Compensation
      (1) Certain inmates are required to pay a fee to the Crime Victim’s Compensation Fund (CVCF). The fee is imposed as part of the court costs for each sentencing event based upon criminal acts occurring after June 30, 1984. The amount of the fee varies depending upon the date the inmate committed the criminal act. No fee is imposed upon sentencing events based on criminal acts prior to June 30, 1984. Procedures regarding the collection of these fees are contained in Department policy DC-ADM 005, “Collection of Inmate Debts.” The status of the inmate’s CVCF and Victim/Witness Services Fund payments must be communicated to the PBPP. If the PBPP determines that a different amount is owed, that is the amount that will be collected.
      (2) Indicate the following: paid and date paid (if known), not paid, or not applicable. Partial payment will be entered as “not paid.”
   d. Victim Awareness Education: This data is populated from the DC-47C, Education and Vocational Cumulative Record. If data is not available to be populated from the DC-47C, indicate whether the inmate is required or not required to complete ACT 143

Issued: 2/12/2013
Effective: 2/19/2013
Victim Awareness Classes. **ACT 143** Victim Awareness Classes are required for the following offenses:

1. Murder of the Third Degree, 18 Pa. C.S.A. §§167; 2502(c);
2. Voluntary Manslaughter, 18 Pa. C.S.A. §§167; 2503;
3. Aggravated Assault, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 2702(a)(1) & (2);
5. Rape, 18 Pa. C.S.A. §§167; 3121;
7. Arson Endangering Persons, 18 Pa. C.S.A. §§167; 3301(a);
8. Burglary of a structure adapted for overnight accommodation in which at the time of the offense any person is present, 18 Pa. C.S.A. §§167; 3301(a);
9. Robbery graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 3701(a)(1)(i), (ii), or (iii);
10. Robbery of a Motor Vehicle, 18 Pa. C.S.A. §§167; 3702;
11. Sexual Assault, 18 Pa. C.S.A. §§167; 3124.1; and/or

e. **Drug Related Crime (Act 97):** Act 97 (1, 2, and 3) applies to the original commitment offense. Act 97 does not apply to Technical Parole Violations. The offenses covered under Act 97 relate to drugs only; these offenses do not include alcohol related offenses. Inmates that fit into any of the categories below will be required to pay for subsequent urine tests while under parole supervision. Check not applicable if none of these apply. It is possible for the inmate to be covered by Act 97-1, 97-2 and 97-3.

1. Act 97-1 applies to inmates who tested positive for non-prescribed drugs while incarcerated.
2. Act 97-2 applies to inmates who are serving a sentence arising from a conviction under the “Controlled Substance, Drug Device and Cosmetic Act.” The convictions must have occurred on or after February 20, 1990.
3. Act 97-3 applies to inmates who are serving a sentence arising from a conviction of a “drug related crime.” The convictions must have occurred on or after February 20, 1990.
A. Current Offense

The first section in the drop down menu under edit in the Integrated Case Summary Application (ICSA) application is divided into two sub sections: Sentence Information and Official Version.

1. Sentence Information: Enter the controlling sentence structure, commitment offenses, minimum and recomputed maximum expiration dates, and Recidivism Risk Reduction Incentive (RRRI) minimum date (if applicable), the reason for recommitment, length of back time, and the next review date in narrative form.

2. Official Version: An official version is required for crimes of violence and for Driving Under the Influence (DUI) offenses and must include the blood alcohol content (BAC) for DUI offenses. When the official version is required but unavailable for crimes of violence or for DUI offenses, a request to secure the information must be forwarded to the facility Parole Office and documented in this section.

   a. Enter a synopsis of the official version. Do not copy the official version verbatim, but be specific and address who, what, when, where, how and why. Explain whether or not a weapon was present. Provide the name, age and relationship of co-defendants as well as the age and relationship of victims. Do not include names of victims. Include the official version of the original commitment offenses and parole violations. Official versions of parole violations are derived from the PBPP 257 series. This information is automatically displayed from the PBPP 257 application. If the information is not displayed it should be requested from the facility Parole Office and can be entered manually.

   b. If an official version was previously entered in Classification Narrative Summary (CNS) or ICSA, it will display in the application for review.

      (1) If the previously entered official version is accurate and complete, the No Change Required box may be checked, and the previously entered official version will display in the ICSA report.

      (2) If the previously entered official version needs to be edited, copy and paste procedures can be used to enter and display appropriate information in the ICSA report. Do not copy and paste the name of the person who previously entered the information.

B. Inmate Version

This is the second section in the drop down menu under edit in the ICSA application.
1. Inmate version in this context does not refer to a written version provided by the inmate as required by the Pennsylvania Board of Probation and Parole (PBPP) for parole processing. The Department has no similar requirement for the inmate to provide a written version, and it is not a requirement for completing a classification summary in ICSA.

2. Summarize the inmate’s version of the original commitment offenses and parole violations as obtained during the in-person interview. Do not copy the inmate’s version verbatim from the inmate’s written version if one is available.

3. The reader should be able to understand the inmate’s point of view regarding what occurred during the offense and during supervision violations.

4. The inmate’s version should be brief, but it should be specific and address who, what, when, where, how, why. When the inmate’s version differs from the Official Version, include the inmate’s explanation for the difference. If the inmate was under the influence of alcohol or other drugs, this information must be included in the inmate version. Include details regarding participation by co-defendants and the degree to which the inmate accepts responsibility for the offenses:
   a. accepts full responsibility and expresses remorse;
   b. accepts full responsibility but lacks remorse;
   c. accepts partial responsibility;
   d. denies responsibility.

5. A new Inmate Version is required each time a document is created. Do not copy and paste a previous inmate version. Do not enter a statement indicating that the inmate reports no change to a previous version. A No Change Required box is not available in this section of the ICSA application. DO NOT TYPE “NO CHANGE REQUIRED” in this section.

C. Offense History

The third section in the drop down menu under edit in the ICSA application is divided into two sub sections: Juvenile Offense History and Adult Offense History. Each sub section includes an area for numerical summarization and an area for information about specific offenses. Completion of the juvenile numerical summarization is not required except for Probation/Parole Revocations. Completion of the adult numerical summarization is not required except for Probation/Parole Revocations. The numerical entry of any probation or parole revocation in the adult numerical summary will result in a “V” in the corresponding problem area on the face sheet. Information that was previously entered in other applications will be pulled into the ICSA application, but some ICSA fields may be blank. Completing the blank criminal history information fields for offense information that is pulled into the ICSA application from other applications is not required. The following optional fields are available
in the ICSA application for each specific offense: source of information, date of arrest, place of arrest, charge code, charge description, disposition and adjustment. However, the offense history may be summarized in both sub sections as described below.

1. Juvenile Criminal History: Summarize the juvenile offense history including offenses and placements. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the offender’s history and offense pattern. The focus shall be on recording adjudications, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior juvenile criminal history, enter "none" in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

2. Adult Criminal History: Summarize the adult offense history including offenses and commitments. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording convictions, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior adult criminal history, enter "none" in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

3. Detailed offense history data that was entered in a previous document by the PBPP shall not be deleted by Department staff.

**D. Facility Adjustment**

The fourth section in the drop down menu under edit in the ICSA application is divided into two sub sections: Move Information and Overall Adjustment.

1. Move Information: The moves in this sub section are pre-loaded from other applications. Any misconduct information that is inserted with the move information must be deleted. In the comment boxes describe significant behavior that resulted in a separation or transfer.

2. Overall Adjustment: This sub section must address any adjustment issues during the inmate’s current commitment as well as prior Department and county confinements. Describe significant patterns of misconduct and significant consequences (separations, transfers, etc.). Clarification must be provided for any misconduct charge within the last year where the actual circumstances are not clear (for example, describe the contraband for the misconduct charge Possession of Contraband).
E. Social History

The fifth section in the drop down menu under edit in the ICSA application is divided into nine sub sections: Family/Siblings, Education, Employment, Finance, Mobility, Marital, Domestic Violence, Drug and Alcohol, and Medical.

1. The Social History sections should contain the required information in narrative form with special focus on any association of relationships and critical life events with criminal activity.

2. If information was previously entered in the CNS or ICSA social history sections, the information displays in a box at the top of each Social History section tab in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified.

3. If the information is accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

4. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report.

5. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

a. Family/Siblings

   (1) In a narrative format, record the names of the inmate’s parents and describe their marital status throughout the inmate’s childhood. If the inmate was raised by someone other than the parents, record the name of the primary caregiver and the circumstances that resulted in the relationship. Describe any domestic violence that occurred between the parents/caregivers (domestic violence is violence between intimate partners). Identify any current paramours of parents or step-parents. Describe any verbal, physical, or sexual abuse that the inmate experienced while growing up, including the identity of the perpetrator and the inmate’s age at the time of the abuse.

   (2) In a narrative format, record the names of the inmate’s siblings and the relationship (biological, half sibling, step sibling, etc.). Describe any criminal record in the inmate’s family constellation including who was arrested and for what. Describe any substance abuse history in the family constellation including who abused what substances. Describe the inmate’s relationship with the family including how was the upbringing, were needs met, and with whom contact is maintained.
(3) Select from the drop down menu in the application the types of abuse suffered as a child if applicable.

b. Education

(1) The focus should be on achievement in the school setting. Include the highest grade completed and the year. Identify the name and location of the high school if the inmate graduated. Identify the year if the inmate received a GED. Explain why the inmate left school or was ever expelled or suspended. If the inmate attended college, technical school or other specialized training, identify the name and location, dates attended and if the inmate graduated or completed the training. Include any educational/vocational participation in the institutional setting.

(2) Complete the following data entry fields in addition to the text boxes: grade last completed and if a GED has been obtained.

(3) Select the appropriate radio buttons for continued education needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

c. Employment

(1) Describe the inmate’s history of employment up to the time of arrest for the current commitment offenses with a special focus on the most recent employment. Identify the position held and related job duties. Include any military service and type of discharge, as well as any knowledge of job-related skills. If the inmate was not employed at the time of arrest, describe the source of financial support. Describe the inmate’s relationship with co-workers and supervisor, and identify if the inmate was ever fired or quit before being fired.

(2) Complete the following data entry fields in addition to the text boxes: Employed six months or longer and needs continued vocational training.

(3) Select the appropriate radio button for continued vocational needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

d. Finance

Identify if the inmate received Public Assistance prior to incarceration and describe the reason if the inmate receives Social Security Income (SSI). Describe the inmate’s current significant assets or debts including personal property, savings/checking, fines, costs, restitution, bills, loans, and credit cards.
e. Mobility

Identify prior cities or states of residence and any arrests, convictions, or incarcerations in other states. Describe indications of a transient lifestyle and identify the place of residence at the time of arrest for the current commitment offenses. Note if the inmate resided in a high crime area at the time of arrest.

f. Marital

(1) Describe inmate’s marital status in narrative form:
   (a) single;
   (b) married: Spouse’s name and years married;
   (c) separated: spouse’s name, years married, and when separated;
   (d) divorced: ex-spouse’s name, years married, and how and when deceased;
   (e) widowed: spouse’s name, years married, and how and when deceased.

(2) Identify the inmate’s children: include names, dates of birth, other parents’ names, child support amount, current/arrears, where are children living, and current relationship with the children.

(3) If the inmate is in a current relationship identify the partner’s current employment status and any arrests or drug/alcohol use. If the inmate is not in a current relationship, describe why the most recent significant relationship ended.

g. Domestic Violence

(1) Identify and describe if the inmate ever physically, sexually or emotionally abused an intimate partner. If verification is needed to confirm or refute the existence of a possible history of domestic violence, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

(2) Select the appropriate radio button for domestic violence history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected. If this problem area is “Not Verified”, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

(3) If the inmate admits to domestic violence this is considered a “Verified” problem area.
(4) Indicate if one or more of the following apply for intimate partner relationships to ensure the inmate will receive Domestic Violence Protocol supervision by PBPP:

(a) instant offense in which the official version indicates a crime or crimes involving domestic violence against an intimate partner;

(b) a past criminal conviction(s) involving domestic violence against an intimate partner;

(c) current Protection from Abuse (PFA) order or a PFA issued against the inmate at the time of arrest for the instant offense;

(d) inmate threatened or abused an intimate partner(s) while incarcerated or under supervision; and

(e) collateral sources (or the offender) disclose credible evidence of domestic violence.

h. Drug/Alcohol

(1) Identify all substances the inmate has abused (including inhalants and solvents), the length of the substance abuse history, any treatment programs attended in the community, and progress in the programs. Identify information that is self-reported.

(a) Drugs: Explain when use began, identify substances used, describe the amount, frequency, and method of use, and the date of last use.

(b) Alcohol: Explain when use began and the amount and frequency of use.

(c) Treatment: Describe where, when, intensity level (inpatient, out-patient, self help groups), and length of treatment programs that the inmate has participated in. Include whether participation was voluntary or court ordered, and successful or unsuccessful.

(2) Data for Drug and Alcohol problem areas on the Face Sheet is pulled in from the Mainframe Classification Background Data fields. Data is entered in these mainframe fields during Pennsylvania Additive Classification Tool (PACT) classification and must be accurate at the time the ICSA document is being created.

i. Medical

Focus on the inmate’s overall level of health and on any known functional medical problems that would impact facility placement or continuity of care upon transfer to Community Corrections or release to parole supervision.
(1) Describe any special medical needs or accommodations the inmate requires (such as work or housing restrictions, assistive devices, transportation issues, etc.).

(2) Include a statement regarding medication compliance if applicable. Do not include specific medications in this section.

(3) Include a statement regarding a history of mental health issues, hospitalizations and suicide attempts.

(4) DO NOT ENTER CONFIDENTIAL INFORMATION. The DC-481, Medical Release Summary will be provided to PBPP by the medical department, and the Psychological Report will be provided to PBPP in the parole packet.

F. Counselor Evaluation

The sixth section in the drop down menu under edit in the ICSA application is divided into four sub sections: Custody Level, Program Codes, and Correctional Plan; Offense Summary; Boot Camp; and Mental Health.

1. If information was previously entered in the corresponding sub-sections, the information displays in a box at the top of each sub-section in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified. If the information is still accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

2. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

a. Custody Level, Program Codes, and Correctional Plan

   (1) Custody Level: Enter the current Custody Level from PACT and Custody Level override reason if applicable.

   (2) Program Codes: Identify Program Codes that are assigned in PACT. Provide an explanation if program code O, Z, or H is assigned.

   (3) Correctional Plan

      (a) The following sections of the Correctional Plan will be automatically displayed from the Unit Management System: Recommended Programs, Currently Enrolled, and Previously Enrolled.
(b) Correctional Plan Comments: Observations regarding motivation to participate in recommended programs and attitude/behavioral changes that may be attributed to program participation should be recorded here.

(c) Counselor Evaluation Summary: Address security concerns, separations, special needs, and any information not included in other areas of the summary that will affect care, custody and control of the inmate.

b. Offense Summary

(1) Assault History

(a) Select the appropriate radio button for assault history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

i. Verified: The inmate must have been convicted of a violent offense as defined by the PBPP or have a history of institutional misdeeds for assault or threatening behavior.

ii. Not Verified: Select “Not Verified” if neither requirement for “Verified” applies and DOC staff perceives that the inmate’s offense had assault potential.

iii. Select “No” if none of the above applies.

(b) Describe any history of assaultive behaviors in the text box.

(2) Minor Victim

(a) Identify the age(s) of the inmate’s minor victim(s), whether or not there have been multiple minor victims, the sex of the victim(s), and the inmate’s relationship to victim(s) if known.

(b) Select the appropriate radio button for minor victim. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(3) Sex Offender History

(a) In narrative form, include present or past convictions for sexual offenses or sexual misconducts that are violations of the crimes code in the text box in this section.
(b) **Act 98 of 2000 (42 Pa. C.S. §9718.1)** requires inmates convicted of crimes, committed on or after December 20, 2000, covered by this legislation to participate in Sex Offender Treatment to be eligible for parole. Inmates who have not participated are not eligible for parole. Indicate whether or not the inmate is participating in a sex offender program and accepts responsibility for his/her offense. Describe progress and recommendations for continued treatment.

(c) The Sex Offender Treatment Evaluation shall be forwarded by treatment provider to the facility parole office.

(d) Select the appropriate radio button for sex offender history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(4) Escape History

(a) Indicate the month and day if known. The year must be indicated.

(b) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(c) As defined by Department policy **11.2.1, “Reception and Classification,” Section 3**, describe juvenile and adult behavior: any escape conviction (this does not imply that only convictions are reported; report documented behavior), juvenile escapes from secured facilities, escape related detainers, possession of implements of escape when intent and/or sufficient materials exist.

(5) Walk Off History

(a) Indicate the month and day if known. The year must be indicated.

(b) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(c) As defined by Department policy **11.2.1 Section 3**, describe juvenile and adult behavior: Absence from court ordered programs, fleeing and eluding, military AWOL, failure to appear in court, default appearance, failure to report on probation or parole, fugitive from justice warrants, absconding from bail, misconduct for CCC escape (no conviction), misconduct for
failure to return from furlough (no conviction), walk away related detainers. Exclusions: Late return from furlough and Resisting Arrest.

c. Boot Camp: Statutory eligibility is automatically populated. Indicate whether or not the inmate desires to participate in the Boot Camp program and enter pertinent comments in the text box.

d. Mental Health: Information in this section is automatically pulled from the psychological assessment applications. The information shall be reviewed to ensure that the information is current, and Psychology staff shall be contacted if the information needs to be updated in the psychological assessment applications. If the information is outdated, the ICSA document shall not be routed or closed until the psychological information is updated. The psychiatric and suicide problem areas on the face sheet are updated (verified, not verified or blank) based on the information in the psychological applications.

G. Additional Information

The seventh section in the drop down menu under edit in the ICSA is divided into three sub sections: Re-entry information, Act 84, and Act Related.

1. Re-entry Information

a. Face Sheet: Other problem areas - This entry should be limited text and identify any problem area that is not already identified on the Face Sheet if it could affect the parole decision or placement decision (for example: history of weapons, significant health issues). Text will display on the Face Sheet.

b. Documents Received

   (1) Drivers License: Check the box if the inmate has a driver’s license or non driver’s photo ID. Enter the driver’s license or non-driver’s photo ID number along with the state, the class of license and the country if any of the information is available.

   (2) Birth Certificate: Check the box if the inmate has a birth certificate.

   (3) Medical Assistance: Check the box if the inmate has applied for medical assistance.

   (4) SSI: Check the box if the inmate has applied for SSI.

   (5) SS Card: Check the box if the inmate has a Social Security Card.

   (6) Medical Release Applicant [formerly ACT 84 of 2008 (compassionate release)]: check the box if the inmate has applied for Medical Release.
(7) Commutation: Check the box if inmate has applied for commutation.

(8) Additional SS #’s: Enter any additional Social Security numbers that do not display on the face sheet. Once a number is added it can not be deleted or modified.

2. Act 84 documents: ACT 84 Documents will be preloaded from the Inmate Records System if available in the mainframe. If additional documents are in inmate’s files, check the appropriate box.

3. Act Related
   a. Megan’s Law Registration: This section must indicate whether or not Megan’s Law Registration applies to the offender (See Department Policy 11.6.1 “Sexually Violent Offender Registration” for the list of covered Megan’s Law offenses and registration procedures). If registration is required, enter the most recent date of registration.
   b. DNA Data and Testing
      (1) Act 57 of 2004 requires inmates convicted of certain offenses to submit a DNA sample.
      (2) Indicate if a DNA sample is required and the date it was drawn (if known), not drawn, or not required. See 11.6.2 DNA Data and Testing for specifics on who is required to provide a DNA Sample.
   c. Crime Victims Compensation
      (1) Certain inmates are required to pay a fee to the Crime Victim’s Compensation Fund (CVCF). The fee is imposed as part of the court costs for each sentencing event based upon criminal acts occurring after June 30, 1984. The amount of the fee varies depending upon the date the inmate committed the criminal act. No fee is imposed upon sentencing events based on criminal acts prior to June 30, 1984. Procedures regarding the collection of these fees are in Department policy DC-ADM 005, “Collection of Inmate Debts.” The status of the inmate’s CVCF and Victim/Witness Services Fund payments must be communicated to the PBPP. If the PBPP determines that a different amount is owed, that is the amount that will be collected.
      (2) Indicate the following: paid and date paid (if known), not paid, or not applicable. Partial payment will be entered as “not paid”.
   d. Victim Awareness Education: This data is populated from the DC-47C, Education and Vocational Cumulative Record. If data is not available to be populated from DC-47C, indicate whether the inmate is required or not required to complete ACT 143 Victim Awareness Classes. ACT 143 Victim Awareness Classes are required for the following offenses:
(1) Murder of the Third Degree, 18 Pa. C.S.A. §§167; 2502(c);

(2) Voluntary Manslaughter, 18 Pa. C.S.A. §§167; 2503;

(3) Aggravated Assault, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 2702(a)(1) & (2);

(4) Kidnapping, 18 Pa. C.S.A. §§167, 2901;

(5) Rape, 18 Pa. C.S.A. §§167; 3121;

(6) Involuntary Deviate Sexual Intercourse, 18 Pa. C.S.A. §§167; 3123;

(7) Arson Endangering Persons, 18 Pa. C.S.A. §§167; 3301(a);

(8) Burglary of a structure adapted for overnight accommodation in which at the time of the offense any person is present, 18 Pa. C.S.A. §§167; 3502;

(9) Robbery, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 3701(a)(1)(i), (ii), or (III);

(10) Robbery of a Motor Vehicle, 18 Pa. C.S.A. §§167; 3702;

(11) Sexual Assault, 18 Pa. C.S.A. §§167; 3124.1; or


e. Drug Related Crime (Act 97): Act 97 (1, 2, and 3) applies to the original commitment offense. Act 97 does not apply to Technical Parole Violations. The offenses covered under Act 97 relate to drugs only; these offenses do not include alcohol related offenses. Inmates that fit into any of the categories below will be required to pay for subsequent urine tests while under parole supervision. Check not applicable if none of these apply. It is possible for the inmate to be covered by Act 97-1, 97-2, and 97-3.

(1) Act 97-1 applies to inmates who tested positive for non-prescribed drugs while incarcerated.

(2) Act 97-2 applies to inmates who are serving a sentence arising from a conviction under the “Controlled Substance, Drug Device and Cosmetic Act.” The convictions must have occurred on or after February 20, 1990.

(3) Act 97-3 applies to inmates who are serving a sentence arising from a conviction of a “drug related crime.” The convictions must have occurred on or after February 20, 1990.
H. Supervision History

Supervision History is the eighth section in the drop down menu under edit in the ICSA application. The data for supervision history will be pre-loaded from the PBPP 257 application. If it is not available in the application the screen has an “add” feature which will allow the user to enter data from reports that are obtained from prior Department/PBPP records.

I. Board Actions and Stipulations

1. Board Actions and Stipulations is the ninth section in the drop down menu under edit in the ICSA application.

2. The Board Action history will be listed chronologically with the date and decision of each Board Action displayed. This data will be pre-loaded from the ICSA application and will display in the report. A hyperlink is provided for PBPP use in another document type to view and select previous stipulations from the selected Board Action. Department staff will take no action in this section.

3. Do not include any Stipulations in any ICSA document. YES, NO or Other should not be selected under Status, and no comments should be entered in the Comments field in this section.
Section 4 – Continuation Classification Summary

A. Current Offense

The first section in the drop down menu under edit in the ICSA application is divided into two sub sections: Sentence Information and Official Version.

1. Sentence Information: Enter the controlling sentence structure, commitment offenses, minimum and maximum expiration dates, and Recidivism Risk Reduction Incentive (RRRI) minimum date (if applicable) in narrative form.

   a. Begin with a brief narrative of the sentence from which the inmate has continued.

   b. If the continuation is from a recommitment as a CPV, include the following in the narrative:

      (1) recommitted to serve back time or maximum expiration;

      (2) prior offense and sentence structure;

      (3) the date the inmate paroled or maxed from this sentence;

      (4) previous DOC number and current Department number; and

      (5) commitment name change (if applicable).

2. Official Version: An official version is required for crimes of violence and for Driving Under the Influence (DUI) offenses and must include the blood alcohol content (BAC) for DUI offenses. When the official version is required but unavailable for crimes of violence or for DUI offenses, a request to secure the information must be forwarded to the Institutional Parole Office and documented in this section.

   a. Enter a synopsis of the official version of the continuation offense. Do not copy the official version verbatim, but be specific and address who, what, when, where, how and why. Explain whether or not a weapon was present. Provide the name, age and relationship of co-defendants as well as the age and relationship of victims. Do not include names of victims. Include the official version of the original commitment offenses and probation violations (if applicable).

   b. If an official version was previously entered in Classification Narrative Summary (CNS) or ICSA, it will display in the application for review.

      (1) If the previously entered official version is accurate and complete, the No Change Required box may be checked, and the previously entered official version will display in the ICSA report.
(2) If the previously entered official version needs to be edited, copy and paste procedures can be used to enter and display appropriate information in the ICSA report. Do not copy and paste the name of the person who previously entered the information.

B. Inmate Version

This is the second section in the drop down menu under edit in the ICSA application.

1. Inmate version in this context does not refer to a written version provided by the inmate as required by PBPP for parole processing. The Department has no similar requirement for the inmate to provide a written version, and it is not a requirement for completing a classification summary in ICSA.

2. Summarize the inmate’s version of the continuation commitment offenses and probation violations (if applicable) as obtained during the in-person interview. Do not copy the inmate’s version verbatim from the inmate’s written version if one is available.

3. The reader should be able to understand the inmate’s point of view regarding what occurred during the offense and during supervision violations.

4. The inmate’s version should be brief, but it should be specific and address who, what, when, where, how, why. When the inmate’s version differs from the Official Version, include the inmate’s explanation for the difference. If the inmate was under the influence of alcohol or other drugs, this information must be included in the inmate version. Include details regarding participation by co-defendants and the degree to which the inmate accepts responsibility for the offenses:
   a. accepts full responsibility and expresses remorse;
   b. accepts full responsibility but lacks remorse;
   c. accepts partial responsibility; or
   d. denies responsibility.

5. A new Offender Version is required each time a document is created. Do not copy and paste a previous inmate version. Do not enter a statement indicating that the inmate reports no change to a previous version. A No Change Required box is not available in this section of the ICSA application. DO NOT TYPE “NO CHANGE REQUIRED” in this section.

C. Offense History

The third section in the drop down menu under edit in the ICSA application is divided into two sub sections: Juvenile Offense History and Adult Offense History. Each sub section
includes an area for numerical summarization and an area for information about specific offenses. Completion of the juvenile numerical summarization is not required except for Probation/Parole Revocations. Completion of the adult numerical summarization is not required except for Probation/Parole Revocations. The numerical entry of any probation or parole revocation in the adult numerical summary will result in a “V” in the corresponding problem area on the face sheet. Information that was previously entered in other applications will be pulled into the ICSA application, but some ICSA fields may be blank. Completing the blank criminal history information fields for offense information that is pulled into the ICSA application from other applications is not required. The following optional fields are available in the ICSA application for each specific offense: source of information, date of arrest, place of arrest, charge code, charge description, disposition and adjustment. However, the offense history may be summarized in both sub sections as described below.

1. Juvenile Criminal History: Summarize the juvenile offense history including offenses and placements. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording adjudications, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. If the inmate has no prior juvenile criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

2. Adult Criminal History: Summarize the adult offense history including offenses and commitments. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording convictions, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. If the inmate has no prior adult criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

3. Detailed offense history data that was entered in a previous document by the PBPP shall not be deleted by Department staff.

D. Facility Adjustment

The fourth section in the drop down menu under edit in the ICSA application is divided into two sub sections: Move Information and Overall Adjustment.
1. Move Information: The moves in this sub section are pre-loaded from other applications. Any misconduct information that is inserted with the move information must be deleted. In the comment boxes describe significant behavior that resulted in a separation or transfer.

2. Overall Adjustment: This sub section must address any adjustment issues during the inmate’s current commitment as well as prior Department and county confinements. Describe significant patterns of misconduct and significant consequences (separations, transfers, etc.). Clarification must be provided for any misconduct charge within the last year where the actual circumstances are not clear (for example, describe the contraband for the misconduct charge Possession of Contraband).

E. Social History

The fifth section in the drop down menu under edit in the ICSA application is divided into nine sub sections: Family/Siblings, Education, Employment, Finance, Mobility, Marital, Domestic Violence, Drug and Alcohol, and Medical.

1. The Social History sections should contain the required information in narrative form with special focus on any association of relationships and critical life events with criminal activity.

2. If information was previously entered in the CNS or ICSA social history sections, the information displays in a box at the top of each Social History section tab in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified.

3. If the information is accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

4. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report.

5. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

   a. Family/Siblings

      (1) In a narrative format, record the names of the inmate’s parents and describe their marital status throughout the inmate’s childhood. If the inmate was raised by someone other than the parents, record the name of the primary caregiver and the circumstances that resulted in the relationship. Describe any domestic violence that occurred between the parents/caregivers (domestic violence is violence between intimate partners). Identify any current paramours of parents or step-parents. Describe any verbal, physical, or sexual abuse that the inmate experienced while growing up, including the identity of the perpetrator and the inmate’s age at the time of the abuse.
(2) In a narrative format, record the names of the inmate’s siblings and the relationship (biological, half sibling, step sibling, etc.). Describe any criminal record in the inmate’s family constellation including who was arrested and for what. Describe any substance abuse history in the family constellation including who abused what substances. Describe the inmate’s relationship with the family including how was the upbringing, were needs met, and with whom contact is maintained.

(3) Select from the drop down menu in the application the types of abuse suffered as a child if applicable.

b. Education

(1) The focus should be on achievement in the school setting. Include the highest grade completed and the year. Identify the name and location of the high school if the inmate graduated. Identify the year if the inmate received a GED. Explain why the inmate left school or was ever expelled or suspended. If the inmate attended college, technical school or other specialized training, identify the name and location, dates attended and if the inmate graduated or completed the training. Include any educational/vocational participation in the facility setting.

(2) Complete the following data entry fields in addition to the text boxes: grade last completed and if a GED has been obtained.

(3) Select the appropriate radio buttons for continued education needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

c. Employment

(1) Describe the inmate’s history of employment up to the time of arrest for the current commitment offenses with a special focus on the most recent employment. Identify the position held and related job duties. Include any military service and type of discharge, as well as any knowledge of job-related skills. If the inmate was not employed at the time of arrest, describe the source of financial support. Describe the inmate’s relationship with co-workers and supervisor, and identify if the inmate was ever fired or quit before being fired.

(2) Complete the following data entry fields in addition to the text boxes: Employed six months or longer and needs continued vocational training.

(3) Select the appropriate radio button for continued vocational needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.
d. Finance: Identify if the inmate received Public Assistance prior to incarceration and describe the reason if the inmate receives Social Security Income (SSI). Describe the inmate’s current significant assets or debts including personal property, savings/checking, fines, costs, restitution, bills, loans, and credit cards.

e. Mobility: Identify prior cities or states of residence and any arrests, convictions, or incarcerations in other states. Describe indications of a transient lifestyle and identify the place of residence at the time of arrest for the current commitment offenses. Note if the inmate resided in a high crime area at the time of arrest.

f. Marital

(1) Describe inmate’s marital status in narrative form:

   (a) single;
   (b) married: Spouse’s name and years married;
   (c) separated: Spouse’s name, years married, and when separated;
   (d) divorced: Ex-spouse’s name, years married, and when divorced; and
   (e) widowed: spouse’s name, years married, and how and when deceased.

(2) Identify the inmate’s children: include names, dates of birth, other parents’ names, child support amount, current/arrears, where are children living, and current relationship with the children.

(3) If the inmate is in a current relationship identify the partner’s current employment status and any arrests or drug/alcohol use. If the inmate is not in a current relationship, describe why the most recent significant relationship ended.

g. Domestic Violence

(1) Identify and describe if the inmate ever physically, sexually or emotionally abused an intimate partner. If verification is needed to confirm or refute the existence of a possible history of domestic violence, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

(2) Select the appropriate radio button for domestic violence history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected. If this problem area is “Not Verified”, send a request to the facility/parole office for a special field report to determine the nature of the
possible domestic violence. This request must be documented in the comments box.

(3) If the inmate admits to domestic violence this is considered a "Verified" problem area.

(4) Indicate if one or more of the following apply for intimate partner relationships to ensure the inmate will receive Domestic Violence Protocol supervision by PBPP:

(a) instant offense in which the official version indicates a crime or crimes involving domestic violence against an intimate partner;

(b) a past criminal conviction(s) involving domestic violence against an intimate partner;

(c) current Protection from Abuse (PFA) order or a PFA issued against the offender at the time of arrest for the instant offense;

(d) inmate threatened or abused an intimate partner(s) while incarcerated or under supervision; and/or

(e) collateral sources (or the inmate) disclose credible evidence of domestic violence.

h. Drug/Alcohol

(1) Identify all substances the inmate has abused (including inhalants and solvents), the length of the substance abuse history, any treatment programs attended in the community, and progress in the programs. Identify information that is self-reported.

(a) Drugs: Explain when use began, identify substances used, describe the amount, frequency, and method of use, and the date of last use.

(b) Alcohol: Explain when use began and the amount and frequency of use.

(c) Treatment: Describe where, when, intensity level (inpatient, out-patient, self help groups), and length of treatment programs that the inmate has participated in. Include whether participation was voluntary or court ordered, and successful or unsuccessful.

(2) Data for Drug and Alcohol problem areas on the Face Sheet is pulled in from the Mainframe Classification Background Data fields. Data is entered in these mainframe fields during Pennsylvania Additive Classification Tool (PACT) classification and must be accurate at the time the ICSA document is being created.
i. Medical

Focus on the inmate’s overall level of health and on any known functional medical problems that would impact facility placement or continuity of care upon transfer to Community Corrections or release to parole supervision.

(1) Describe any special medical needs or accommodations the inmate requires (such as work or housing restrictions, assistive devices, transportation issues, etc.).

(2) Include a statement regarding medication compliance if applicable. Do not include specific medications in this section.

(3) Include a statement regarding a history of mental health issues, hospitalizations and suicide attempts.

(4) DO NOT ENTER CONFIDENTIAL INFORMATION. The DC-481, Medical Release Summary will be provided to the PBPP by the medical department, and the Psychological Report will be provided to PBPP in the parole packet.

F. Counselor Evaluation

The sixth section in the drop down menu under edit in the ICSA application is divided into four sub sections: Custody Level, Program Codes, and Correctional Plan; Offense Summary; Boot Camp; and Mental Health.

1. If information was previously entered in the corresponding sub-sections, the information displays in a box at the top of each sub-section in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified. If the information is still accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

2. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report. Additional information for these sections must be gathered from the offender and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

a. Custody Level, Program Codes, and Correctional Plan

   (1) Custody Level: Enter the current Custody Level from PACT and Custody Level override reason if applicable.

   (2) Program Codes: Identify Program Codes that are assigned in PACT. Provide an explanation if program code O, Z, or H is assigned.

   (3) Correctional Plan
a. The following sections of the Correctional Plan will be automatically displayed from the Unit Management System: Recommended Programs, Currently Enrolled, and Previously Enrolled.

b. Correctional Plan Comments: Observations regarding motivation to participate in recommended programs and attitude/behavioral changes that may be attributed to program participation should be recorded here.

c. Counselor Evaluation Summary: Address security concerns, separations, special needs, and any information not included in other areas of the summary that will affect care, custody and control of the inmate.

b. Offense Summary

(1) Assault History

(a) Select the appropriate radio button for assault history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

i. Verified: The inmate must have been convicted of a violent offense as defined by the PBPP or have a history of facility misconducts for assault or threatening behavior.

ii. Not Verified: Select “Not Verified” if neither requirement for “Verified” applies and Department staff perceives that the inmate’s offense had assault potential.

iii. Select “No” if none of the above applies.

(b) Describe any history of assaultive behaviors in the text box.

(2) Minor Victim

(a) Identify the age(s) of the inmate’s minor victim(s), whether or not there have been multiple minor victims, the sex of the victim(s), and the inmate’s relationship to victim(s) if known.

(b) Select the appropriate radio button for minor victim. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.
c. Sex Offender History

(1) In narrative form, include present or past convictions for sexual offenses or sexual misconducts that are violations of the crimes code in the text box in this section.

(2) **Act 98 of 2000 (42 Pa. C.S. §9718.1)** requires inmates convicted of crimes, committed on or after December 20, 2000, covered by this legislation to participate in Sex Offender Treatment to be eligible for parole. Inmates who have not participated are not eligible for parole. Indicate whether or not the inmate is participating in a sex offender program and accepts responsibility for his/her offense. Describe progress and recommendations for continued treatment.

(3) The Sex Offender Treatment Evaluation shall be forwarded by treatment provider to the facility parole office.

(4) Select the appropriate radio button for sex offender history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

d. Escape History

(1) Indicate the month and day if known. The year must be indicated.

(2) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(3) As defined by Department policy 11.2.1, “Reception and Classification,” Section 3, describe juvenile and adult behavior: any escape conviction (this does not imply that only convictions are reported; report documented behavior), juvenile escapes from secured facilities, escape related detainers, possession of implements of escape when intent and/or sufficient materials exist.

e. Walk Off History

(1) Indicate the month and day if known. The year must be indicated.

(2) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(3) As defined by Department policy 11.2.1 Section 3, describe juvenile and adult behavior: Absence from court ordered programs, fleeing and eluding, military AWOL, failure to appear in court, default appearance, failure to report on probation or parole, fugitive from justice warrants, absconding from bail, misconduct for CCC escape (no conviction), misconduct for failure to return from
f. Boot Camp: Statutory eligibility is automatically populated. Indicate whether or not the inmate desires to participate in the Boot Camp program and enter pertinent comments in the text box.

g. Mental Health: Information in this section is automatically pulled from the psychological assessment applications. The information shall be reviewed to ensure that the information is current, and Psychology staff shall be contacted if the information needs to be updated in the psychological assessment applications. If the information is outdated, the ICSA document shall not be routed or closed until the psychological information is updated. The psychiatric and suicide problem areas on the face sheet are updated (verified, not verified or blank) based on the information in the psychological applications.

G. Additional Information

The seventh section in the drop down menu under edit in the ICSA application is divided into three sub sections: Re-entry information, Act 84, and Act Related.

1. Re-Entry Information

a. Face Sheet: Other problem areas- This entry should be limited text and identify any problem area that is not already identified on the Face Sheet if it could affect the parole decision or placement decision (for example: history of weapons, significant health issues). Text will display on the Face Sheet.

b. Documents Received:

(1) Drivers License: Check the box if the inmate has a driver’s license or non driver’s photo ID. Enter the driver’s license or non-driver’s photo ID number along with the state, the class of license and the country if any of the information is available.

(2) Birth Certificate: Check the box if the inmate has a birth certificate.

(3) Medical Assistance: Check the box if the inmate has applied for medical assistance.

(4) SSI: Check the box if the inmate has applied for SSI.

(5) SS Card: Check the box if the inmate has a Social Security Card.

(6) Medical Release Applicant [formerly ACT 84 of 2008 (compassionate release)]: check the box if the inmate has applied for Medical Release.
(7) Commutation: Check the box if inmate has applied for commutation.

(8) Additional SS #’s: Enter any additional Social Security numbers that do not display on the face sheet. Once a number is added it cannot be deleted or modified.

2. Act 84 documents: ACT 84 Documents will be preloaded from the Inmate Records System if available in the mainframe. If additional documents are in inmate’s files, check the appropriate box.

3. Act Related

a. Megan’s Law Registration: This section must indicate whether or not Megan’s Law Registration applies to the offender (See Department Policy 11.6.1 Sexually Violent Offender Registration for the list of covered Megan’s Law offenses and registration procedures). If registration is required, enter the most recent date of registration.

b. DNA Data and Testing

(1) Act 57 of 2004 requires inmates convicted of certain offenses to submit a DNA sample.

(2) Indicate if a DNA sample is required and the date it was drawn (if known), not drawn, or not required. See Department policy 11.6.2 DNA Data and Testing for specifics on who is required to provide a DNA Sample.

c. Crime Victims Compensation

(1) Certain inmates are required to pay a fee to the Crime Victim’s Compensation Fund (CVCF). The fee is imposed as part of the court costs for each sentencing event based upon criminal acts occurring after June 30, 1984. The amount of the fee varies depending upon the date the inmate committed the criminal act. No fee is imposed upon sentencing events based on criminal acts prior to June 30, 1984. Procedures regarding the collection of these fees are in Department policy DC-ADM 005, “Collection of Inmate Debts.” The status of the inmate’s CVCF and Victim/Witness Services Fund payments must be communicated to the PBPP. If the PBPP determines that a different amount is owed, that is the amount that will be collected.

(2) Indicate the following: paid and date paid (if known), not paid, or not applicable. Partial payment will be entered as “not paid”.

d. Victim Awareness Education: This data is populated from DC47C application. If data is not available to be populated from DC47C, indicate whether the inmate is required or not required to complete ACT 143 Victim Awareness Classes. ACT 143 Victim Awareness Classes are required for the following offenses:
(1) Murder of the Third Degree, 18 Pa. C.S.A. §§167; 2502(c);

(2) Voluntary Manslaughter, 18 Pa. C.S.A. §§167; 2503;

(3) Aggravated Assault, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 2702(a)(1) & (2);

(4) Kidnapping, 18 Pa. C.S.A. §§167; 2901;

(5) Rape, 18 Pa. C.S.A. §§167; 3121;

(6) Involuntary Deviate Sexual Intercourse, 18 Pa. C.S.A. §§167; 3123;

(7) Arson Endangering Persons, 18 Pa. C.S.A. §§167; 3301(a);

(8) Burglary of a structure adapted for overnight accommodation in which at the time of the offense any person is present, 18 Pa. C.S.A. §§167; 3502;

(9) Robbery, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 3701(a)(1)(i), (ii) or (iii);

(10) Robbery of a Motor Vehicle, 18 Pa. C.S.A. §§167; 3702;

(11) Sexual Assault, 18 Pa. C.S.A. §§167; 3124.1; or


e. Drug Related Crime (Act 97): Act 97 (1, 2, and 3) applies to the original commitment offense. Act 97 does not apply to Technical Parole Violations. The offenses covered under Act 97 relate to drugs only; these offenses do not include alcohol related offenses. Inmates that fit into any of the categories below will be required to pay for subsequent urine tests while under parole supervision. Check not applicable if none of these apply. It is possible for the inmate to be covered by Act 97-1, 97-2, and 97-3.

(1) Act 97-1 applies to inmates who tested positive for non-prescribed drugs while incarcerated.

(2) Act 97-2 applies to inmates who are serving a sentence arising from a conviction under the “Controlled Substance, Drug Device and Cosmetic Act.” The convictions must have occurred on or after February 20, 1990.

(3) Act 97-3 applies to inmates who are serving a sentence arising from a conviction of a “drug related crime.” The convictions must have occurred on or after February 20, 1990.
H. Supervision History

Supervision History is the eighth section in the drop down menu under edit in the ICSA application. The data for supervision history will be pre-loaded from the PBPP 257 application. If it is not available in the application the screen has an “add” feature which will allow the user to enter data from reports that are obtained from prior Department/PBPP records.

I. Board Actions and Stipulations

Board Actions and Stipulations is the ninth section in the drop down menu under edit in the ICSA application.

1. The Board Action history will be listed chronologically with the date and decision of each Board Action displayed. This data will be pre-loaded from the ICSA application and will display in the report. A hyperlink is provided for PBPP use in another document type to view and select previous stipulations from the selected Board Action. Department staff will take no action in this section.

2. Do not include any Stipulations in any ICSA document. YES, NO or Other should not be selected under Status, and no comments should be entered in the Comments field in this section.
Section 5 – Classification Summary Update

A. Current Offense

The first section in the drop down menu under edit in the Integrated Case Summary Application (ICSA) application is divided into two sub sections: Sentence Information and Official Version.

1. Sentence Information: Enter the controlling sentence structure, commitment offenses, minimum and maximum expiration dates, and Recidivism Risk Reduction Incentive (RRRI) minimum date (if applicable) in narrative form.

2. Official Version: An official version is required for crimes of violence and for Driving Under the Influence (DUI) offenses and must include the blood alcohol content (BAC) for DUI offenses. When the official version is required but unavailable for crimes of violence or for DUI offenses, a request to secure the information must be forwarded to the facility Parole Office and documented in this section.

   a. Enter a synopsis of the official version. Do not copy the official version verbatim, but be specific and address who, what, when, where, how and why. Explain whether or not a weapon was present. Provide the name, age and relationship of co-defendants as well as the age and relationship of victims. Do not include names of victims. Include the official version of the original commitment offenses and probation violations (if applicable).

   b. If an official version was previously entered in Classification Narrative Summary (CNS) or ICMA, it will display in the application for review.

      (1) If the previously entered official version is accurate and complete, the No Change Required box may be checked, and the previously entered official version will display in the ICSA report.

      (2) If the previously entered official version needs to be edited, copy and paste procedures can be used to enter and display appropriate information in the ICSA report. Do not copy and paste the name of the person who previously entered the information.

B. Inmate Version

This is the second section in the drop down menu under edit in the ICSA application.

1. Inmate version in this context does not refer to a written version provided by the inmate as required by PBPP for parole processing. The Department has no similar requirement for the inmate to provide a written version, and it is not a requirement for completing a classification summary in ICSA.
2. Summarize the inmate’s version of the original commitment offenses and probation/parole violations (if applicable) as obtained during the in-person interview. Do not copy the inmate’s version verbatim from the inmate’s written version if one is available.

3. The reader should be able to understand the inmate’s point of view regarding what occurred during the offense and during supervision violations.

4. The inmate’s version should be brief, but it should be specific and address who, what, when, where, how, why. When the inmate’s version differs from the Official Version, include the inmate’s explanation for the difference. If the inmate was under the influence of alcohol or other drugs, this information must be included in the inmate version. Include details regarding participation by co-defendants and the degree to which the inmate accepts responsibility for the offenses:
   a. accepts full responsibility and expresses remorse;
   b. accepts full responsibility but lacks remorse;
   c. accepts partial responsibility; or
   d. denies responsibility.

5. A new Inmate Version is required each time a document is created. Do not copy and paste a previous inmate version. Do not enter a statement indicating that the inmate reports no change to a previous version. A No Change Required box is not available in this section of the ICSA application. DO NOT TYPE “NO CHANGE REQUIRED” in this section.

C. Offense History

The third section in the drop down menu under edit in the ICSA application is divided into two sub sections: Juvenile Offense History and Adult Offense History. Each sub section includes an area for numerical summarization and an area for information about specific offenses. Completion of the juvenile numerical summarization is not required except for Probation/Parole Revocations. Completion of the adult numerical summarization is not required except for Probation/Parole Revocations. The numerical entry of any probation or parole revocation in the adult numerical summary will result in a “V” in the corresponding problem area on the face sheet. Information that was previously entered in other applications will be pulled into the ICSA application, but some ICSA fields may be blank. Completing the blank criminal history information fields for offense information that is pulled into the ICSA application from other applications is not required. The following optional fields are available in the ICSA application for each specific offense: source of information, date of arrest, place of arrest, charge code, charge description, disposition and adjustment. However, the offense history may be summarized in both sub sections as described below.
1. Juvenile Criminal History: Summarize the juvenile offense history including offenses and placements. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the offender’s history and offense pattern. The focus shall be on recording adjudications, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior juvenile criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the offender’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

2. Adult Criminal History: Summarize the adult offense history including offenses and commitments. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording convictions, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior adult criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

3. Detailed offense history data that was entered in a previous document by the Pennsylvania Board of Probation and Parole (PBPP) shall not be deleted by Department staff.

D. Facility Adjustment

The fourth section in the drop down menu under edit in the ICSA application is divided into two sub sections: Move Information and Overall Adjustment.

1. Move Information: The moves in this sub section are pre-loaded from other applications. Any misconduct information that is inserted with the move information must be deleted. In the comment boxes describe significant behavior that resulted in a separation or transfer.

2. Overall Adjustment: This sub section must address any adjustment issues during the inmate’s current commitment as well as prior Department and county confinements. Describe significant patterns of misconduct and significant consequences (separations, transfers, etc.). Clarification must be provided for any misconduct charge within the last year where the actual circumstances are not clear (for example, describe the contraband for the misconduct charge Possession of Contraband).
E. Social History

The fifth section in the drop down menu under edit in the ICSA application is divided into nine sub sections: Family/Siblings, Education, Employment, Finance, Mobility, Marital, Domestic Violence, Drug and Alcohol, and Medical.

1. The Social History sections should contain the required information in narrative form with special focus on any association of relationships and critical life events with criminal activity.

2. If information was previously entered in the CNS or ICSA social history sections, the information displays in a box at the top of each Social History section tab in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified.

3. If the information is accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

4. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report.

5. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

   a. Family/Siblings

      (1) In a narrative format, record the names of the inmate’s parents and describe their marital status throughout the inmate’s childhood. If the inmate was raised by someone other than the parents, record the name of the primary caregiver and the circumstances that resulted in the relationship. Describe any domestic violence that occurred between the parents/caregivers (domestic violence is violence between intimate partners). Identify any current paramours of parents or step-parents. Describe any verbal, physical, or sexual abuse that the inmate experienced while growing up, including the identity of the perpetrator and the inmate’s age at the time of the abuse.

      (2) In a narrative format, record the names of the inmate’s siblings and the relationship (biological, half sibling, step sibling, etc.). Describe any criminal record in the inmate’s family constellation including who was arrested and for what. Describe any substance abuse history in the family constellation including who abused what substances. Describe the inmate’s relationship with the family including how was the upbringing, were needs met, and with whom contact is maintained.
(3) Select from the drop down menu in the application the types of abuse suffered as a child if applicable.

b. Education

(1) The focus should be on achievement in the school setting. Include the highest grade completed and the year. Identify the name and location of the high school if the inmate graduated. Identify the year if the inmate received a GED. Explain why the inmate left school or was ever expelled or suspended. If the inmate attended college, technical school or other specialized training, identify the name and location, dates attended and if the inmate graduated or completed the training. Include any educational/vocational participation in the facility setting.

(2) Complete the following data entry fields in addition to the text boxes: grade last completed and if a GED has been obtained.

(3) Select the appropriate radio buttons for continued education needs. “Verified” displays “V” on the face sheet for the corresponding problem area, “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

c. Employment

(1) Describe the inmate’s history of employment up to the time of arrest for the current commitment offenses with a special focus on the most recent employment. Identify the position held and related job duties. Include any military service and type of discharge, as well as any knowledge of job-related skills. If the inmate was not employed at the time of arrest, describe the source of financial support. Describe the inmate’s relationship with co-workers and supervisor, and identify if the inmate was ever fired or quit before being fired.

(2) Complete the following data entry fields in addition to the text boxes: Employed six months or longer and needs continued vocational training.

(3) Select the appropriate radio button for continued vocational needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

d. Finance: Identify if the inmate received Public Assistance prior to incarceration and describe the reason if the inmate receives Social Security Income (SSI). Describe the inmate’s current significant assets or debts including personal property, savings/checking, fines, costs, restitution, bills, loans, and credit cards.

e. Mobility: Identify prior cities or states of residence and any arrests, convictions, or incarcerations in other states. Describe indications of a transient lifestyle and identify
the place of residence at the time of arrest for the current commitment offenses. Note if the inmate resided in a high crime area at the time of arrest.

f. Marital

(1) Describe the inmate’s marital status in narrative form:
   (a) single;
   (b) married: Spouse’s name and years married;
   (c) separated: Spouse’s name, years married, and when separated;
   (d) divorced: Ex-spouse’s name, years married, and when divorced; or
   (e) widowed: Spouse’s name, years married, and how and when deceased.

(2) Identify the inmate’s children: include names, dates of birth, other parents’ names, child support amount, current/arrears, where are children living, and current relationship with the children.

(3) If the inmate is in a current relationship identify the partner’s current employment status and any arrests or drug/alcohol use. If the inmate is not in a current relationship, describe why the most recent significant relationship ended.

g. Domestic Violence

(1) Identify and describe if the inmate ever physically, sexually or emotionally abused an intimate partner. If verification is needed to confirm or refute the existence of a possible history of domestic violence, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

(2) Select the appropriate radio button for domestic violence history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected. If this problem area is “Not Verified”, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

(3) If the inmate admits to domestic violence this is considered a “Verified” problem area.

(4) Indicate if one or more of the following apply for intimate partner relationships to ensure the inmate will receive Domestic Violence Protocol supervision by PBPP:
(a) instant offense in which the official version indicates a crime or crimes involving domestic violence against an intimate partner;

(b) a past criminal conviction(s) involving domestic violence against an intimate partner;

(c) current Protection from Abuse (PFA) order or a PFA issued against the inmate at the time of arrest for the instant offense;

(d) inmate threatened or abused an intimate partner(s) while incarcerated or under supervision; and/or

(e) collateral sources (or the inmate) disclose credible evidence of domestic violence.

h. Drug/Alcohol

(1) Identify all substances the inmate has abused (including inhalants and solvents), the length of the substance abuse history, any treatment programs attended in the community, and progress in the programs. Identify information that is self-reported.

(a) Drugs: Explain when use began, identify substances used, describe the amount, frequency, and method of use, and the date of last use.

(b) Alcohol: Explain when use began and the amount and frequency of use.

(c) Treatment: Describe where, when, intensity level (inpatient, out-patient, self help groups), and length of treatment programs that the inmate has participated in. Include whether participation was voluntary or court ordered, and successful or unsuccessful.

(2) Data for Drug and Alcohol problem areas on the Face Sheet is pulled in from the Mainframe Classification Background Data fields. Data is entered in these mainframe fields during Pennsylvania Additive Classification Tool (PACT) classification and must be accurate at the time the ICSA document is being created.

i. Medical: Focus on the inmate's overall level of health and on any known functional medical problems that would impact facility placement or continuity of care upon transfer to Community Corrections or release to parole supervision.

(1) Describe any special medical needs or accommodations the inmate requires (such as work or housing restrictions, assistive devices, transportation issues, etc.).
(2) Include a statement regarding medication compliance if applicable. Do not include specific medications in this section.

(3) Include a statement regarding a history of mental health issues, hospitalizations and suicide attempts.

(4) DO NOT ENTER CONFIDENTIAL INFORMATION. The DC-481, Medical Release Summary will be provided to PBPP by the medical department, and the Psychological Report will be provided to PBPP in the parole packet.

F. Counselor Evaluation

The sixth section in the drop down menu under edit in the ICSA application is divided into four sub sections: Custody Level, Program Codes, and Correctional Plan; Offense Summary; Boot Camp; and Mental Health.

1. If information was previously entered in the corresponding sub-sections, the information displays in a box at the top of each sub-section in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified. If the information is still accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

2. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

a. Custody Level, Program Codes, and Correctional Plan

   (1) Custody Level: Enter the current Custody Level from PACT and Custody Level override reason if applicable.

   (2) Program Codes: Identify Program Codes that are assigned in PACT. Provide an explanation if program code O, Z, or H is assigned.

   (3) Correctional Plan

      (a) The following sections of the Correctional Plan will be automatically displayed from the Unit Management System: Recommended Programs, Currently Enrolled, and Previously Enrolled.

      (b) Correctional Plan Comments: Observations regarding motivation to participate in recommended programs and attitude/behavioral changes that may be attributed to program participation should be recorded here.
(c) Counselor Evaluation Summary: Address security concerns, separations, special needs, and any information not included in other areas of the summary that will affect care, custody and control of the inmate.

b. Offense Summary

(1) Assault History

(a) Select the appropriate radio button for assault history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

i. Verified: The inmate must have been convicted of a violent offense as defined by the PBPP or have a history of facility misconducts for assault or threatening behavior.

ii. Not Verified: Select “Not Verified” if neither requirement for “Verified” applies and Department staff perceives that the inmate’s offense had assault potential.

iii. Select “No” if none of the above applies.

(b) Describe any history of assaultive behaviors in the text box.

(2) Minor Victims

(a) Identify the age(s) of the inmate’s minor victim(s), whether or not there have been multiple minor victims, the sex of the victim(s), and the inmate’s relationship to victim(s) if known.

(b) Select the appropriate radio button for minor victim. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(3) Sex Offender History

(a) In narrative form, include present or past convictions for sexual offenses or sexual misconducts that are violations of the crimes code in the text box in this section.

(b) Act 98 of 2000 (42 Pa. C.S. §9718.1) requires inmates convicted of crimes, committed on or after December 20, 2000, covered by this legislation to participate in Sex Offender Treatment to be eligible for parole. Inmates who have not participated are not eligible for parole. Indicate whether or not the inmate is participating in a sex offender program and accepts responsibility
for his/her offense. Describe progress and recommendations for continued treatment.

(c) The Sex Offender Treatment Evaluation shall be forwarded by treatment provider to the facility parole office.

(d) Select the appropriate radio button for sex offender history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(4) Escape History

(a) Indicate the month and day if known. The year must be indicated.

(b) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(c) As defined by Department policy 11.2.1, “Reception and Classification,” Section 3, describe juvenile and adult behavior: any escape conviction (this does not imply that only convictions are reported; report documented behavior), juvenile escapes from secured facilities, escape related detainers, possession of implements of escape when intent and/or sufficient materials exist.

(5) Walk Off History

(a) Indicate the month and day if known. The year must be indicated.

(b) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(c) As defined by Department policy 11.2.1 Section 3, describe juvenile and adult behavior: Absence from court ordered programs, fleeing and eluding, military AWOL, failure to appear in court, default appearance, failure to report on probation or parole, fugitive from justice warrants, absconding from bail, misconduct for CCC escape (no conviction), misconduct for failure to return from furlough (no conviction), walk away related detainers. Exclusions: Late return from furlough and Resisting Arrest.

c. Boot Camp: Statutory eligibility is automatically populated. Indicate whether or not the inmate desires to participate in the Boot Camp program and enter pertinent comments in the text box.
d. Mental Health: Information in this section is automatically pulled from the psychological assessment applications. The information shall be reviewed to ensure that the information is current, and Psychology staff shall be contacted if the information needs to be updated in the psychological assessment applications. If the information is outdated, the ICSA document shall not be routed or closed until the psychological information is updated. The psychiatric and suicide problem areas on the face sheet are updated (verified, not verified or blank) based on the information in the psychological applications.

G. Additional Information

The seventh section in the drop down menu under edit in the ICSA application is divided into three sub sections: Re-entry information, Act 84, and Act Related.

1. Re-Entry Information

   a. Face Sheet: Other problem areas- This entry should be limited text and address Identify any problem area that is not already identified on the Face Sheet if it could affect the parole decision or placement decision (for example: history of weapons, significant health issues). Text will display on the Face Sheet.

   b. Documents Received

      (1) Drivers License: Check the box if the inmate has a driver’s license or non driver’s photo ID. Enter the driver’s license or non-driver’s photo ID number along with the state, the class of license and the country if any of the information is available.

      (2) Birth Certificate: Check the box if the inmate has a birth certificate.

      (3) Medical Assistance: Check the box if the inmate has applied for medical assistance.

      (4) SSI: Check the box if the inmate has applied for SSI.

      (5) SS Card: Check the box if the inmate has a Social Security Card.

      (6) Medical Release Applicant [formerly ACT 84 of 2008 (compassionate release)]: check the box if the inmate has applied for Medical Release.

      (7) Commutation: Check the box if inmate has applied for commutation.

      (8) Additional SS #’s: Enter any additional Social Security numbers that do not display on the face sheet. Once a number is added it can not be deleted or modified.
2. Act 84 documents: ACT 84 Documents will be preloaded from the Inmate Records System if available in the mainframe. If additional documents are in inmate’s files, check the appropriate box.

3. Act Related
   a. Megan’s Law Registration: This section must indicate whether or not Megan’s Law Registration applies to the offender (See Department Policy 11.6.1 "Sexually Violent Offender Registration" for the list of covered Megan’s Law offenses and registration procedures). If registration is required, enter the most recent date of registration.
   b. DNA Data and Testing
      (1) Act 57 of 2004 requires inmates convicted of certain offenses to submit a DNA sample.
      (2) Indicate if a DNA sample is required and the date it was drawn (if known), not drawn, or not required. See Department policy 11.6.2 for specifics on who is required to provide a DNA Sample.
   c. Crime Victims Compensation
      (1) Certain inmates are required to pay a fee to the Crime Victim’s Compensation Fund (CVCF). The fee is imposed as part of the court costs for each sentencing event based upon criminal acts occurring after June 30, 1984. The amount of the fee varies depending upon the date the inmate committed the criminal act. No fee is imposed upon sentencing events based on criminal acts prior to June 30, 1984. Procedures regarding the collection of these fees are in Department policy DC-ADM 005, “Collection of Inmate Debts.” The status of the inmate’s CVCF and Victim/Witness Services Fund payments must be communicated to the PBPP. If the PBPP determines that a different amount is owed, that is the amount that will be collected.
      (2) Indicate the following: paid and date paid (if known), not paid, or not applicable. Partial payment will be entered as “not paid”.
   d. Victim Awareness Education: This data is populated from DC-47C, Education and Vocational Cumulative Record. If data is not available to be populated from DC-47C, indicate whether the inmate is required or not required to complete ACT 143 Victim Awareness Classes. ACT 143 Victim Awareness Classes are required for the following offenses:
      (1) Murder of the Third Degree, 18 Pa. C.S.A. §§167; 2502(c);
      (2) Voluntary Manslaughter, 18 Pa. C.S.A. §§167; 2503;
(3) Aggravated Assault, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 2702(a)(1) & (2);

(4) Kidnapping, 18 Pa. C.S.A. §§167; 2901;

(5) Rape, 18 Pa. C.S.A. §§167; 3121;

(6) Involuntary Deviate Sexual Intercourse, 18 Pa. C.S.A. §§167; 3123;

(7) Arson Endangering Persons, 18 Pa. C.S.A. §§167; 3301(a);

(8) Burglary of a structure adapted for overnight accommodation in which at the time of the offense any person is present, 18 Pa. C.S.A. §§167; 3502;

(9) Robbery, graded as a felony of the first degree, 18 Pa. C.S.A. §§167; 3701(a)(1)(i), (ii) or (iii);

(10) Robbery of a Motor Vehicle, 18 Pa. C.S.A. §§167; 3702;

(11) Sexual Assault, 18 Pa. C.S.A. §§167; 3124.1; and


e. Drug Related Crime (Act 97): Act 97 (1, 2, and 3) applies to the original commitment offense. Act 97 does not apply to Technical Parole Violations. The offenses covered under Act 97 relate to drugs only; these offenses do not include alcohol related offenses. Inmates that fit into any of the categories below will be required to pay for subsequent urine tests while under parole supervision. Check not applicable if none of these apply. It is possible for the inmate to be covered by Act 97-1, 97-2, and 97-3.

(1) Act 97-1 applies to inmates who tested positive for non-prescribed drugs while incarcerated.

(2) Act 97-2 applies to inmates who are serving a sentence arising from a conviction under the “Controlled Substance, Drug Device and Cosmetic Act.” The convictions must have occurred on or after February 20, 1990.

(3) Act 97-3 applies to inmates who are serving a sentence arising from a conviction of a “drug related crime.” The convictions must have occurred on or after February 20, 1990.
Section 6 – 13A, Parole Summary

A. Current Offense

The first section in the drop down menu, under ‘edit’ in the ICSA application, is divided into two sub sections: Sentence Information and Official Version.

1. Sentence Information: Enter the controlling sentence structure, commitment offenses, minimum and maximum expiration dates, and Recidivism Risk Reduction Incentive (RRRI) minimum date (if applicable) in narrative form.

2. Official Version: An official version is required for crimes of violence and for Driving under the Influence (DUI) offenses and must include the blood alcohol content (BAC) for DUI offenses. When the official version is required but unavailable for crimes of violence or for DUI offenses, a request to secure the information must be forwarded to the facility Parole Office and documented in this section.

   a. Enter a synopsis of the official version. Do not copy the official version verbatim, but be specific and address who, what, when, where, how and why. Explain whether or not a weapon was present. Provide the name, age and relationship of co-defendants as well as the age and relationship of victims. Do not include names of victims. Include the official version of the original commitment offenses and probation violations (if applicable).

   b. If an official version was previously entered in Classification Narrative Summary (CNS) or ICMA, it will display in the application for review.

      (1) If the previously entered official version is accurate and complete, the No Change Required box may be checked, and the previously entered official version will display in the ICSA report.

      (2) If the previously entered official version needs to be edited, copy and paste procedures can be used to enter and display appropriate information in the ICSA report. Do not copy and paste the name of the person who previously entered the information.

B. Inmate Version

This is the second section in the drop down menu under ‘edit’ in the ICSA application.

1. Inmate version in this context does not refer to a written version provided by the inmate as required by the Pennsylvania Board of Probation and Parole (PBPP) for parole processing. The Department has no similar requirement for the inmate to provide a written version, and it is not a requirement for completing a classification summary in ICSA.

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Issued: 2/12/2013
Effective: 2/19/2013
2. **Summarize the inmate’s version of the original commitment offenses and probation/parole violations (if applicable) as obtained during the in-person interview. Do not copy the inmate’s version verbatim from the inmate’s written version if one is available.**

3. The reader should be able to understand the inmate’s point of view regarding what occurred during the offense and during supervision violations.

4. The inmate’s version should be brief, but it should be specific and address who, what, when, where, how, why. When the inmate’s version differs from the Official Version, include the inmate’s explanation for the difference. If the inmate was under the influence of alcohol or other drugs, this information must be included in the inmate version. Include details regarding participation by co-defendants and the degree to which the inmate accepts responsibility for the offenses:

   a. accepts full responsibility and expresses remorse;
   
   b. accepts full responsibility but lacks remorse;
   
   c. accepts partial responsibility; or
   
   d. denies responsibility.

5. A new Inmate Version is required each time a document is created. Do not copy and paste a previous inmate version. Do not enter a statement indicating that the inmate reports no change to a previous version. A No Change Required box is not available in this section of the ICSA application. **DO NOT TYPE "NO CHANGE REQUIRED" in this section.**

C. **Offense History**

The third section in the drop down menu under ‘edit’ in the ICSA application is divided into two sub sections: Juvenile Offense History and Adult Offense History. Each subsection includes an area for numerical summarization and an area for information about specific offenses. Completion of the juvenile numerical summarization is not required except for Probation/Parole Revocations. Completion of the adult numerical summarization is not required except for Probation/Parole Revocations. The numerical entry of any probation or parole revocation in the adult numerical summary will result in a “V” in the corresponding problem area on the face sheet. Information that was previously entered in other applications will be pulled into the ICSA application, but some ICSA fields may be blank. Completing the blank criminal history information fields for offense information that is pulled into the ICSA application from other applications is not required. The following optional fields are available in the ICSA application for each specific offense: source of information, date of arrest, place of arrest, charge code, charge description, disposition and adjustment. However, the offense history may be summarized in both sub sections as described below.
1. Juvenile Criminal History: Summarize the juvenile offense history including offenses and placements. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording adjudications, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior juvenile criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

2. Adult Criminal History: Summarize the adult offense history including offenses and commitments. Staff may combine all offenses in one summarization or may separate criminal history into two or more summarizations to aid in the clarification and understanding of the inmate’s history and offense pattern. The focus shall be on recording convictions, but unreported dispositions may also be recorded for violent or sexual offenses. Providing the details of violent, sexual, or possible domestic violence offenses is not required in this section. Do not include current commitment offenses in this section. This sub-section should not be blank. If the inmate has no prior adult criminal history, enter “none” in the comment box. Briefly summarize observed patterns of offense-related behavior and identify the inmate’s motivation for committing the offenses (e.g., explain that a series of Burglaries was committed to support a drug addiction).

3. Detailed offense history data that was entered in a previous document by the PBPP shall not be deleted by Department staff.

D. Facility Adjustment

The fourth section in the drop down menu under ‘edit’ in the ICSA application is divided into two sub sections: Move Information and Overall Adjustment.

1. Move Information: The moves in this subsection are pre-loaded from other applications. Any misconduct information that is inserted with the move information must be deleted. In the comment boxes describe significant behavior that resulted in a separation or transfer.

2. Overall Adjustment

   a. This sub section must address any adjustment issues during the inmate’s current commitment. Describe significant patterns of misconduct and significant consequences (separations, transfers, etc.). Clarification must be provided for any misconduct charge within the last year where the actual circumstances are not clear (for example, describe the contraband for the misconduct charge Possession of Contraband).

   b. For 13A’s completed in lieu of an Initial, PV, or Continuation Summary:
(1) Describe adjustment during prior Department and County confinements.

(2) Describe overall adjustment in Department during the current commitment. Describe significant patterns of misconduct and significant consequences (separations, transfers, etc.). Clarification must be provided for any misconduct charge within the last year where the actual circumstances are not clear (for example, describe the contraband for the misconduct charge Possession of Contraband).

E. Social History

The fifth section in the drop down menu under ‘edit’ in the ICSA application is divided into nine sub sections: Family/Siblings, Education, Employment, Finance, Mobility, Marital, Domestic Violence, Drug and Alcohol, and Medical.

1. The Social History sections should contain the required information in narrative form with special focus on any association of relationships and critical life events with criminal activity.

2. If information was previously entered in the CNS or ICSA social history sections, the information displays in a box at the top of each Social History section tab in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified.

3. If the information is accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

4. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report.

5. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

   a. Family/Siblings

      (1) In a narrative format, record the names of the inmate’s parents and describe their marital status throughout the inmate’s childhood. If the inmate was raised by someone other than the parents, record the name of the primary caregiver and the circumstances that resulted in the relationship. Describe any domestic violence that occurred between the parents/caregivers (domestic violence is violence between intimate partners). Identify any current paramours of parents or step-parents. Describe any verbal, physical, or sexual abuse that the inmate experienced while growing up, including the identity of the perpetrator and the inmate’s age at the time of the abuse.
(2) In a narrative format, record the names of the inmate’s siblings and the relationship (biological, half sibling, step sibling, etc.). Describe any criminal record in the inmate’s family constellation including who was arrested and for what. Describe any substance abuse history in the family constellation including who abused what substances. Describe the inmate’s relationship with the family including how was the upbringing, were needs met, and with whom contact is maintained.

(3) Select from the drop down menu in the application the types of abuse suffered as a child if applicable.

b. Education

(1) The focus should be on achievement in the school setting. Include the highest grade completed and the year. Identify the name and location of the high school if the inmate graduated. Identify the year if the inmate received a GED. Explain why the inmate left school or was ever expelled or suspended. If the inmate attended college, technical school or other specialized training, identify the name and location, dates attended and if the inmate graduated or completed the training. Include any educational/vocational participation in the facility setting.

(2) Complete the following data entry fields in addition to the text boxes: grade last completed and if a GED has been obtained.

(3) Select the appropriate radio buttons for continued education needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

c. Employment

(1) Describe the inmate’s history of employment up to the time of arrest for the current commitment offenses with a special focus on the most recent employment. Identify the position held and related job duties. Include any military service and type of discharge, as well as any knowledge of job-related skills. If the inmate was not employed at the time of arrest, describe the source of financial support. Describe the inmate’s relationship with co-workers and supervisor, and identify if the inmate was ever fired or quit before being fired.

(2) Complete the following data entry fields in addition to the text boxes: Employed six months or longer and needs continued vocational training.

(3) Select the appropriate radio button for continued vocational needs. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.
d. Finance: Identify if the inmate received Public Assistance prior to incarceration and describe the reason if the inmate receives Social Security Income (SSI). Describe the inmate’s current significant assets or debts including personal property, savings/checking, fines, costs, restitution, bills, loans, and credit cards.

e. Mobility: Identify prior cities or states of residence and any arrests, convictions, or incarcerations in other states. Describe indications of a transient lifestyle and identify the place of residence at the time of arrest for the current commitment offenses. Note if the inmate resided in a high crime area at the time of arrest.

f. Marital

   (1) Describe the inmate’s marital status in narrative form:
       
       (a) single;
       
       (b) married: spouse’s name and years married;
       
       (c) separated: spouse’s name, years married, and when separated;
       
       (d) divorced: ex-spouse’s name, years married, and when divorced; or
       
       (e) widowed: spouse’s name, years married, and how and when deceased.

   (2) Identify the inmate’s children: include names, dates of birth, other parents’ names, child support amount, current/arrears, where are children living, and current relationship with the children.

   (3) If the inmate is in a current relationship identify the partner’s current employment status and any arrests or drug/alcohol use. If the inmate is not in a current relationship, describe why the most recent significant relationship ended.

g. Domestic Violence

   (1) Identify and describe if the inmate ever physically, sexually or emotionally abused an intimate partner. If verification is needed to confirm or refute the existence of a possible history of domestic violence, send a request to the institutional parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.

   (2) Select the appropriate radio button for domestic violence history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected. If this problem area is “Not Verified”, send a request to the facility parole office for a special field report to determine the nature of the possible domestic violence. This request must be documented in the comments box.
(3) If the inmate admits to domestic violence this is considered a “Verified" problem area.

(4) Indicate if one or more of the following apply for intimate partner relationships to ensure the inmate will receive Domestic Violence Protocol supervision by PBPP:

(a) instant offense in which the official version indicates a crime or crimes involving domestic violence against an intimate partner;

(b) a past criminal conviction(s) involving domestic violence against an intimate partner;

(c) current PFA order or a Protection from Abuse (PFA) issued against the inmate at the time of arrest for the instant offense;

(d) inmate threatened or abused an intimate partner(s) while incarcerated or under supervision; and/or

(e) collateral sources (or the inmate) disclose credible evidence of domestic violence.

h. Drug/Alcohol

(1) Identify all substances the inmate has abused (including inhalants and solvents), the length of the substance abuse history, any treatment programs attended in the community, and progress in the programs. Identify information that is self-reported.

(a) Drugs: Explain when use began, identify substances used, describe the amount, frequency, and method of use, and the date of last use.

(b) Alcohol: Explain when use began and the amount and frequency of use.

(c) Treatment: Describe where, when, intensity level (inpatient, out-patient, self help groups), and length of treatment programs that the inmate has participated in. Include whether participation was voluntary or court ordered, and successful or unsuccessful.

(2) Data for Drug and Alcohol problem areas on the Face Sheet is pulled in from the Mainframe Classification Background Data fields. Data is entered in these mainframe fields during PACT classification and must be accurate at the time the ICSA document is being created.

i. Medical: Focus on the inmate's overall level of health and on any known functional medical problems that would impact facility placement or continuity of care upon transfer to Community Corrections or release to parole supervision.
(1) Describe any special medical needs or accommodations the inmate requires (such as work or housing restrictions, assistive devices, transportation issues, etc.).

(2) Include a statement regarding medication compliance if applicable. Do not include specific medications in this section.

(3) Include a statement regarding a history of mental health issues, hospitalizations and suicide attempts.

(4) DO NOT ENTER CONFIDENTIAL INFORMATION. The DC-481, Medical Release Summary will be provided to PBPP by the medical department, and the Psychological Report will be provided to PBPP in the parole packet.

F. Counselor Evaluation

The sixth section in the drop down menu under ‘edit’ in the ICSA application is divided into four sub sections: Custody Level, Program Codes, and Correctional Plan; Offense Summary; Boot Camp; and Mental Health.

1. If information was previously entered in the corresponding sub-sections, the information displays in a box at the top of each sub-section in the ICSA application and in the ICSA report. The information in this box cannot be edited or modified. If the information is still accurate, it may be copied and pasted for display in the appropriate sub section of the Social History in the ICSA report.

2. If the information meets or exceeds the requirements below, the No Change Required box may be checked and the information will display in the ICSA report. Additional information for these sections must be gathered from the inmate and available records for inclusion as necessary to meet or exceed the requirements below. The following information must be included in each sub section.

3. Custody Level, Program Codes, and Correctional Plan

   a. Custody Level: Enter the current Custody Level from PACT and Custody Level override reason if applicable.

   b. Program Codes: Identify Program Codes that are assigned in PACT. Provide an explanation if program code O, Z, or H is assigned.

   c. Correctional Plan

      (1) The following sections of the Correctional Plan will be automatically displayed from the Unit Management System: Recommended Programs, Currently Enrolled, and Previously Enrolled.
(2) Correctional Plan Comments: Observations regarding motivation to participate in recommended programs and attitude/behavioral changes that may be attributed to program participation should be recorded here.

(3) Counselor Evaluation Summary:

(a) If the 13A Parole Summary is done in lieu of an Initial, PV, Continuation:

i. Address security concerns, separations, special needs, and any information not included in other areas of the summary that will affect care, custody and control of the inmate.

ii. Also include the content described in (b and c) below.

(b) If the 13A is done following an Initial, PV, Continuation, or CCC Referral Summary:

i. This sub-section will begin with assessment information. A link in this section allows the user to view available assessment scores. Assessment scores, if available will print in the document. If assessment scores are not automated but are available in the inmate’s file, the user will include the score for each assessment in the narrative. Use the format in the following sample narrative:

ii. Mr./Ms. X’s RST score of ____ indicates a low/medium/high risk of re-offending generally. Mr./Ms. X’s most recent Category of ____ on the OVRT indicates a low/medium/high level of risk of re-offending violently. The RST score required/did not require further assessment/was overridden to administer the full battery of assessments. (Continue unless RST is low with no override.) Mr./Ms. X’s most recent score of ____ on the CSS-M indicates a low/medium/high level of criminal thinking. Mr./Ms. X’s TCU score of ____ indicates the inmate would benefit from outpatient/inpatient/does not need substance abuse treatment.

(c) Summarize and evaluate all available information. Describe the inmate’s involvement in correctional programming and noticeable changes in attitude and/or behavior during and after program participation. Identify recommended, currently enrolled, and previously enrolled programs. Include program participation that was accomplished at previous facilities. Describe work and housing reports. Include any other pertinent information about the inmate as well as specific recommendations or suggestions for parole planning.

4. Offense Summary

a. Assault History
(1) Select the appropriate radio button for assault history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(a) Verified: The inmate must have been convicted of a violent offense as defined by the PBPP or have a history of institutional misconducts for assault or threatening behavior.

(b) Not Verified: Select “Not Verified” if neither requirement for “Verified” applies and Department staff perceives that the inmate’s offense had assault potential.

(c) Select “No” if none of the above applies.

(2) Describe any history of assaultive behaviors in the text box.

b. Minor Victim

(1) Identify the age(s) of the inmate’s minor victim(s), whether or not there have been multiple minor victims, the sex of the victim(s), and the inmate’s relationship to victim(s) if known.

(2) Select the appropriate radio button for minor victim. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

c. Sex Offender History

(1) In narrative form, include present or past convictions for sexual offenses or sexual misconducts that are violations of the crimes code in the text box in this section.

(2) Act 98 of 2000 (42 Pa. C.S. §9718.1) requires inmates convicted of crimes, committed on or after December 20, 2000, covered by this legislation as outlined in the Sexual Offender Treatment Requirement (Attachment 6-A) to participate in Sex Offender Treatment to be eligible for parole. Inmates who have not participated are not eligible for parole. Indicate whether or not the inmate is participating in a sex offender program and accepts responsibility for his/her offense. Describe progress and recommendations for continued treatment.

(3) The Sex Offender Treatment Evaluation shall be forwarded by treatment provider to the facility parole office.

(4) Select the appropriate radio button for sex offender history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.
d. Escape History

1. Indicate the month and day if known. The year must be indicated.

2. Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

3. As defined by Department policy 11.2.1, “Reception and Classification,” Section 3, describe juvenile and adult behavior: any escape conviction (this does not imply that only convictions are reported; report documented behavior), juvenile escapes from secured facilities, escape related detainers, possession of implements of escape when intent and/or sufficient materials exist.

e. Walk Off History

(1) Indicate the month and day if known. The year must be indicated.

(2) Select the appropriate radio button for escape history. “Verified” displays “V” on the face sheet for the corresponding problem area. “Not Verified” displays “NV” on the face sheet. The problem area will be blank if “No” is selected.

(3) As defined by Department policy 11.2.1 Section 3, describe juvenile and adult behavior: Absence from court ordered programs, fleeing and eluding, military AWOL, failure to appear in court, default appearance, failure to report on probation or parole, fugitive from justice warrants, absconding from bail, misconduct for CCC escape (no conviction), misconduct for failure to return from furlough (no conviction), walk away related detainers. Exclusions: Late return from furlough and Resisting Arrest.

5. Boot Camp: Statutory eligibility is automatically populated. Indicate whether or not the inmate desires to participate in the Boot Camp program and enter pertinent comments in the text box.

6. Mental Health: Information in this section is automatically pulled from the psychological assessment applications. The information shall be reviewed to ensure that the information is current, and Psychology staff shall be contacted if the information needs to be updated in the psychological assessment applications. If the information is outdated, the ICSA document shall not be routed or closed until the psychological information is updated. The psychiatric and suicide problem areas on the face sheet are updated (verified, not verified or blank) based on the information in the psychological applications.

G. Additional Information

The seventh section in the drop down menu under ‘edit’ in the ICSA application is divided into three sub sections: Re-entry information, Act 84, and Act Related.
1. Re-entry Information
   a. Face Sheet: Other problem areas - This entry should be limited text and address Identify any problem area that is not already identified on the Face Sheet if it could affect the parole decision or placement decision (for example: history of weapons, significant health issues). Text will display on the Face Sheet.
   b. Documents Received
      (1) Drivers License: Check the box if the inmate has a driver's license or non driver's photo ID. Enter the driver's license or non-driver's photo ID number along with the state, the class of license and the country if any of the information is available.
      (2) Birth Certificate: Check the box if the inmate has a birth certificate.
      (3) Medical Assistance: Check the box if the inmate has applied for medical assistance.
      (4) SSI: Check the box if the inmate has applied for SSI.
      (5) SS Card: Check the box if the inmate has a Social Security Card.
      (6) Medical Release Applicant [formerly ACT 84 of 2008 (compassionate release)]: check the box if the inmate has applied for Medical Release.
      (7) Commutation: Check the box if inmate has applied for commutation.
      (8) Additional SS #’s: Enter any additional Social Security numbers that do not display on the face sheet. Once a number is added it can not be deleted or modified.

2. Act 84 Documents: ACT 84 Documents will be preloaded from the Inmate Records System if available in the mainframe. If additional documents are in inmate’s files, check the appropriate box.

3. Act Related
   a. Megan’s Law Registration: This section must indicate whether or not Megan’s Law Registration applies to the offender (See Department Policy 11.6.1 “Sexually Violent Offender Registration" for the list of covered Megan’s Law offenses and registration procedures). If registration is required, enter the most recent date of registration.
   b. DNA Data and Testing
(1) Act 57 of 2004 requires inmates convicted of certain offenses to submit a DNA sample.

(2) Indicate if a DNA sample is required and the date it was drawn (if known), not drawn, or not required. See Department policy 11.6.2, “DNA Data and Testing” for specifics on who is required to provide a DNA Sample.

c. Crime Victims Compensation

(1) Certain inmates are required to pay a fee to the Crime Victim’s Compensation Fund (CVCF). The fee is imposed as part of the court costs for each sentencing event based upon criminal acts occurring after June 30, 1984. The amount of the fee varies depending upon the date the inmate committed the criminal act. No fee is imposed upon sentencing events based on criminal acts prior to June 30, 1984. Procedures regarding the collection of these fees are in Department policy DC-ADM 005, “Collection of Inmate Debts.” The status of the inmate’s CVCF and Victim/Witness Services Fund payments must be communicated to the PBPP. If the PBPP determines that a different amount is owed, that is the amount that will be collected.

(2) Indicate the following: paid and date paid (if known), not paid, or not applicable. Partial payment will be entered as “not paid”.

d. Victim Awareness Education: This data is populated from DC47C application. If data is not available to be populated from DC47C, indicate whether the inmate is required or not required to complete ACT 143 Victim Awareness Classes. ACT 143 Victim Awareness Classes are required for the following offenses:

(1) Murder of the Third Degree, 18 Pa. C.S.A. §167; 2502(c);

(2) Voluntary Manslaughter, 18 Pa. C.S.A. §167; 2503;

(3) Aggravated Assault, graded as a felony of the first degree, 18 Pa. C.S.A. §167; 2702(a)(1) & (2);

(4) Kidnapping, 18 Pa. C.S.A. §167; 2901;

(5) Rape, 18 Pa. C.S.A. §167; 3121;

(6) Involuntary Deviate Sexual Intercourse, 18 Pa. C.S.A. §167; 3123;

(7) Arson Endangering Persons, 18 Pa. C.S.A. §167; 3301(a);

(8) Burglary of a structure adapted for overnight accommodation in which at the time of the offense any person is present, 18 Pa. C.S.A. §167; 3502;
(9) Robbery, graded as a felony of the first degree, 18 Pa. C.S.A. §167; 3701(a)(1)(i), (ii) or (iii);

(10) Robbery of a Motor Vehicle, 18 Pa. C.S.A. §167; 3702;

(11) Sexual Assault, 18 Pa. C.S.A. §167; 3124.1; and/or


e. Drug Related Crime (Act 97): Act 97 (1, 2, and 3) applies to the original commitment offense. Act 97 does not apply to Technical Parole Violations. The offenses covered under Act 97 relate to drugs only; these offenses do not include alcohol related offenses. Inmates that fit into any of the categories below will be required to pay for subsequent urine tests while under parole supervision. Check not applicable if none of these apply. It is possible for the inmate to be covered by Act 97-1, 97-2, and 97-3.

(1) Act 97-1 applies to inmates who tested positive for non-prescribed drugs while incarcerated.

(2) Act 97-2 applies to inmates who are serving a sentence arising from a conviction under the “Controlled Substance, Drug Device and Cosmetic Act.” The convictions must have occurred on or after February 20, 1990.

(3) Act 97-3 applies to inmates who are serving a sentence arising from a conviction of a “drug related crime.” The convictions must have occurred on or after February 20, 1990.

H. Facility Manager Recommendation

The eighth section in the dropdown menu under ‘edit’ in the ICSA application is divided into three subsections: Recommendation and Rationale; Pre-Release Programming (disabled January 1, 2013); and Fines, Costs, and Restitution.

1. Recommendation and Rationale

a. Recommendation – The Facility Manager/designee is responsible for selecting the recommendation radio button Yes or No in accordance with the Vote Sheet.

b. Comments - The Counselor or Unit Manager will enter the rationale for facility support or lack of support for parole. The rationale shall be stated clearly. Do not make recommendations that are within the realm of PBPP responsibility (for example, time frame for parole review, level of supervision, or programming to complete in the field).

(1) Include the following statement for RRRI eligible inmates: The current RRRI Status for Mr./Ms.____________ is certified/pending certification/pending certification withdrawn/decertified.
(2) Include the following statement for all inmates regarding Rebuttable Parole eligibility: The current Rebuttable Parole Status for Mr./Ms. ________ is eligible/ineligible/certified/not certified.

2. Pre-Release Programming – **This section was disabled.**

3. Fines, Costs, and Restitution – This section is pre-loaded from other Department applications.

I. **Supervision History**

Supervision History is the ninth section in the drop down menu under ‘edit’ in the ICSA application. PBPP staff are responsible for data entry in Supervision History. The data for supervision history will be pre-loaded from the PBPP 257 application.

J. **Statement of Residence**

The inmate shall mail a **Statement of Residence Form (Attachment 6-B)** to the person who is offering a home.

K. **Statement of Employment**

The inmate shall mail a **Statement of Employment Form (Attachment 6-C)** to the person who is offering employment.
Send this form to the person who is offering you a home. When he/she returns the completed form to you, send it to the Facility Parole Office.

STATEMENT OF RESIDENCE

Return to: INMATE NAME: _______________________________

INMATE NO: _________________________________

State Correctional Institution: ____________________________________________________

(Address)

[To be completed by provider.] Please Print (Except for Signature

Facility Parole Staff:

I ________________________________, ______________________________________

Name    Relationship (spouse, parent, friend, etc.)

(Street & No., R.D. No., or Box No.) (City) (State & Zip Code)

hereby declare my willingness to provide living quarters for the above named if he/she is released on parole. I shall expect him/her to pay rent or board in the sum of $ ____________ per ____________.

I agree to take a friendly interest in this person as opportunity affords, and I shall cooperate with the Parole Agent by reporting any irregularities that may come to my attention.

__________________________________________________________

(Signature of Provider and Date)

__________________________________________________________

(Home Telephone Number)

__________________________________________________________

(Work Telephone Number [Hours/Day Worked])

IMPORTANT: If the home is located in public or federal subsidized housing (HUD), you must have prior approval by the Housing Authority before completing this form. PBPP investigative staff will be contacting them for approval.

Notice: To avoid delay in completing the investigation, kindly indicate below directions to your residence if you are located in a rural route. The name by which the rural area is known will also be helpful.

If the inmate’s name is not on the lease, a Parole Agent must contact and inform the landlord as to the proposed plan. The Landlord must agree to add the inmate to the lease for the residence to be approved.
Send this form to the person who is offering you employment. When he/she returns the completed form to you, send it to the Parole Office.

STATEMENT OF EMPLOYMENT

Return to:  INMATE NAME: ________________________________

INMATE NO: ________________________________

State Correctional Institution: ________________________________

(Address)

[To be completed by Employer.] Please Print (Except for Signature)

Facility Parole Staff:

I agree to employ the above named person who is currently seeking parole. To the best of my ability and as conditions permit, I will provide employment in the occupation of ________________________________, at a beginning salary or wage of __________, in the event he/she is release on Parole. If his/her services become unsatisfactory, I agree to report that fact to his/her Parole Agent.

Earliest date employment will be available: ________________________________

Latest date employment will be available: ________________________________

Name: ________________________________

Position: ________________________________

Organization or Company: ________________________________

Address: ________________________________

_______________________________________________________________________

Employer’s Signature: ________________________________

Date: ____________ Telephone Number(s): ________________________________

Please indicate the best time to contact you: ________________________________

PBPP Investigative Staff will be contacting you to obtain verification.

Notice: To avoid delay in completing the investigation, kindly include directions to your place of business if you are located in a rural area. The name by which the rural area is known will also be helpful.
Section 7 – Additional Comments

A. General

1. When any Integrated Case Summary Application (ICSA) document type has been signed off and closed, an “Add Comments” button will be enabled in the application on the ICSA Document List Screen. By selecting this button, the user will be able to add additional comments to the document. Any additional comments entered will display in the approver’s section in the printed document. The comments, date and time of entry will display immediately below the name of the user who entered the comment. Each approver of the original document will receive a computer generated email notification advising that additional comments are available for review.

2. Additional Comments are saved with the current closed document. Additional Comments are not displayed in a new document that is subsequently created.

3. Additional Comments shall be used after the 13A, Parole Summary document has been signed off and closed by the parole supervisor to report changes in the inmate’s status that may affect the decision of the Pennsylvania Board of Probation and Parole (PBPP). One week prior to the Board Interview, the facility parole office will distribute a list of the scheduled inmates. The Unit team must review the listed cases for any relevant changes. Relevant changes to be reported include misconduct information and program completion/failure.

NOTE: If NO relevant changes have occurred, NO action is necessary.

4. Additional Comments will be used to report any changes in the parole recommendation. (A copy of the DC-43, Vote Sheet must be forwarded to the parole office.) The responsibility for entering any change in recommendation may be assigned per local procedures to one of the following roles: Facility Manager, Unit Manager, Corrections Counselor. The comment must include the date of the change, the new recommendation, and the reason for the change in recommendation. For example: on April 1, 2006, SCI __________ rescinds the recommendation for parole based on a March 25, 2006 fighting misconduct resulting in 60 days disciplinary custody.
Section 8 – Integrated Case Summary Application (ICSA) Routing Rules

A. General

1. The Counselor role should create all documents, but the Unit Manager role may also create all documents.

2. After the document purpose is created, the document can be routed to clerical staff for data entry or the Counselor can enter the data.

3. After the Counselor or clerical staff completes all required fields, the document can be routed to the Unit Manager for review. The application will not allow the document to be routed to the Unit Manager until all mandatory fields are completed. If changes or corrections are necessary, the document can be routed back and forth between the Counselor, clerk typist and Unit Manager. If all information is correct for Initial, PV, Continuation, and Classification Update summaries, the Unit Manager will sign off on the document and it will be closed. When all information is correct for 13A, Parole Summaries, the Unit Manager will route the document to the Facility Manager.

4. The Facility Manager will select Favorable or Unfavorable for recommendation and will route the document back to the sending Unit Manager. If no action has been taken by the Facility Manager after three days, the Unit Manager will receive a system generated email notification. The Unit Manager will follow up as necessary with the Facility Manager or have the document re-routed to the Facility Manager’s designee.

5. After receiving and reviewing the facility recommendation for a 13A, the Unit Manager will route the document to the facility Parole Supervisor for review and assignment to a Parole Agent.

6. The facility Parole Agent will review the document for content and complete the parole sections of the document.

7. The agent will route the document back to the parole supervisor. The Parole Supervisor will review the document. If changes are necessary, the document will be routed to the Parole Agent or the Unit Manager, as appropriate, for corrections. When all information is correct the Parole Supervisor will sign off and close the document.

8. Each time the Counselor or Parole Agent role re-opens an existing ICSA document, the application automatically updates with new information that was not available for display when the document was created.

NOTE: Once a document is signed off and closed by the Unit Manager (for classification summaries) and the parole supervisor (for parole summaries) the document cannot be re-opened.
Section 9 – Commutation Process

A. Commutation Process

1. The Integrated Case Summary (ICSA) – Classification Summary Update will be utilized with some content modifications for the Commutation Summary in accordance with Section 5 of this procedures manual. Content modifications are specified in the following procedures and in the ICSA Help Sections, which are available on the Bureau of Treatment Services (BTS) website and within the ICSA application. The Commutation Summary process promotes efficiency by utilizing existing computer applications and electronic reports that populate data in ICSA and provide the Board of Pardons with a comprehensive report.

2. Questions on how to file for commutation, filling out the application, the Board of Pardons rules, and a sample application are contained in the booklet titled Board of Pardons Commutation Process and Rules located in the inmate library, and on DOCNet at http://docnet.cor.state.pa.us/bis/cwp/view/asp?A=11349&Q=449935.

B. Directions for Preparing the Commutation Summary Packet

1. Using the Sample Facility Commutation Summary Notification Letter (Attachment 9-A), the BTS will notify the facility’s contact person of the inmate’s commutation application filing date and the date that the Commutation Summaries are due. The notification will include the inmate’s application.

2. The Corrections Classification and Program Manager (CCPM) or Deputy Superintendent for Centralized Services (DSCS) will coordinate scheduling and report gathering for completion of the Commutation Summary.

3. Records Office staff shall provide the following information, with noted exceptions*, on the DC-11B, Commutation/Arbitration Summary (Attachment 9-B) and send the DC-11B electronically to the assigned Corrections Counselor for placement in the Commutation Summary Packet.

   a. The Identification Summary Section shall be completed as follows:

   (1) filing date (the official Boards of Pardons filing date, month/day/year);

   (2) filing number (total number of applications the inmate has filed), (withdrawn applications are not included in the total);

   (3) inmate’s true name;

   (4) SID number (standard identification digits);
(5) Department number;

(6) Pennsylvania Board of Probation and Parole (PBPP) number;

(7) birth date (month/day/year);

(8) current age (age as of filing date);

(9) marital status (current status: single, married, divorced, separated, or widowed);

(10) aliases (every known alias on record, no nicknames);

(11) *education; and

(12) *intelligence rating (Superior, Above Average, Average, Below Average, Borderline, or Retarded).

b. The Case Data section shall be completed as follows:

(1) offense(s) that he inmate listed on the current application and indictment number(s) for which commutation is presently being sought;

(2) county or counties in which the inmate was convicted for the specific convictions listed on the present application;

(3) name(s) of Judge(s) on present application sentence(s);

(4) sentence imposed, in years and months, relative to the present application;

(5) minimum sentence expiration date;

(6) maximum sentence expiration date;

(7) reception date (date inmate was received initially into the Department);

(8) total time served, present sentence (years, months, and days from effective date to filing date);

(9) total continuous time served; if the inmate was paroled from a previous sentence(s) to the present sentence, record continuous time served to filing date. If inmate is released on parole, bail, or escapes, the sentence is calculated from the date he/she is returned to the Department; and
(10) facility placements for this offense. A copy of the inmate’s Move Report, which lists in chronological order all Department transfers from initial reception to the present location, with transfer dates and reasons.

c. Accomplices and Disposition

(1) The Accomplices and Disposition Section shall be completed, if the information is available, as follows:

(a) name(s) of co-defendants;

(b) Department number(s);

(c) SID number(s);

(d) sentence – charge(s) and sentence(s);

(e) present status (serving sentence, paroled, commuted, etc.); and

(f) where confined (name of facility).

(2) If no information about accomplices is needed or available, then “None” should be typed next to the Accomplices and Disposition.

d. Detainers

(1) The Detainers Section shall be completed as follows (if there are more than two detainers, a copy of the electronic version of the detainers may be attached):

(a) identification of issuing authority as city, county, state, of federal;

(b) date when charged was lodged;

(c) detaining authority;

(d) charge;

(e) incident/warrant number; and

(f) detainer sentence (in years and months).

(2) If no information is needed or available, then type “None” next to “Detainers.”
e. Offense History

The Offense History Section shall be completed as follows:

(1) probation violations (total number);
(2) adult arrests (total number of criminal arrests);
(3) adult convictions (total number of criminal convictions), each criminal charge is counted as a conviction;
(4) adult confinements (total amount of criminal confinements);
(5) parole violations (total number);
(6) locations and dates of prior confinements (facility names and locations, and dates for all known confinements for past offenses).

f. The Narrative Summary of Previous Offense History shall include the following:

(1) summary of type and pattern of offense (juvenile and adult, past and present); and
(2) author’s name and job title.

g. Miscellaneous Data

If no information is needed or available, then type “None” next to the “Miscellaneous Data” heading. Otherwise, this section should be completed in the following manner:

(1) all previous public hearing dates should be listed by month and year, this may be found in Section Five of the DC-16E, Sentence Status Summary. Do not include Board of Pardons merit reviews (where filings were denied public hearings), filings withdrawn, hearings continued, or hearing decisions reconsidered;
(2) sentences previously commuted and dates;
(3) dates for previous parole (sentences from which previously paroled and dates);
(4) record dates of any previous parole violations and sentence(s) violated;
(5) amount of time in the community before parole violation, record total served on previous parole(s) before violation(s) occurred;
(6) if the inmate is presently a Convicted Parole Violator (CPV), record back time the inmate has served; and

(7) additional data that may be pertinent.

h. File the **Notice Commutation Applicant Form (Attachment 9-C)** on top of the left side of the **DC-15, Inmate Record Jacket**.

4. Inmate Needs Assessment

a. An inmate applying for commutation or pardon shall be assessed using the following assessment tools: Risk Screen Tool (RST), Texas Christian University Drug Screen (TCU), Criminal Sentiments Scale-Modified (CSS-M), and Offender Violence Risk Typology (OVRT).

b. With the exception of the OVRT, this assessment data will populate the Classification Summary Update.

c. A copy of the completed OVRT will be included in the packet.

5. Existing documentation of pre-incarceration information shall be combined with facility reports that encompass the record from the inmate’s reception to present. This information shall be compiled in a narrative format as described below and documented in the Classification Summary Update by the Counselor.

a. Enter the statement “Commutation Summary” in the Other Problem Areas text field of the Additional Information section of the Classification Summary Update so it displays on the Face Sheet.

b. Conduct Report

   (1) The report is a narrative summary of the total number of the inmate’s class one and two misconducts in the Classification Summary Update Section 6.1 Overall Adjustment. Highlight misconducts violating the crimes code of leading to an arrest (must be specific) and misconducts resulting in Disciplinary Custody. Describe patterns of misconducts such as assault, sexual misconduct, abuse of drugs or alcohol, possession of contraband (specify), theft, escape, and participation in major or minor inmate disturbances or violation of work or housing rules. Emphasize extended years without misconducts.

   (2) The Classification Summary Update Section 6.3 Misconducts provides an accurate report of the misconduct history from August 1997 to the present in the Commutation Summary.
(3) Misconducts that occurred prior to August 1997 are not available electronically and must be summarized in the Classification Summary Update Section 6.1, Overall Adjustment. When applicable, this information is found on the DC-17, Conduct Record in the DC-14, Counselor File, and must be attached to the Classification Summary Update as a supplemental document.

c. Educational Records

(1) The Academic and Vocational Educational Report data must be included in Section 5.3 of the Classification Summary Update document.

(2) Information can be obtained from the Academic and Vocational Education Report, by electronic copy of the DC-47C and existing documentation of pre-incarceration information.

(3) The School Principal is responsible for providing the electronic Academic and Vocational Education Report to the Corrections Counselor. This report is a chronological list of the classes (course title) attended and the progress made or completion. Include the names of certificates received.

d. Work Report

(1) The Work Report is included in narrative format in the Employment History Section 5.4, of the Classification Summary Update and includes the summary of facility and community employment.

(2) The Inmate’s Employment history up to time of arrest is available from existing documentation of pre-incarceration information and self-report for documentation in this section. The inmate’s pattern of stable employment or frequent job changes must be documented to reflect the inmate’s work history.

(3) The facility Work Report is available on DOCInfo under Inmate Employment, Previous Work tab; however, the inmate may have had work assignments that predate the computer application. Therefore, a complete facility Work Report can be obtained by electronic copy from the Corrections Employment and Vocational Coordinator (CEVC).

(4) Emphasize the inmate’s receipt of a license or certification for a skilled or a trusted position while in the Department.

e. Medical Report

The Medical Report information must be entered in the Medical History Section 5.10, of the Classification Summary Update and includes the following:
(1) Medical information can be accessed from a review of existing documentation of pre-incarceration information and data in the Inmate Status System (Medical Status Summary, Employment Restrictions, Activity Restrictions, Assistive Devices, Functional Limitations, and Medical Housing Recommendations).

(2) The Commutation Physical Examination Summary (refer to Department policy 13.2.1, “Access to Health Care,” Section 3, Attachment 3-B) will only be completed if requested by the Facility Manager based on the need for additional medical information or at the Facility Manager’s discretion.

(3) The Corrections Health Care Administrator (CHCA) shall ensure:

   (a) the completion of the Commutation Physical Examination Summary if requested by the Facility Manager, in accordance with Department policy 13.2.1, Section 3;

   (b) the completion of the psychiatric examination, in accordance with Department policy 13.8.1, “Access to Mental Health Care,” Section 3, if requested by the Facility Manager; and

   (c) placement of the Notice Commutation Applicant Form in the medical record.

(4) The physical screening will be completed at the time of each application if requested by the Facility Manager. The summary will report the date of the most recent physical exam and a description of the inmate’s present health. It will list all abnormal findings and report a brief history of the dental and medical treatment the inmate received. The summary will describe any long-term physical disabilities and any treatment that may continue after release. It will conclude with a list of all outside consultants required for current medical report concludes with the Physician/Certified Registered Nurse Practitioner/Physician Assistant’s signature.

f. Inmate Accounting Report

(1) The Inmate Accounting Report is entered in the Financial Section 5.5 of the Classification Summary Update; information can be obtained by electronic report from the Business Office, Inmate Accounts and existing documentation of pre-incarceration information.

(2) Focus on the inmate’s spendable funds, savings, and outstanding debts (total balance owed concerning the Crime Victims Compensation Fund (CVCF), Act 143, and Act 84) at the time of the report.
(3) Summarize other factors regarding the inmate’s significant assets or debts in the community. Explain if the inmate has received Public Assistance or SSI and for what reason.

(4) Review the inmate’s personal property, savings/checking, fines, costs, restitution, bills, loans, credit cards to assess his/her financial status regarding his/her release plans and community reintegration if commutation is granted.

g. Chaplain’s Report

(1) The Chaplain shall briefly report the inmate’s spiritual program involvement, if he/she held leadership/offices in religious organizations and how active he/she practiced his/her faith at the facility’s organized religious services.

(2) The Chaplain’s Report shall be e-mailed to the Counselor. The Counselor shall briefly summarize the Chaplain’s Report in the Counselor Summary Section 9 of the Classification Summary Update.

h. Counselor Evaluation

(1) The Counselor Evaluation is entered in the Counselor Summary Section 9 of the Classification Summary Update.

(2) The Counselor will summarize the issues which are appropriate to the inmate’s individual plea for executive clemency in the commutation application. Positive or negative behavioral change shall be the central theme of the Counselor Evaluation, with emphasis on clinical findings and observations with supporting documentation.

(3) Specific areas to be addressed include time served on sentence, programming status, assessment testing analysis, level of remorse and responsibility, criminal history, potential for relapse and recidivism, public safety risk, release planning, and Facility Support/Endorsement.

(4) The issue of justification for Commutation processing versus availability of Court Appeals and/or Parole must be addressed regarding the category of Clemency.

i. Psychological Report

(1) The Psychological Report is included in the Mental Health History Section 7.9 of the Classification Summary Update. This information is populated from the most recent closed Psychological Report.

(2) The existing psychological evaluation will be utilized.
(3) An updated psychological report shall only be completed for a commutation applicant if requested by the Facility Manager in accordance with Department policy 13.8.1, Section 1, Attachment 1-C.

j. The Commutation Summary will include additional sections that are not specified in these procedures but are contained in the Classification Summary Update format.

k. Psychiatric Examination

(1) Only when directed by the Facility Manager, the psychiatric provider [psychiatrist or Certified Registered Nurse Practitioner, Psychiatric Services (PCRNP)] will conduct a new psychiatric examination for commutation.

(2) If conducted, a new psychiatric examination will document the examination in a dictated and signed standard report in accordance with Department policy 13.8.1, Section 3 and Attachment 3-D.

6. A Commutation Summary Packet is to be filed only in the DC-15. A copy of the summary and the original vote sheet are placed under the “facility” tab.

C. Staffing Process

1. The Counselor will prepare a DC-46 to determine whether to support the application.

a. The DC-46 should briefly summarize the crime(s) the inmate is requesting be commuted, contributors to his/her criminal conduct, compliance with his/her corrections plan, conduct, work performance and contributions to the inmate/prison community, his/her public risk, and re-entry plans including employment and housing plans, and merits of the application. Add key factors and reasons for the recommendation.

b. The DC-46 shall make recommendations for special programs should the inmate be granted commutation and he/she is returned to the community.

c. A recommendation regarding commutation of multiple indictments can specify those supported and not supported.

2. Completion of the DC-46

a. Each voting staff’s rationale for or against commutation must be recorded on the DC-46.

b. A favorable recommendation is not to be based on the inmate’s admission of guilt, as the issues in question are mercy and evidence of change. The recommendation is based on an evaluation of the application and commutation issues.
3. The Unit Manager chairs the staffing team that interviews the inmate to review his/her application and review the conclusions of the commutation summary. The staffing team should be an odd number and include a Corrections Officer. The inmate shall be informed that the Facility Manager/designee makes the final recommendation after consideration by the Special Review Committee.

4. The Special Review Committee consists of the Major for Unit Management, CPM, Deputy Superintendent for Facilities Management (DSFM) and Deputy Superintendent for Centralized Services (DSCS). Each member votes independently. The committee does not interview the inmate.

5. The Facility Manager/designee has the ultimate vote to recommend commutation and his/her vote overrides all subordinate staff votes. A Facility Manager/designee’s vote is the facility’s final recommendation. Rationale for the recommendation is mandatory.

6. Follow-Up by Facility Manager – Staff Recommendations
   a. The completed DC-46 is routed back to the Unit Manager. Using the Staff Recommendation (Attachment 9-D), the Unit Manager will summarize the following:
      (1) information on the DC-43 by the Unit Management Team;
      (2) Special Review Committee’s unanimity, majority/minority, or split opinion, with a brief rationale for each; and
      (3) Facility Manager/designee’s recommendation with the rationale.
   b. The staff recommendation, with the Facility Manager’s signature, will be appended to the Commutation Packet immediately under the Commutation Summary.

D. Inmate Refusal to Participate in the Commutation Assessment

1. Staff shall explain refusal consequences to the inmate, and provide appropriate counseling.

2. An inmate’s refusal to participate in any part of the commutation assessment process shall be documented by the Unit Manager recording the refusal reasons in the ICAR in the Unit Management System with a copy placed in the DC-14.

3. The inmate shall sign the Refusal to Undergo Commutation Assessment Procedures (Attachment 9-E). The Unit Manager shall countersign the form with two witness signatures. The inmate will be given a copy of the completed form, and a copy will be attached to the Commutation Summary. Staff will complete the summary from information contained in the records.
4. If the inmate agrees to participate before the summary is completed, the assessment process will be completed.

E. Final Assembly of the Commutation Summary

1. The Commutation Summary and packet are assembled in accordance with the Commutation Summary Process Checklist – Revised (Attachment 9-F).

2. A maximum of two commutation summaries (representing the current and most recent previous application) are contained in a commutation packet.

F. Commutation Executive Summary

1. The Executive Committee consists of the Secretary, Director of BTS, and the Chief of Psychology (BTS). They will review all commutation applications and reports submitted to the Board of Pardons.

2. The Facility Manager/designee shall ensure that an Executive Summary is completed for each inmate commutation application.

3. An Executive Summary consists of the factors related to the crime and the inmate’s overall criminal record, his/her participation in programs, community support system, and an assessment of the public safety risk should commutation be granted. The summary shall have four brief sections and should include narrative information under each section as follows:

   a. Factors Related to the Crime and Overall Criminal Record

      This section should cover areas of concern such as substance abuse, assaultive behavior, domestic violence, deviate sexual behavior, mental health issues, and/or other factors that were related to the commission of the crime, and the inmate’s prior criminal history.

   b. Program Participation

      This section should cover facility program participation that deals with the factors previously identified as being related to the crime (treatment for substance abuse, violence prevention), batterer’s intervention, sex offender, mental health, etc.) and the need to complete recommended educational and vocational goals/objectives.

   c. Community Support System

      This section should contain a narrative that deals with available community resources (treatment, support by significant others, and supervision that is needed by the inmate). The treatment, support, and structure should address the needs specified in the above sections. Include reference to release plans and the inmate’s re-entry
needs concerning reintegration back into the community with viable home and job plans.

d. Public Safety Risk

This section should contain a discussion of the inmate’s potential for relapse and recidivism regarding community risk and safety issues. Describe what may be the likely consequences if a specific community support system breaks down. For example, if the inmate terminates treatment, experiences relationships or marriage problems, or he/she starts to abuse substances, what is the likelihood of further criminal acts, and what form are they likely to take?

G. Follow-Up Reporting between Final Staffing and the Inmate’s Receipt of Final Decision

The DSCS is responsible for the immediate reporting of an inmate’s status change to the Pardons Commutation Specialist (PCS).

H. Transfers of Commutation Inmates

An inmate shall not be transferred (except for an emergency) until the final staffing and the Commutation Summary is completed. Emergency transfers shall be communicated to the PCS immediately.

I. Commutation Summary for a Capital Case

A Capital Case inmate is permitted to file for commutation within 10 days after receipt of a warrant of execution. The Commutation Summary will comply with the guidelines of this document with the exclusion of a staffing, staff review or staff recommendation. A statement “The Pennsylvania Department of Corrections takes no position on the death penalty. Therefore, no recommendation is being made” will be typed as the staff recommendation. The Facility Manager/designee’s signature must be affixed to the statement.

J. Department Staff Attendance at Pardons Board Hearings

1. Any Department staff member may attend a Board of Pardons public hearings as an observer, for training purposes only, if authorized by the Facility Manager/designee. Training Observation is official business.

2. Contract staff and volunteers may attend Board of Pardons hearings if authorized by the Facility Manager/designee.

3. Trained Pardons Case Representatives, which include volunteers, are the only staff members permitted to attend the Board of Pardons hearing to speak in support of an inmate's application.
K. Department Staff Sending Support Letters and Signing Petitions Supporting Inmate Applications

No staff, contracted staff, or volunteer staff shall send a personal letter to the Board of Pardons or sign a petition supporting an inmate’s application. Staff, contract staff or volunteer staff who has personal knowledge of the inmate may send his/her comments to the Unit Manager for consideration of the merits of the application.

L. Pardons Case Representative Program

1. Pardons Case Representatives are volunteers from the community and Department staff. The PCS will assign a Pardons Case Representative to present advocacy on behalf of a state or county sentenced inmate. A representative must complete training and a Pardons Case Representative Application (Attachment 9-G) before he/she can represent an inmate before the Board of Pardons. The name of the inmate’s assigned representative is sent to the inmate and CCPM. The CCPM makes arrangements for the representative’s personal interviews with the inmate.

2. The Pardons Case Representative training program includes the following sessions:

   a. Session 1 – one hour – session 1 will discuss the following topics:

      (1) review of Board of Pardons;

      (2) publication “Commutation in Pennsylvania;”

      (3) review of Pardons Case Manual; and

      (4) review of PA Code 37, Chapter 37, Chapter 81, Board of Pardons Rules.

   b. Session II, four hours – session II will discuss the following topics:

      (1) observation of Board of Pardons hearings; and

      (2) “meet and discuss” with PCS regarding the process.

   c. Session III – four hours – session III will discuss the following topics:

      (1) review of advocates “information packet;”

      (2) identifying salient data; and

      (3) developing strategy for presentation.
d. Session IV – three hours – session IV will discuss the following topics:

   (1) techniques of advocacy: preparing, interviewing, presenting, responding via writing; and

   (2) an overview of the Board of Pardons Member.

e. Session V – four hours – session V will discuss the following topics:

   (1) a mock presentation. Trainee will be provided the information packet, will prepare salient features and present to a mock panel; and

   (2) evaluation.

M. Giving an Inmate the Commutation Decision

1. The Board of Pardons and Governor’s decisions will be emailed to the Facility Manager/designee and appropriate staff for immediate notification to the inmate.

2. The Unit Manager must give the inmate the Board of Pardons’ or Governor’s final decision and note the decision in the ICAR in the Unit Management System.

3. Staff must monitor and evaluate the inmate’s response to the Commutation decision for possible mental health decompensation and subsequent care, custody and control issues.

4. Staff must follow up with appropriate referrals as needed. The Board of Pardons will send the inmate at letter with the final decision within a week.

N. Issuing Warrants of Commutation

1. A Commutation Warrant and receipt will be sent to the facility. The inmate must sign a receipt agreeing to the terms of commutation. The inmate keeps the original warrant.

2. Warrants refused by an inmate must be returned to the Board of Pardons. The refusal is documented, dated, and witnessed by staff. The refusal is attached to the warrant.

3. Records staff will complete a modified DC-16E to be given to the inmate if the Governor has signed the Commutation Warrant. A copy of the warrant shall be filed in the DC-15.

4. A commutation order signed by the Governor for life or death sentenced inmates or inmates serving a sentence for 3rd degree murder, voluntary manslaughter, attempt to commit 3rd degree murder to attempt to commit voluntary manslaughter, shall contain the requirement that the inmate serve at least one year in a Community Corrections Center/Community Contract Facility prior to the inmate’s release on parole unless
transfer of the inmate to a Community Corrections Center/Community Contract Facility is not appropriate due to a certified terminal illness.

5. A referral for Community Corrections placement will be completed in accordance with Section 4 of this procedures manual, and sent to the Community Corrections Center (CCCD) Regional Director.

6. The Facility Manager/designee shall notify the sentencing judge of the procedures for placement of a life sentenced inmate whose sentence has been commuted into a community corrections center/community contract facility.

O. Placement of Act 16 Commuted Inmates

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS

REFUSAL TO UNDERGO COMMUTATION ASSESSMENT PROCEDURES

Facility ____________________________________________       Date ______________________

Name of Offender ____________________________________________ No. ______________________

I, the undersigned, an offender at the above-named facility, hereby refuse to participate in the

Commutation assessment process established by the Department of Corrections and the above-named

facility. I understand that I may, at any time, agree to participate in the commutation assessment process,

but that the assessment (tests, etc.) will thereafter be administered only as soon as reasonably possible.

I understand that the facility is under no special obligation to expedite completion of my assessment, but will

attempt to do so within a reasonable time. I understand that refusing to participate in the complete

commutation assessment process will result in the Board of Pardons not having complete current information

upon which to base a commutation decision.

In signing this, I ____________________________________________________________,

certify that the above has been read and fully explained.

______________________________
(Signature of Offender)

______________________________
(Signature of Unit Manager)

Signatures witnessed:

BY _______________________________

BY _______________________________
Section 10 – Parole Summary – County Parole

A. General

1. Inmates serving county sentences who are being housed in a Department facility may apply for county parole at any time during the sentence; however, some counties have specific eligibility policies.

2. Staff may also initiate a county parole application.

3. The **DC-309A, Application for County Parole (Attachment 10-A)** is submitted to the sentencing court with the **DC-43, Correctional Plan** and the Misconduct Tracking Report attached.

4. There is no requirement for a staffing, Vote Sheet, or recommendation by staff.

5. When an inmate is seeking “early parole” (parole before the expiration of his/her minimum), it is the inmate’s responsibility to contact the court. There is no requirement for staff involvement in the “early parole” process.

B. Responsibilities

1. Records Office

   With the exception of the Personal History section, records office staff will complete the County Parole application two months prior to the expiration of the county minimum sentence, and forward it to the Unit Manager for continued processing by the counselor.

2. Counselor

   The counselor shall provide sufficient information regarding the inmate’s adjustment and programming to assist the Judge in making his/her decision. This information will be provided by attaching the following to the **DC-309A**:

   a. Misconduct Tracking Report;
   
   b. **DC-43, Correctional Plan**; and
   
   c. scheduling

   The counselor will interview the inmate and complete the release plan section of the **DC-309A**. The application and attached documents will be forwarded to the Facility Manager for signature. The completed and signed **DC-309A** and attached documents should be forwarded to the court one month prior to the minimum sentence expiration date. Philadelphia County has requested that all applications for county parole be mailed to the following:
Correspondence for any other county should be directed to the sentencing Judge or (in the case of retired or deceased Judges) to the President Judge of the county.

3. Early parole applications need not conform to this schedule. Since this is a matter between the inmate and the court, there is no requirement for staff involvement in the process.
Section 11 – Progress Reporting – Interstate Transfers (ICC)

All contracts with other states, the Interstate Compact for Corrections (ICC) contain provisions for regular progress reports to the sending state. This section provides a standard schedule for reports, as well as a guide to specific content. The Interstate Compact Coordinator at Central Office will advise the facilities (housing interstate inmates) one month prior to the due date for Progress Reports; these reports will be completed twice per year.

A. Initial Classification

All inmates received from other states through the Interstate Compact shall be classified within 60 days in accordance with Department policy 11.2.1, “Reception and Classification,” Section 2. An Initial Classification Summary shall be completed in accordance with Section 2 of this procedures manual.

B. Progress Reports

1. The inmate’s assigned counselor shall complete a progress report every six months. The report shall be formatted as a Classification Summary Update in accordance with Section 5 of this procedures manual and including the content described below.

2. The Counselor Evaluation Summary section of the Classification Summary Update shall include narrative information as follows:

   a. Conduct

      Description of the number and nature of misconducts during the report period, as reported on the DC-17, Conduct Record and/or Misconduct Tracking Report, including analysis with relevant details of behavioral patterns.

   b. Educational-Vocational Participation

      Attendance records and a synopsis of academic/vocational participation and achievement.

   c. Work

      Description of the nature of the work which the inmate has performed, with summarization of performance, as recorded on the DC-48B, Inmate Progress Report (DC-ADM 816, “Inmate Compensation,” Attachment 1-E).

   d. Medical Report

      Significant treatment which has been provided during the report period, with mention of any continuing needs for medical care.
e. Treatment

   Attendance and progress in treatment programs, religious activities, recreational activities, and other programs.

f. Psychological-Psychiatric Report

   Reference to psychological or psychiatric reports which may have been obtained (Copies of such reports should be attached).

g. Staff Evaluation

   Other relevant data not included in above categories and overall assessment of progress by staff with recommendations for further program involvement.

h. Cover Memo

   (1) the memo subject will be “Progress Report for ICC”;

   (2) a cover memo will identify the inmate and state briefly that the Progress report and any other reports required by the sending state are attached; and

   (3) Facility Manager’s signature with date of approval.

3. The Facility Manager’s office shall ensure that the report is sent to the Interstate Compact Coordinator.
Section 12 – Court Ordered Evaluation Format

Pennsylvania Rules of Criminal Procedure 1403 B provides the court with the option of having an evaluation completed in one of the Department’s Diagnostic and Classification Centers (DCCs). This section explains the format to use when completing a court-ordered evaluation.

A. Psychological Report

A psychological evaluation shall be completed, according to the format contained in the Psychological Services Manual.

B. Specifically Requested Reports

Court-ordered evaluations occasionally include orders for specific reports. The most commonly requested reports are psychiatric evaluations and/or social histories. If these reports are requested, they shall be completed according to established formats. (The social history shall be in narrative form and shall include the source of information from which the report was written.)

C. Cover Letter

A cover letter, addressed to the court, shall be written under the signature of the Director of the DCC. The letter shall contain staff’s behavioral observations of the inmate during the evaluation process and a statement, which outlines the inmate’s adjustment. Additional comments, as staff deems appropriate, may be included in the cover letter.

D. Composition of Evaluation

The evaluation shall be compiled as follows:

1. cover letter;

2. psychiatric/psychological evaluation; and

3. specifically requested reports.

E. Processing Time

The evaluation shall be completed within 45 days. The evaluation shall be submitted to the court in a timely manner to allow the inmate to be returned to the county within the allotted time.