Parole Decision Making in Montana

Presentation to the Montana Commission on Sentencing

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Overview

01 Parole Decision Making in an Evidence-Based World

02 Parole in Montana

03 Parole-Related Policy Options
Effective parole decision making has evolved.

A policy-driven, evidence-based approach involves:

- **Consensus on Goals**: Parole board members agree on the goals and methods to achieve the desired outcomes as a group, not as individuals.

- **Focus on Reentry**: Aligning the decision-making approach with the goals of effective transition and reentry of offenders.

- **Structured Decision Making**: Structured, evidence-based parole decision making is the optimal strategy for paroling boards.
Structured Decision Making and Its Benefits

Structured decision-making tools, combined with clinical professional judgment, predict risk of re-offense more effectively than professional judgment alone. Decision makers who rely exclusively on their experience and professional judgment predict recidivism at rates no better than chance.

Benefits of structured decision making include:

- Continuity of parole practices as individual decision makers move in and out of their positions
- Stability of practice and accountability of decisions
- Transparency and accountability to victims and stakeholders
- Cohesive and coherent connection between the group of parole decision makers as a team
- Clear articulation of relevant factors to be considered for release decisions and conditions of release

Harris, Andrews, Bonta, and Wormith 2006; Grove et al., 2000
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The parole grant rate is significantly higher at reappearance than at initial appearance.

Montana Board of Pardons and Parole Hearings, FY2014

- Initial Appearance: 760 cases, 56% granted, 44% denied
- Reappearance: 371 cases, 30% granted, 70% denied

Montana Board of Pardons and Parole, “Biennial Report January 2015”
In FY2014, 36% of 1,671 parole outcomes were delayed release due to pending completion requirements.

Montana Board of Pardons and Parole Hearing Outcomes, FY2014
n = 1,671

- Parole Delayed Until Successful Completion - 36%
- Parole to Detainer - 2%
- Administrative Review - Request a Return - 19%
- Administrative Review - Request a Return - 7%
- Pass to Discharge - 11%
- Parole - 12%
- Denied Reappear - 13%

Note: Does not include rescission or revocation hearings.
*Includes offenders who were given the option to request a hearing after completion of board directives.
The gap between initial parole eligibility and parole decision has more than tripled to 26 months since 2000.
40% of all parole releasees in FY2014 were stepped down to a prerelease center.

Montana Board of Pardons and Parole, Parole Release Locations, FY2014

- Prerelease: 233
- 10 Day Furlough: 123
- Montana State Prison: 95
- Shelby: 55
- Regional Prison: 26
- Montana Women's Prison: 19
- Other: 18*
- Custody: 8**
- Montana State Hospital/Montana Developmental Center: 4

*Includes ADT, Nexus, Eikhorn, WATCh, and Start
**Includes Montana Developmental Center, Montana State Hospital, County Jail, Federal Custody, Out of State

Montana Board of Pardons and Parole, “Biennial Report January 2015”
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Best Practices

• Develop meaningful partnerships with institutional corrections, community supervision, victim advocacy
• Use good, empirically-based, actuarial tools to assess risks and criminogenic needs of offenders
• Target the use of finite resources toward risk reduction and reentry readiness
• Use influence to leverage institutional and community resources for medium- and high-risk offenders to address their criminogenic needs
Policy Options: Preparing for Parole Release

1. **Enhance communications** and collaboration in the development of the parole report case summary that is submitted to the board prior to the parole hearing to ensure the board receives complete, timely, and accurate case-level information.

2. **Strengthen reentry planning process** to ensure that the initial transitional planning is predicated on treatment providers’ recommendations and assessed risk and needs. Communicate the plan to the board in the parole report for consideration at the parole hearing.
3. **Defer to treatment experts** to determine the treatment and programming needs of inmates. Ensure that DOC has the sole responsibility for assessing and prescribing inmates’ treatment and programming through the established assessment protocols, using a validated risk and needs assessment, with treatment experts to prescribe the treatment plans.

4. **Prioritize prerelease centers for higher-risk** and -needs people who are approaching parole eligibility to prepare them for transition to the community on parole.
5. **Maximize parole readiness** at the earliest point of minimum parole eligibility for drug and property and other nonviolent offenders. Ensure DOC prioritizes the placement of these people into core risk-reducing programs and target completion by the time of the initial parole hearing.
Policy Options: Parole Decision Making

Best Practices

• Use good, empirically-based, actuarial tools to assess risks and criminogenic needs of offenders
• Develop and use clear, evidence-based, policy-driven decision-making practices and tools
• Fashion condition-setting policy to minimize requirements on low-risk offenders, and target conditions to criminogenic needs of medium- and high-risk offenders
• Use the parole interview/hearing/review process as an opportunity to—among other goals—enhance offender motivation to change
6. **Adopt formal parole guidelines** to establish informed, structured, actuarial decision making. Factors should include: core risk-reducing treatment and programs; in-prison behavior, risk and needs assessment; and offense severity.

Adopt the Montana Offender Reentry and Risk Assessment (MORRA).

Set special conditions based on assessed criminogenic needs.

*Policy Option #13 in Policy Options Handout*
7. **Enhance transparency** by adopting a single, comprehensive list of reasons related to risk and parole readiness to be used uniformly by all panels. Continue to provide reasons for both parole granted and parole denied decisions.

8. **Shorten the maximum deferral period** from the point of parole denial or deferral to the next hearing or review from six years to one year for drug and property offenses, and other nonviolent offenses.

*Policy Option #13 in Policy Options Handout*
Best Practice

• Develop policy-driven, graduated responses to parole violations that incorporate considerations of risk, criminogenic need, and severity; assure even-handed treatment of violators; and utilize resources wisely.
9. Implement an integrated supervision response matrix for DOC and the board to ensure the board’s responses to parole violators result in a smooth continuum of responses to violation behaviors, including revocation. Reserve revocations for serious violations and maximize the use of lesser, intermediate sanctions (including custodial sanctions).

Streamline the revocation process to minimize delays in detention pending revocation hearings and to support swift, certain, and proportionate sanctioning responses.

*Policy Options #14 and #23 in Policy Options Handout*

10. Strengthen the early discharge provision jointly with DOC for cases with a sustained period of supervision compliance. Eligibility criteria should consider offense category, risk and needs assessment, community stability, and supervision compliance.
Policy Options: Parole Board

Best Practices

- Develop and strengthen agency-level policy making, strategic management, and performance measurement skills/capacities
- Develop and strengthen case-level decision-making skills/capacities

11. Professionalize the parole board by appointing three full-time, paid board members, enabling the board to make more consistently informed decisions.


13. Enhance the use of data through expanded parole data collection and analysis and establish performance measures and outcomes.
14. Create a strategic plan based on assessed needs and priorities in order to strengthen the board’s strategic management and to achieve legislative mandates.

15. Support professional development by establishing minimum in-service training requirements for board members and staff based on assessed needs.
Thank You

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