

PROBATION & PAROLE OFFICER
ADULT OFFENDER PROGRAMS & SERVICES
SURVEY
FINAL REPORT

COMMUNITY CORRECTIONS COUNCIL
OCTOBER 2004

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OVERVIEW

In Spring 2004, the Community Corrections Council (Council) created a Probation/Parole Officer Adult Offender Programs and Services Survey (Survey) to assist in the identification of needs of community adult offender supervision in Nebraska. The Survey was also developed to identify the current availability and circumstances of programs and services utilized by adult offenders supervised in the community on probation or parole.

Two hundred seventy-two (272) surveys were mailed to Probation Administration (Probation) and Parole Administration (Parole) employees. One hundred seventy-two (172) responses to the survey were returned to the Council yielding over a 63.2% response rate—an overwhelming reply from the officers in the field. Of the 250 probation officers, 157 responded (63% response rate); and of the 17 parole officers, 15 responded (88.2% response rate).

Significant time and effort was taken by the respondents to complete the surveys. Officers expressed their individual ideas and concerns for the systems in which they work and their concerns for the needs of the clients on probation and parole.

This Survey Report attempts to summarize the most significant findings, gives an overview of the comments articulated by the officers, and lays out the specific data attributed to each question.

The “Principal Findings” were formed from the Survey table, or grid, in which the respondents were asked to identify the availability of programs or services for adult offenders. The “Comments by Respondents” quantifies and describes the general responses and additional narrative by the respondents.

The complete Survey with the cumulative data appears at the end of this report broken out by Probation only (pink), Parole only (yellow), and Probation and Parole together (blue).

The Probation responses were broken down into greater Nebraska and metro. Metro includes Douglas, Lancaster, and Sarpy Counties. Greater Nebraska includes all areas outside of those counties. “Rural” refers to greater Nebraska.

The Council has made this Survey Report available to Probation and Parole employees, the courts, and any other entity who will benefit from understanding the challenges Probation and Parole currently face in delivering services and providing adequate supervision to adult felony offenders.

The information gathered through the Survey and comments made by probation and parole officers are opinions of the respondents and may not reflect the opinions or recommendations of the Council.

EXECUTIVE SUMMARY

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In Spring 2004, the Community Corrections Council (Council) created a Probation/Parole Officer Adult Offender Programs and Services Survey (Survey). Two hundred seventy-two (272) surveys were mailed to Probation Administration (Probation) and Parole Administration (Parole) employees. One hundred seventy-two (172) responses were returned to the Council yielding over a 63% response rate.

The information gathered through the Survey and comments made by probation and parole officers are opinions of the respondents. Many statements may be made from the Survey results:

- Twice as many probation officers said day reporting was unavailable as available. Of the 65 stating that day reporting services are needed, 49 were from rural areas. Only 7 rural officers said day reporting was available.
- Gang related services were identified as least available for probation officers. Nineteen respondents said they were available while 62 said they were needed but unavailable. Of the 62, 35 were from rural districts and 27 were from metro districts.
- Sex offender services of all kinds dominated in apparent need for both probation and parole officers. Residential sex offender treatment was identified as least available.
- Substance abuse residential treatment was identified as available by 73 Probation respondents while 43 identified it as needed and 23 as available but not affordable. Forty-two respondents said that there is a waiting list for substance abuse inpatient treatment at an average of 2.75 months.
- Halfway houses were available to 74 of the Probation respondents while 55 identified halfway houses as needed. Three out of 4 respondents who indicated the need for halfway houses were from the rural districts. The average waiting period for halfway houses was 2 months.
- Day reporting centers were most identified as not available but needed by Parole respondents.
- Of parole officers responding, the average indicated wait for inpatient substance abuse treatment is 6.75 months and the average wait for residential substance abuse treatment is 4 months.
- One hundred one, or 64.33%, responded that Probation had tried new or innovative programs in the last three years. Fifty-six, or 35.67%, reported they did not feel Probation had tried any new or innovative programs.
- The Work Ethic Camp (WEC) was identified by 35 by probation officers as the program that had provided most benefit to offenders. Eleven probation officers

questioned the success of WEC, noting that an intensive treatment component is needed. One officer wrote, "I believe WEC provides a much needed service. The problem occurs when the probationers return to same community and same using friends."

- Also identified as most effective were cognitive based programs.
- All officers, both metro and rural, said funding issues were a primary barrier to improving services for their clients.
- Intensive Supervision Probation (ISP) is thought of as extremely valuable. ISP is "an excellent form of probation and all probation should be designed this way."
- Affordable and accessible programs were repeatedly listed as a primary need.
- Needs for parole officers were listed as: increasing all substance abuse services, increasing sex offender services, better psychiatric care, and availability of medication for parolees when needed. In addition, better communication with administration and the Parole Board would be helpful.
- Of the 157 probation officers that responded, the number one need for assisting them in fulfilling their duties was reduced caseload. Additional staff ranked second. Staff development training, increased salary, and officer safety were ranked third, fourth, and fifth respectively. Equipment upgrades ranked sixth, or last, as most helpful to fulfilling their duties.
- Probation and parole officers repeatedly identified the need for more affordable services and substance abuse treatment funding.
- Both rural and metro probation officers as well as parole officers identified the need for additional officers and reduced caseloads.
- Rural probation officers identified lack of programs/services options and lack of adequate providers as a primary issue, and 11 officers stated location is their number one barrier to improving services. There is awareness that rural areas frequently lack a sufficient number of clients to justify local, affordable programming or services.
- This officer's statement is the best overview of officers' comments: "If we in justice organize and standardize, we just might have a shot at prioritizing needed programming. We are very weak in the programming arena. We need leadership and funding, but most of all we need a coordinated response. Service will be developed if we identify and prioritize what we need and have a way to pay for them (lets open a dialogue with the public health system)."

PRINCIPAL FINDINGS

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The “Principal Findings” were formed from the Survey table, or box, in which the respondents were asked to identify the availability of programs or services for adult offenders. The Probation data was able to be separated into metro (Douglas, Lancaster, and Sarpy Counties) and rural (all other counties). Parole data could *not* be classified according to metro and rural.¹

PROBATION

Of the 157 responses received from probation officers, 64 were respondents from metro districts and 92 from rural districts. The average length of employment of the respondents was 11 years, 7 months.

General Observations – Availability of Services

Relating generally to the availability of services to Probation, much was gleaned from the Survey responses.

Twice as many officers said day reporting was unavailable as available. Of the 65 stating that day reporting services are needed, 49 were from rural areas. Only 7 rural officers said day reporting was available.

Gang related services were identified as least available. Nineteen respondents said they were available while 62 said they were needed but unavailable. Of the 62, 31 were from rural districts and 26 were from metro districts. It was the third most needed but unavailable service after in-patient sex offender treatment and day reporting centers.

Domestic violence evaluation services seem to be currently available.

Mental health inpatient services are needed and unavailable according to 60 respondents. Two-thirds of those were from the rural districts. While 51 said mental health inpatient services were available, 21 said the available services were not affordable. Outpatient mental health services were available to over two-thirds of the respondents, but one-half of those said they were not affordable.

Sex offender services dominated in apparent need. Sex offender evaluations were stated to be available by 71 respondents, but unavailable by 54. Forty-seven of the 54 respondents were from the rural districts, amounting to over three-fourths of all rural respondents. Twenty-two respondents (18 from the metro districts) said that these evaluations are available, but not affordable. Inpatient sex offender treatment was

¹ See Appendices following the “Comments By Respondents” section for complete information detailing the need and availability of adult offender programs and services—Appendix 1, page 45.

identified as the service most often indicated as not available but needed. Twenty respondents identified inpatient sex offender treatment as available, while 93 identified it as needed. Of the 93, 62 were responses from the rural districts. Sixty-eight respondents identified sex offender outpatient treatment as currently available, while 59 identified it as needed, and 15 as available but not affordable.

Rural respondents consistently identified needs and unavailability of programs in many areas of services and service types.

A number of services appear to be available, based on reported need. Those include:

- Community service,
- Drug testing,
- Electronic monitoring,
- Education services,
- Non-residential mental health,
- Substance abuse evaluation, and
- Non-residential substance abuse treatment.

Drug Treatment

As it relates to services for drug treatment of offenders, several observations are made from the probation officer responses.

Substance abuse inpatient treatment was identified as available by 73 respondents while 43 identified it as needed and 23 as available but not affordable. Forty-two respondents said that there is a waiting list for substance abuse inpatient treatment at an average of 2.75 months.

While substance abuse outpatient treatment was identified as predominantly available, 20 said there was a waiting period of about 2 months.

Halfway houses were available to 74 of the respondents while 55 identified halfway houses as needed. Three out of 4 respondents who indicated the need for halfway houses were from the rural districts. The average waiting period for halfway houses from 17 respondents was 2 months.

Sixty-five respondents reported drug courts available while 47 said they were needed. Thirty-nine of the 47 respondents identifying the need for drug courts were from the rural districts. Twelve respondents indicated that drug courts were available, but they did not use it for referrals.

From the responses, it seems that drug testing is readily available and seemingly meeting needs.

PAROLE

Of the 15 responses received from parole officers, 7 were respondents from the Lincoln District, which includes the cities of Lincoln, Grand Island, North Platte, and Scottsbluff and 8 were respondents from the Omaha District, which includes the cities of Omaha and Norfolk. The average length of employment of those responding was 15 years, 9 months.

General Observations – Availability of Services

Relating generally to the availability of services to Parole, the following are general observations from the 15 parole Survey responses.

Day reporting centers were identified as not available but needed by 5 respondents while 3 identified them as available.

As with the Probation respondents, sex offender services for parolees were dominant in apparent need. Sex offender evaluation services and outpatient sex offender services were identified by 11 respondents as available while 6 respondents identified them as available but not affordable. Inpatient sex offender treatment was identified as least available.

A number of services appear to be available and adequate, based on reported need. Those include:

- Anger management,
- Domestic violence batterers programs,
- Electronic monitoring, and
- Outpatient mental health services.

Drug Treatment

As it relates to services for drug treatment of offenders, the following observations are made from the parole officer responses.

Substance abuse evaluations were available for 14 respondents while 4 respondents indicated that they are available but not affordable.

Of those responding, the average indicated wait for inpatient substance abuse treatment is 6.75 months and the average wait for outpatient substance abuse treatment is 4 months.

From the responses, as with Probation responses, it seems that drug testing is readily available and seemingly meeting needs.

COMMENTS BY RESPONDENTS

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Several questions on the Survey asked for additional comments or explanation. Most respondents took the opportunity to provide further details. The following narrative summarizes the answers and comments, categorizes the comments by question number, and distinguishes between Probation comments and Parole comments.

Question 4 –Programs & Services Availability Probation²

In addition to the programs and services identified in question 4, probation officers identified other programs or services they felt were needed but not available or too costly to access.

Bilingual services of all types were recognized by both metro and rural officers as most significantly lacking within programs and services provided. There is a great need for Spanish evaluations as well as outpatient and inpatient substance abuse programming for Spanish speaking offenders. Also identified was the need for Spanish domestic violence programs, drug testing, electronic monitoring, educational/job services, and anger management programming as well as a Spanish component within Mothers Against Drunk Drivers (MADD).

Rural officers identified that electronic monitoring should be made available to traditional probation as well as Intensive Supervision Probation (ISP). Rural officers articulated the need for halfway houses, particularly for men. Sex offender programming to include evaluation, outpatient and inpatient programming is not available in the rural areas. Although available in Omaha and Lincoln, there is a shortage of sex offender programming that is easily accessible and affordable.

Rural officers mentioned that programs such as transitional living, local Twelve Step meetings, adult drug court, substance abuse group therapy, stress management, shoplifters program, credit counseling, medical detoxification, and anger management groups as helpful and needed to manage probation clients.

In addition to the programs and services listed in the Survey, metro officers identified a need for additional access to ISP components for traditional cases, access to work ethic camp type programs, eating disorder programs, victims' programs for domestic violence, methamphetamine specific treatment programs, and dual treatment program for domestic violence and substance abuse.

² See Appendices following the “Comments By Respondents” section for complete information detailing program and services need and availability for adult felony offenders on probation—Appendix 2, page 47.

Cognitive based programs were also identified as needed in both metro and rural areas.

Metro area officers specifically identified that substance abuse services to include evaluation, outpatient, and inpatient are not affordable. In addition, metro officers identified anger management, all types of sex offender programming, mental health and domestic violence programs as too costly.

Rural officers identified anger management, sex offender, substance abuse services, and skills training as too costly. They also identified a need for more localized services. One officer reported clients traveling 100 miles to receive services.

Overall, metro officers rated programs as too costly 2 to 1 over rural officers.

Question 4 –Programs & Services Availability Parole³

Parole officers reported the need for shorter waiting lists for most services. One officer reported that the waiting time to access residential substance abuse could be as long as 12 months, outpatient 4 months, and access to medications 1 month.

Officers identified the need for more affordable sex offender services of all kinds. One officer stated, "Sex offender evaluations, out- and inpatient programs are a must for parolees but expensive, the Regional Center does offer inpatient if accepted by them through Correctional Services." It was also reported that sex offender services of any kind are not available in most rural communities.

Overall, officers identified a need for more anger management and batterer's services as well as halfway houses. Officers continue to report the need for more residential substance abuse/addiction treatment. Immediate access to medications for parolees was also recognized as very important.

Question 5 - Length of Wait to Utilize Services

³ See Appendices following the "Comments By Respondents" section for complete information detailing program and services need and availability for adult felony offenders on parole—Appendix 3, page 49.

Probation⁴

Probation Reason For Wait	Total	% From Total Respondents
Lack of Funds	34	21.66%
Lack of Openings	17	10.83%
Both	96	61.15%
Unknown	10	6.37%

In addition to responding to the question of whether the access to services and length of wait time is caused by lack of funds, lack of openings, or both, 38 probation officers responded with additional comments.

Officers in both rural and metro areas agreed that programs or services most affordable, and those that have sliding scales of payment, are the services that are most often full and waiting lists longer. Both groups identified that minimum wage jobs and lack of employment resulting in no insurance also limited access to services by offenders. According to rural officers, there are limited programs and services available outside the metro areas. Metro officers stated that there are not enough providers. A rural officer also cited that the availability of mental health services were "terrible" for the indigent.

It was mentioned that at times there is a lack of desire on the part of the offender to make a change and participate in programming—that offenders may choose to pay bills and care for their families rather than pay for and complete the necessary programming.

Metro responses indicated that there is the requirement of a large down payment to service providers in order for an offender to access services, resulting in a wait before utilizing needed or required services. Rural officers also noted difficulty accessing "no fee" services for Spanish speaking offenders due to the offenders not having social security numbers.

Question 5 - Length of Wait to Utilize Services Parole

Parole Reason For Wait	Total	% From Total Respondents
Lack of Funds	3	20.00%
Lack of Openings	0	0.00%
Both	10	66.67%
Unknown	2	13.33%

⁴ See Appendices following the "Comments By Respondents" section for information detailing explanations given for probationers' length of wait to utilize services—Appendix 4, page 50.

Several parole officers reported that parolees typically lack employment when leaving incarceration. While there are long waiting lists for most services, the lack of funds and employment by the parolee also causes delays in the timing of obtaining employment. One officer stated, "Once employment is secure, parolees tend to have poor money management skills and spend on less needed things rather than save for the required programming. Also the delay in utilizing services frequently is due to unwillingness to participate in the services."

Question 7 – Top Barriers to Improving Services Probation⁵

Identified as # 1 Barriers

Both metro and rural officers said funding issues were a primary barrier to improving services for their clients and identified this in a variety of categories. In an attempt to quantify responses, the following categories were identified: mental health and substance abuse services, affordable/local inpatient, affordable outpatient substance abuse/sliding scale, juvenile funding for services, drug court funding, and probation funding for training and supervision of clients.

There were several areas where barriers were similar among rural and metro responses. Both metro and rural officers equally identified that "generally" there is a shortage of funds and affordable services. Rural and metro officers also equally identified that high caseloads negatively impact their ability to provide and improve services and supervision. Six rural officers and 4 metro officers indicated a need for Probation funding for training and supervision of clients.

Rural officers more frequently identified lack of funding for mental health and substance abuse services.

Rural officers identified lack of programs and services options and lack of adequate providers as a primary issue, and 11 officers also stated location is their number one barrier to improving services. There is awareness that rural areas frequently lack a sufficient number of clients to justify local, affordable programming or services. One officer stated the barrier he faces as "low density population; not enough referrals to pay salary of quality staff." They are faced with "lack of numbers to fill services" and "a fluctuation in need for services is constant." Another officer stated that if a counselor had to travel to a rural area, the cost of treatment was more expensive.

Lack of program options/services and providers is a problem in the rural areas. Rural officers also reported more often than metro officers that there is a lack of

⁵ See Appendices following the "Comments By Respondents" section for more detailed explanations given for barriers to improving services within Probation—Appendix 5, pages 53-54.

"adequate providers" in the rural areas. Rural officers expressed a need for more localized inpatient treatment, halfway houses and services in general.

Rural officers reported that lack of transportation, distance and lack of funds to access transportation were a problem.

Seven rural officers identified that indigence as a result of no employment, unstable employment, or employment that does not provide insurance for the probation client creates problems when attempting to obtain services. Two metro officers listed this as a problem. Methamphetamine specific treatment was identified as needed.

Five rural officers identified long wait lists as a number 1 problem to improving services while 2 metro officers identified the same.

The following additional issues were identified as impacting officers' ability to do their job:

- Language barriers;
- Lack of client interest;
- Lack of funding for work with juveniles;
- Inflexibility of work hours that hinders job performance;
- Too much paperwork and data entry;
- Not enough staff;
- Lack of communication and teamwork between agencies;
- Treatment providers not seeing probation clients or offenders as a special population and failing to consider criminogenic needs;
- Health and Human Services controlling the money for state funded programs, making it impossible to procure funds for offenders in need;
- Poor communication between Probation/Parole and Health and Human Services;
- Probation Administration taking a more "law enforcement" stance in working with clients rather than a rehabilitative one;
- Poor judicial discretion in placing offenders on probation.

Identified as # 2 Barriers

Probation officers were asked to identify 2 barriers to improving services to Probation clients. The following comments represent what was identified as second major barriers.

The cost of programming and lack of funds ranked high in the second barrier category. In quantifying responses, the areas identified regarding funding are as follows: funding for mental health and substance abuse services, cost of programs/services, lack of funds and cost, affordable/available sex offender services, and indigence of offender.

Eight rural officers and 2 metro officers indicated that the cost of programs was their second greatest barrier. However, when lack of funds and cost of programs were viewed together, 13 officers felt it was their second barrier. Four rural officers listed indigence of offender and 1 metro officer responded the same.

Five rural officers and 2 metro officers listed transportation or distance to services as their second greatest barrier.

Lack of resources and lack of adequate programs and staff was identified by rural officers 4 times and once by metro officers. Four rural officers and one metro officer stated waiting lists as a second barrier. Four metro officers and 2 rural officers listed lack of program option/services as the second major barrier to improving services.

Seven rural officers and 1 metro officer identified the need for additional staff as their second barrier. Four metro officers and 1 rural officer listed high caseloads as their second barrier.

Rural and metro officers listed a language barrier almost equally as the second barrier: 4 times by rural officers and 3 times by metro officers. Three rural officers listed lack of substance abuse services while 4 rural officers and 1 metro officer identified waiting lists for services as their second barrier.

Rural officers listed the following second barriers 1 time each: no updated provider list, lack of follow up and outcome reports from treatment providers, not enough use of ISP, no immediate sanctioning for violations, no affordable/available sex offender treatment services, lack of mental health services, inflexible times to attend programs/services, needed domestic violence programs, lack of available and shorter wait lists for half way houses, and lack of funding for medication for mental health offenders.

Metro officers reported the following second barriers one time each: need for local services, lack of staff training, need of more offender accountability with providers, need for more sliding scale programs, methamphetamine specific treatment, and lack of initiative by offenders.

Question 7 – Top Barriers to Improving Services Parole⁶

Identified as # 1 Barriers

Parole officers overwhelmingly identified lack of funds (by parolee) and lack of funding for services as the first barrier to improving services to parolees. Nine officers

⁶ See Appendices following the “Comments By Respondents” section for more detailed explanations given for barriers to improving services within Parole—Appendix 6, page 53.

listed this as a primary barrier. Four officers listed the offenders' lack of adequate employment and the difficulty felony offenders have securing employment as a barrier.

Other areas identified as major barriers to improving services were lack of available/affordable services, the proposed merger of Probation and Parole, and the distance and transportation problems offenders face.

Identified as # 2 Barriers

Three parole officers identified the community's lack of understanding and support as their second greatest barrier to improving services. They also identified the lack of available services, waiting lists, and distance to services as problems.

Other concerns included the need for bilingual services and staff, the merger of Probation and Parole, and appropriate referrals of offenders to services.

**Question 8 – Officer’s Philosophical Orientation
Probation**

Probation officers were asked to list, in order of importance, the philosophical orientation used in carrying out duties as an officer. The following table details those areas ranked number one by probation officers.

**Philosophical Orientation as an Officer
Probation**

Order	Ranked #1	Total	% From Total Respondents
1	Public Safety	62	39.49%
2	Rehabilitation	30	19.11%
3	Offender Accountability	29	18.47%
4	Other	19	12.10%
5	Compliance	16	10.19%

**Question 8 – Officer’s Philosophical Orientation
Parole**

Parole officers were asked to list, in order of importance, the philosophical orientation used in carrying out duties as an officer. The following table details those areas ranked number one by parole officers.

Philosophical Orientation as an Officer

Parole

Order	Ranked #1	Total	% From Total Respondents
1	Public Safety	11	73.33%
2	Education	1	6.67%
3	Monitoring	1	6.67%
4	Offender Accountability	1	6.67%
5	Compliance	1	6.67%

**Question 8 – Officer’s Philosophical Orientation
Probation & Parole**

The following table details the philosophical orientation used in carrying out duties as ranked number one by probation *and* parole officers.

**Philosophical Orientation as an Officer
Probation & Parole**

Order	Ranked #1	Total	% From Total Respondents
1	Public Safety	73	42.44%
2	Rehabilitation	30	17.44%
3	Offender Accountability	30	17.44%
4	Other	19	11.05%
5	Compliance	17	9.88%

**Question 9 – Effective Innovative Programs Within the Last Three Years
Probation**

**Effective/Innovative Programs
Probation**

Program Proven Effective	Total	% From Total Respondents
Work Ethic Camp	35	22.29%
Cognitive Programming	22	14.01%
Administrative Sanctions	18	11.46%
Drug Court	15	9.55%
Specialized Domestic Violence Supervision	13	8.28%
Additional Intensive Supervision Probation Officers	12	7.64%
Juvenile Accountability Incentive Block Grant (JAIBG)\Youth Level of Service Inventory	11	7.01%
Nebraska Probation Management Information System (NPMIS)	7	4.46%
Drug Testing Protocol	6	3.82%

Specialized Caseloads	5	3.18%
Detention Assessment Center	2	1.27%
Supervision Fees	2	1.27%
More Officers in Field	1	0.64%
Web Based Programs	1	0.64%
Use of Short Term Jail	1	0.64%
Legislative Bill 46	1	0.64%
Offender Selection Worksheet (OSW)	1	0.64%
Sobriety Testing	1	0.64%
Restitution Program	1	0.64%

Probation officers identified 19 areas where they felt that Probation has implemented innovative programs or services or improved existing programs or services. Some of these helped the officers carry out their duties more efficiently and some of them were beneficial to the offenders.

One hundred one, or 64.33%, responded that Probation had tried new or innovative programs in the last three years. Fifty-six, or 35.67%, reported they did not feel Probation had tried any new or innovative programs.

Specifically, 35 officers identified the Work Ethic Camp (WEC) as the program that had provided most benefit to offenders. One officer stated, "The clients I have worked with who completed this program have described it as life changing. People who had no motivation or sense of responsibility now hold jobs, care about health and sobriety, as well as their future."

Another officer conveyed, "Parts of the WEC program have been successful. Teaching and building on work ethic is very productive." Officers noted the importance of WEC in attempting to address criminogenic needs. Officers acknowledged the additional substance abuse/addiction training the WEC probation officers receive is "extremely helpful matching substance abuse treatment with intense supervision."

It was reported that the cognitive based programs provided at WEC are very good but need to be followed up by the probation officer assigned to the WEC offender in the community. One officer indicated that WEC gave the offender good tools but questioned whether or not WEC programming would have a long term effect on offenders' behavior.

The second service officers identified as most effective were the cognitive based programs, specifically the Moral Reconnection Therapy (MRT) and Thinking for Change. Twenty-two officers reported that the cognitive based programs were very helpful to the offenders who participated both in WEC and in the community. One officer stated, "MRT, the cognitive approach to changing behavior, is obviously the preferred approach."

The third most effective program or service identified was the recently developed Administrative Sanctions model allowing officers to impose additional probation

requirements for non-criminal and substance abuse violations rather than immediately referring the offender back to the court for a probation violation. Eighteen officers identified this as effective in working toward rehabilitation with offenders.

Fifteen officers reported drug courts as useful in assisting offenders to address their substance abuse and addiction issues as well as accountability issues.

The development of the domestic violence units, which provide specialized supervision for offenders convicted of domestic assaults, was identified by 13 officers as effective and valuable for management of this population. They reported that more manageable caseloads would allow them to follow up with the offender and to complete home visits. Officers report that the domestic violence unit "targets a specific need in the community." One officer wrote, "The Domestic Violence Unit in Douglas County has been proactive. I have seen great success with offenders in this unit." The Domestic Violence Unit also provides a Victim Specialist who is sensitive to a domestic violence victims needs. They contact the victim and provide information about resources and assist with creating a "safety plan."

Twelve officers reported that Intensive Supervision Probation (ISP) is extremely valuable. ISP is "an excellent form of probation and all probation should be designed this way." It was noted that additional ISP positions were created and funded internally without a request for additional general fund appropriations.

Eleven officers noted that changes and improvements to the juvenile system had a significant impact on services to juvenile offenders. The Juvenile Accountability Incentive Block Grant (JAIBG) made an impact on the juvenile population in school and also provides the officer with numerous options in lieu of violations. It provides the officer with the discretion to impose immediate sanctions and determine the intensity of those sanctions without a court appearance. The JAIBG funds also allow for enhanced drug testing and it was reported "juveniles have done well while on JAIBG testing." Officers also mentioned the value of the Youth Service Level of Inventory (YLSI)—a standardized intake for Health and Human Services, Probation, and Detention.

Seven officers felt the Nebraska Probation Management Information System is helpful and effective. It was noted, "NPMIS has potential but needs fine tuning, more avenues for better communication."

Also mentioned as positive and effective are drug testing and the creation of specialized caseloads.

Question 9 – Effective Innovative Programs Within the Last Three Years Parole

One parole officer stated that for a year they had a certified substance abuse counselor providing outpatient treatment to parolees at the parole office at no cost to the parolee. The substance abuse counselor was a Department of Corrections employee and met with parolees twice a week. This was deemed effective. Another officer felt the supervision fees mandated by Legislative Bill 46, 2003 would also assist in providing more services to offenders.

**Question 10 – Unsuccessful Programs Within the Last Three Years
Probation**

**Programs Not Proven Successful
Probation**

Programs <u>Not</u> Proven Successful	Total	% From total Respondents
Work Ethic Camp	11	7.01%
Nebraska Probation Management Information System (NPMIS)	7	4.46%
Cognitive Programming	5	3.18%
Drug Testing Protocol	4	2.55%
Administrative Sanctions	3	1.91%
Offender Selection Worksheet (OSW)	3	1.91%
Intensive Supervision Probation	3	1.91%
Juvenile Accountability Incentive Block Grant (JAIBG)	2	1.27%
Juvenile Intake	2	1.27%
Closing State Correctional Facilities	1	0.64%
Substance Abuse Programming	1	0.64%
Drug Courts	1	0.64%
Simple Screening Instrument & Consistent Drug/Alcohol Programming	1	0.64%
Specialized Case Loads Too High (Juveniles Supervised as Adults)	1	0.64%
Lack of Implementation/Use of Sex Offender Training	1	0.64%
Parenting Classes	1	0.64%
Traditional Probation	1	0.64%
Inadequate Salary for Probation Officers	1	0.64%
Allocation of Supervision Fees	1	0.64%
Chemical Dependency Program Standardized Model	1	0.64%

The Work Ethic Camp (WEC) was the new program that the most officers questioned the success of. Eleven officers had various observations and criticisms about WEC. One officer stated, "I do not feel WEC has been a success, the number of revocations filed on individuals after leaving the camp has been high on my caseload. Probably around 80%." Another officer wrote, "I believe WEC provides a much needed service. The problem occurs when the probationers return to same community and same using friends. Employers are reluctant to hire because of past bad reputation."

Officers felt that WEC needs an intensive outpatient program. One stated, "The majority of clients I deal with have substance abuse problems (addictions). If an

individual is at WEC for a minimum of 120 days there is no reason (other than financial) why an intensive outpatient program for substance abuse should not be in place. Most outpatient programs in our area run for 12 weeks before moving to an aftercare program.” Another stated, “Since there is already a ‘captive’ audience, put an I.O.P. (intensive outpatient program) in place at WEC and refer them to a local aftercare program upon release. What they have in place at present is more of an alcohol education program, and the offenders at WEC are far beyond that phase.”

One officer believed the WEC program is good but more treatment is needed to be successful.

Another officer commented, "Almost all my WEC clients have needs in substance abuse treatment and education. Most come back with some substance abuse education but not much real recovery according to our local treatment providers. I think WEC needs an intensive outpatient group while clients are at WEC.”

Seven officers felt the web based NPMIS was not successful. Officers reported having to do chronological notes on NPMIS was time consuming and the information was not available when the internet is down. One officer felt it is designed to gather data and statistics for the administration rather than help officers to do their jobs more effectively. One officer said, "NPMIS - our caseload management program - makes life much, much, much more difficult at the line officer level, although it makes collecting statistics much easier for administration."

Five officers felt that the cognitive programs were not helpful, particularly the cognitive piece of the WEC program.

Officers identified difficulties in each of several other areas. These areas included: specialized caseloads are too high, juvenile intake problems, cutback in JAIBG funds, lack of consistency in Domestic Abuse programming, the wrong use of traditional probation, and difficulties with administrative sanctions. Officers questioned the long-term success for drug court clients, the lack of sobriety units to use with adult clients, and the validity of the Offender Selection Worksheet (OSW). Traditional probation officers also had concerns about trying to implement cognitive skills and deal with offender's addictions without the appropriate training. One officer questioned why the sex offender training they received was never implemented or utilized.

The collection of supervision fees was seen as positive, however officers speculate whether fees would be allocated for treatment outside of Lincoln and Omaha.

Question 10 – Unsuccessful Programs Within the Last Three Years Parole

The only program reported by an officer as having been tried and failed was the monthly random urine analysis (UA) testing program. It targeted the wrong offender for testing, and offenders with serious substance abuse issues were bypassed.

Question 11 – Services to Add or Improve Probation⁷

Probation officers responded with an extensive list of services, in order of preference, for probationers that should be added or improved. It was expressed that these services and programs would improve management and rehabilitation of offenders. The following were listed as the first preferences.

"Affordable and accessible programs" was listed as a primary need. Nineteen officers identified this as the most important.

Sixteen officers felt there was a need for better, affordable residential sex offender programs, and 10 officers felt that there was a need for more and better providers for all services including mental health and substance abuse.

Additionally, officers expressed a need for the funding of these programs and services: long-term methamphetamine treatment, more and better drug detection methods, job support for offenders, bilingual services, and day reporting.

As their second preference, 10 officers identified the need for more sex offender services in general, as well as affordable residential services for substance abuse. Bilingual services and long term methamphetamine treatment were again noted in addition to the need for transportation services.

One officer expressed, "The Lancaster County Mental Health Center (supported by Region V) will not accept probation offenders unless the offender is being treated before [being sentencing to] probation or the offender was evaluated and referred by outside mental health professionals at an unaffordable cost."

Another officer stated, "Mental Health availability for low income [is needed] - right now to get meds at Mid Plains...the doctor is available from 2:00 to 4:00, 2 days per week on first come basis, and people wait for hours to see him."

An officer articulated the need for mental health services by stating, "Mental health facilities [are needed] because they basically don't exist. My clients have had 7 suicide attempts since August."

⁷ See Appendices following the "Comments By Respondents" section for more detailed explanations given for services to add or improve within Probation—Appendix 7, pages 57-59.

A request was made for day reporting centers. They were defined as "places where people could go to get/work on GED, voc. rehab, be involved in other programming such as cognitive programming, substance abuse, etc. Centers should be designed for those who are unemployed, undereducated to come pending jobs, school, treatment, etc. One stop shopping for probation services."

One officer's concern for the lack of sex offender programming was expressed as, "Add: Sex offender [programming] because we have none. We have 51 sex offenders listed in Scottsbluff County as registered sex offenders without any type of program to assist them."

One officer simply stated, "Utilize probation programming fees to help pay for programs for all probationers. More 'state beds' at inpatient treatment facilities."

Another expressed needing "treatment-treatment-treatment for alcohol/drug addictions because we have a major methamphetamine problem in Omaha."

Two officers noted concerns about the quality of substance abuse evaluations. A statement was made that there is "still inconsistent results or recommendations from evaluators" and there needs to be "more availability of quality [substance abuse] evaluators."

In describing the extent of the need for substance abuse programming an officer stated that the number 1 priority should be "substance abuse evaluation / treatment / halfway houses as 85% of probationers have substance abuse problems."

Question 11 – Services to Add or Improve Parole⁸

Parole officers responded to the question of indicating services, in order of preference, for parolees that should be added or improved by identifying a variety of needs to manage caseloads. The primary needs were listed as increasing all substance abuse services, increasing sex offender services, better psychiatric care, and availability of medication for parolees when needed. In addition, better communication with administration and the Parole Board would be helpful.

One officer stated a needed service as "health referrals for those on meds—released from prison with a week's supply only and no income." Another officer said, "It is usually impossible for these people to hold jobs, and they can't afford medication which puts them at greater risk to themselves, parole officers and the public."

⁸ See Appendices following the "Comments By Respondents" section for more detailed explanations given for barriers to improving services within Parole—Appendix 8, page 61.

Another officer felt "more communication/cooperation between the upper echelons at various departments [is needed]. The Parole Board needs to be aware that some parole conditions given time left on parole, etc., is not easy to achieve for the parole officers."

Regarding substance abuse, an officer noted the need for "inexpensive services available to address each stage of substance abuse." One parole officer felt there was a need for "UAs taken by outside agency. It is time consuming and in our case we are taking these in public restrooms."

**Question 12 – Most Helpful in Fulfilling Duties as an Officer
Probation**

**Ranked #1 Most Helpful in Fulfilling Duties
Probation**

Order	Ranked #1	Total	% From Total Respondents
1	Reduced Caseload	55	35.03%
2	Additional Staff	36	22.93%
3	Staff Development Training	24	15.29%
4	Increased Salary	16	10.19%
5	Officer Safety	14	8.92%
6	Equipment Upgrades	5	3.18%
7	Other	5	3.18%

Of the 157 officers that responded, the number one need for assisting them in fulfilling their duties was reduced caseload. Additional staff ranked second. Staff development training, increased salary, and officer safety were ranked third, fourth, and fifth respectively. Equipment upgrades ranked sixth, or last, as most helpful in fulfilling their duties.

Probation officers voiced concerns about pay for case managers, Intensive Supervision Probation (ISP) officers and clerical staff. One officer felt that case managers do the same job as probation officers but for less pay and indicated that case managers should make more money than clerical support staff. It was also felt that ISP officers should be paid more than traditional probation officers. Some officers stated they felt increased salary is needed but noted that it does not make a difference in the fulfillment of their duties. They would, however, like to be compensated based on experience and the risk level of the offenders they work with. An officer acknowledged that increased salary would be nice but reduced caseloads would reduce stressors on probation officers.

One officer felt increasing pay for clerical staff would assist in improving the quality of support staff employed.

Officers would like to be able to supervise based on a need or case management basis rather than being required to make a defined number of contacts. They indicated reduced caseloads and updated supervision standards for ISP would be beneficial so they can provide "quality rather than quantity supervision." It was also mentioned that there is not enough workload credit given for the completion of presentence or predispositional investigations.

Equipment upgrades expressed to be helpful would be upgraded electronic monitoring bracelets or satellite based electronic monitoring and bullet proof vests. More services available to offenders would assist officers in carrying out their duties. One officer's request was for annually updated informational manuals.

Officers repeatedly identified the need for more affordable services and funding, specifically for substance abuse treatment. One officer felt it would be helpful if judges would sentence according to the targeting indicators—appropriately placing offenders on traditional probation, ISP, WEC or a commitment to the Department of Correctional Services.

Ranked #2 Most Helpful in Fulfilling Duties
Probation

Order	Ranked #2	Total	% From Total Respondents
1	Additional Staff	40	25.48%
2	Reduced Caseload	28	17.83%
3	Staff Development Training	22	14.01%
4	Officer Safety	18	11.46%
5	Equipment Upgrades	18	11.46%
6	Increased Salary	16	10.19%
7	Other	5	3.18%

In addition to indicating a ranking number one, officers were asked to rank the number two item they felt would assist them in fulfilling their duties. Overall, probation officers identified additional staff first as ranking number two in assisting them to fulfill their duties. Reduced caseload was second. Staff development training, officer safety, and equipment upgrades were third, fourth, and fifth, while increased salary was sixth, or last, as ranking number two as most helpful in fulfilling their duties.

Question 12 – Most Helpful in Fulfilling Duties as an Officer

Parole

Ranked #1 Most Helpful in Fulfilling Duties

Parole

Order		Total	% From Total Respondents
1	Officer Safety	6	40.00%
2	Increased Salary	5	33.33%
3	Staff Development Training	1	6.67%
4	Additional Staff	1	6.67%
5	Equipment Upgrades	1	6.67%
6	Other	1	6.67%

Of the 15 parole officers that responded, 6 rated officer safety and 5 rated increased salary as the most helpful in fulfilling their duties. Seven officers ranked increased salary as second in helping them fulfill their duties.

One officer additionally commented, "Salary is grossly underpaid compared to like jobs." Another officer felt increased salary would be "nice" but not needed to adequately fulfill job duties. They indicated that caseloads are too high, and they are in need of additional parole officers and clerical staff. Equipment upgrades and a computer for each officer were listed as needs as well.

Ranked #2 Most Helpful in Fulfilling Duties

Parole

Order		Total	% From Total Respondents
1	Increased Salary	7	46.67%
2	Equipment Upgrades	4	26.67%
3	Additional Staff	3	20.00%
4	Officer Safety	1	6.67%

In addition to indicating a ranking number one, officers were asked to rank the number two item they felt would assist them in fulfilling their duties. Overall, parole officers identified increased salary first as ranking number two in assisting them to fulfill their duties. Equipment upgrades was second. Additional staff and officer safety were third and fourth.

Question 13 – How the Community Corrections Council Could Assist Officers Probation⁹

⁹ See Appendices following the "Comments By Respondents" section for more detailed explanations given detailing how the Community Corrections Council could assist probation officers—Appendix 9, page 63-64.

Probation officers responded with various suggestions as to how the Council could assist them in management and supervision of offenders. Metro officers and rural officers identified different areas in what would be most helpful, though both identified funds for services and the need for additional officers as important.

Eight rural officers and 7 metro officers indicated that funding for services is very important if probation offenders are to receive the programming they need. One officer stated, "I would like to have money available to assist clients with programs, day care, etc. All clients, not just felonies—some of the highest need clients have pled to a misdemeanor in plea agreement. Our focus is shifting away from these individuals, and they often have the longest prior records and use excessive amount of court/probation time." Another officer stated, "I am hopeful that someday probation will have funding for clients who can not afford services, don't have insurance, and don't qualify for Medicaid."

Six rural officers and 5 metro officers indicated that there is a need for additional officers to bring caseloads to more manageable levels. One officer stated, "I can't perceive it is even a possibility [to add officers to the system]; I can easily envision being asked to do more, with even less time and resources/equipment. Fortunately, or unfortunately, I love my job and hope I can make a difference somewhere, for someone."

Sixteen metro officers indicated caseloads need to be reduced if officers are to adequately do their jobs. One officer summed up many metro officers' opinions by stating, "Help reduce caseloads in the metropolitan areas to be consistent with rural area case loads." Metro officers also asked for more specialized units. One officer felt the Council should "support Probation's requests for officers to become specialized and trained in priority areas (substance abuse, crimes against persons, and sex offenders)."

Rural officers requested expanding services and programs to the areas outside of Omaha and Lincoln. Better awareness of rural needs was deemed important. They expressed a need for residential substance abuse treatment in western Nebraska, more available and better services and programs of all kinds, additional use of electronic monitoring, transportation, and additional staff. "When programs are developed, rural areas need to be given equal consideration for placement of said programs."

In addition, rural officers more often expressed a need for equipment including sobriety units, desktop computers, laptops, and updated informational manuals. It was also noted that a need exists for every officer to have a comprehensive list of providers across the state including contacts, cost, availability, and services offered.

Some officers did not have an understanding of what the Council is. Eight officers said they had never heard of the Council or had any idea what it could assist with. The officers that are familiar with the work of the Council made specific requests. One officer stated, "It is important for the Council to be represented at our trainings, to learn of the new developments with Probation and Probation staff." Another said, "Don't move too fast—use common sense and be supportive." Another officer simply said,

"Come talk to us." One officer responded, "Get out of Lincoln and Omaha and see the picture from a small community and how we operate to make services available for the clients." One suggestion was, "The Council needs to be respectful of the resources available or unavailable in each county and not place further mandates upon officers and staff which prohibits them from doing their jobs."

Three officers expressed that they would like to be compensated for additional workload and more fairly compensated for "on call" time.

One officer stated, "We have some very good people in the Probation System. However, we are continually being asked to do more work (paperwork, sanction documentation, computer skills, increased caseloads) without compensation. As an ISP officer, I am on call 24 hours per day, 5 days per week, and 1 weekend per month. I am limited as to where I can go and what I can and can't do (i.e. alcohol consumption). For being on call, I receive 15 minutes of compensatory time per 8 hours of off duty on call time. I believe that other state agencies pay their employees to be on call, however, since we are a "non-coded" agency, we are not given this option. Every officer I have spoken with would like to at least have this option."

Another officer said, "With the more recent move towards community based corrections and keeping non-violent offenders out of prison, I believe additional staff and compensation is needed. We continue to encounter elevated caseloads and new programs, but cease to see any compensation."

Officers expressed other concerns and frustrations. An officer stated, "Morale in the System is very low. I have spoken with other officials in other areas of the state and they have said the same thing. A lot of people are leaving the system because of it, and the Probation Administration doesn't care because it saves money when experienced officers, especially ones who have been in the system a long time—leave—they save money, salary, and benefits...officers and staff are generally not treated well."

An officer expressed the need for "a computer program that will not rob us of time with the clients. With each new change we lose more and more time that has to go to computer work." Another officer said, "Send our administrator to school. They lack an understanding of what it takes to be a probation officer in an urban area. Frankly, they are more concerned with obtaining flawed statistics than rehabilitating offenders."

One officer asked the Council to "help officers move Probation out from underneath the Supreme Court to allow more growth within the department with regards to community safety, increased manpower to reduce caseload numbers, and improved equipment. Assist officers in the ability to be armed and carry issued firearms for safety and further carry out the duties of a probation officer in an urban setting."

This observation and suggestion was made, "People who choose this field are subject to high levels of anxiety and stress. It would help to create some support services—not counseling—that focused on the obstacles and strategies of supervising

difficult people with added stress of dealing with the un-supporting courts/judges. Perhaps a yearly retreat with stress management training for officers."

Question 13 – How the Community Corrections Council Could Assist Officers Parole¹⁰

Parole officers indicated that the Council could assist them by providing more resources and affordable substance abuse and mental health programming. Officers requested substance abuse programs for parolees in the community staffed by the Department of Correctional Services and better pre-release planning.

One officer stated, "There is an influx of parolees being released. Cost of SAP (substance abuse programming) and MHP (mental health programming) is costing more. Many parolees are becoming aware that we are less likely to revoke. Thus there's an increase of bad behavior. We are getting swamped. Decision regarding parole should be made with this in mind."

There was a request to provide "more institutional parole officers to help with arranging better programs before a parolee is released and assist in acquiring positions that would deal with UAs and electronic monitoring."

Another officer felt it would be beneficial if the Council would "educate the public on positive aspects of parole."

Question 14 – Additional Comments Probation¹¹

When officers were asked to express any additional comments, 7 rural officers and 6 metro officers reiterated the need for additional staff and reduced caseloads as their primary concern. They again commented on the importance of funding services and programs.

One officer specifically stated, "If we in justice organize and standardize, we just might have a shot at prioritizing needed programming. We are very weak in the programming arena. We need leadership and funding, but most of all we need a coordinated response. Service will be developed if we identify and prioritize what we need and have a way to pay for them (lets open a dialogue with the public health system)."

¹⁰ See Appendices following the "Comments By Respondents" section for more detailed explanations given detailing how the Community Corrections Council could assist parole officers—Appendix 10, page 65.

¹¹ See Appendices following the "Comments By Respondents" section for more detailed explanations given detailing any additional comments on the Survey by probation officers—Appendix 11, page 67.

An officer identified the need for a philosophy shift in working with probation offenders. He said, "We need more officers working toward a goal of helping offenders learn to survive in society in a pro-social way. We do not need more officers whose goal is to only verify compliance and return offenders for violations or to do only surveillance. We need educators, counselors, and coaches/motivators."

Other areas of concern for officers are salary, acknowledgement, administrative complacency, and workload issues. Six metro officers said they would like to see less complacency from administration. An effort should be made to address workload issues. Four rural officers indicated they would like to see salary adjustments and acknowledgement for their efforts.

Regarding workload and salary issues, an officer stated, "It appears no one cares—cut our raises, but raise our caseloads and responsibilities, and no thanks or good job in return. Just take and take!!" Another officer responded, "Overall I think we as officers are doing the best we can, and I think all of the staff from secretaries to line officers need to be told that more often."

Five metro officers wanted a user-friendly computer system and less paper work. One officer said, "Probation Administration is out of touch with their frontline officers. They are enamored with a computer system that sucks time and resources away from supervision and they set standards for supervision that cannot possibly be met in a metro area with caseloads way beyond a manageable level, the distribution of resources throughout the state greatly favors rural districts and compromises public safety in metropolitan areas." One officer simply expressed a need to bring their office up to date. He said, "We definitely need our offices brought 'up to date,' we have no computers on all of the officers' desks."

Several officers expressed a need for more training, particularly in the areas of mental health, co-occurring diagnosis, and sex offenders. An officer stated, "I couldn't tell you one way to supervise a sex offender, except by using my own common sense, because the state will not help us. ISP was designed for approximately 25 people per officer; I have 2-3 times that. Administration wants to implement programs but won't reduce our caseload to be able to work with offenders. Many officers want to move out of probation work because of the unfair pay. We work with offenders needing community based programs, but they (programs) get closed down or we just don't have them."

Another officer observed, "It seems like with the new push for community corrections we are seeing our caseloads increase but not getting any more officers. We are also seeing more violent offenders being placed on probation which is a safety concern."

One officer expressed a concern over the change of focus away from misdemeanor offenders. He stated, "I realize your focus is on felons but remember all

felons started out as misdemeanants. We have many more county court offenders that need intervention now before they become felons. I really hope the Council puts forth the effort needed to help out the rural folks. I live in Lincoln where services are abundant. I work in Saunders County where services are scarce, non-existent. It's sad. Thank you for wanting our input!"

One officer expressed the need to improve communication and said, "Year in and year out we are asked to provide information. We take the time to do so with the promise that we will hear of the results but never do. Please give us a copy of your results. This survey should not end here. After we all get results. Let us give you more feedback based on all that has been provided. This will take more time and expense but it then becomes interactive. And hopefully of more benefit to our clients, our communities and ourselves."

Another officer asked the Council to "visit us, talk to us, not administration, find out what we do, and see how we try to help people".

Several officers expressed concerns about the proposed merger. One officer stated, "I am very concerned with the direction LB1235 may be taking Probation. In the past 4 years Probation has made some great strides and has been progressive and innovative. In most rural (non-Omaha/non-Lincoln) offices, staff works hard to balance investigations and supervision. Add parole and the Parole Board, and we have another HHS/OJS 'umbrella mess.' This agency 'the umbrella' has not fared well! Additionally taking Probation out from under the Supreme Court would make our jobs more difficult."

One officer stated, "The Community Corrections Council is an excellent way to start community corrections in the state, but I'm somewhat apprehensive in moving away from Supreme Court supervision. Probation has made positive strides in the area of technology and programs for criminal justice clients. The court has been open to innovative changes in the way Probation does business." Another officer said, "I believe Probation already has the infrastructure to deal with many of our needs in community corrections. We simply need funding or the program and the staff to supervise the offender. I would like to see funding for specialized supervision officers to concentrate on compliance and accountability. Program funding would be used to concentrate on the rehabilitation piece."

Another officer supports the concept of a merger and says, "I believe that combining Parole and Probation would be beneficial and would help save expense."

Question 14 – Additional Comments

Parole

Parole officers reported some of their primary needs for offenders in the additional comments section. It was explained that frequently offenders have minimal

education, limited job skills, and typically work at minimum wage jobs. They have supervision fees to pay and may also have to pay for electric monitoring. In addition, there are fees for counseling and programming. Officers working outside of the metro areas would like to see more services available for offenders in rural areas. The distance to services as well as the lack of transportation available to offenders is a problem in rural areas.

One officer articulated the desire to have the flexibility to work non-traditional office hours, and a way to spend more time in the field and less time on paperwork. Another officer felt the ability to make random checks on parolees outside of scheduled work hours would increase offender accountability. Further, parole violations would not be handled in a timely way if the Probation and Parole Systems were merged.

APPENDICES

Availability of Programs or Services for Adult Offenders

Program/Service Utilized	Probation: Available	%	Probation: Needed	%	Parole: Available	%	Parole: Needed	%	Total: Available	%	Total: Needed	%
Anger Management	123/157	78	18/157	11	14/15	93	2/15	13	137/172	80	20/172	12
Community Service	142/157	90	5/157	3	10/15	67	1/15	7	152/172	88	6/172	3
Day Reporting Center	33/157	21	65/157	41	3/15	20	5/15	33	36/172	21	70/172	41
Domestic Violence Batterers Program	116/157	73	21/157	13	14/15	93	1/15	7	130/172	76	22/172	13
Domestic Violence Evaluation Services	91/157	58	40/157	25	11/15	73	3/15	20	102/172	59	43/172	25
Drug Court	65/157	41	47/157	30	6/15	40	2/15	13	71/172	41	49/172	28
Drug Testing	142/157	90	0/157	0	14/15	93	0/15	0	156/172	91	0/172	0
Electronic Monitoring	131/157	83	5/157	3	14/15	93	0/15	0	145/172	84	5/172	3
Education Services	128/157	82	14/157	9	13/15	87	1/15	7	141/172	82	15/172	9
Gang-Related Services/Unit	19/157	12	62/157	39	7/15	47	3/15	20	26/172	15	65/172	38
Halfway House	74/157	47	55/157	35	13/15	87	2/15	13	87/172	51	57/172	33
Job Skills Training/Vocational	102/157	65	33/157	21	11/15	73	3/15	20	113/172	66	36/172	21
Mental Health, Inpatient	51/157	32	60/157	38	10/15	67	2/15	13	61/172	35	62/172	36
Mental Health, Outpatient	112/157	71	6/157	4	14/15	93	0/15	0	126/172	73	6/172	3
Parenting Class	112/157	71	20/157	13	13/15	87	1/15	7	125/172	73	21/172	12
Sex Offender Evaluation	71/157	45	54/157	34	11/15	73	1/15	7	82/172	48	55/172	32
Sex Offender Services, Outpatient	68/157	43	59/157	38	11/15	73	1/15	7	79/172	46	60/172	35
Sex Offender Services, Inpatient	20/157	13	93/157	59	4/15	27	6/15	40	24/172	14	99/172	58
Substance Abuse Evaluation	135/157	86	4/157	3	14/15	93	1/15	7	149/172	87	5/172	3
Substance Abuse Treatment, Inpatient	73/157	46	43/157	27	11/15	73	1/15	7	84/172	49	44/172	26
Substance Abuse Treatment, Outpatient	132/157	84	5/157	3	13/15	87	0/15	0	145/172	84	5/172	3
Victim Offender Reconciliation	58/157	37	54/157	34	7/15	47	3/15	20	65/172	38	57/172	33

Question 4: **Programs and Services Availability**

Probation

What is Needed Additional Comments	Metro	Rural	Total	% From Total Respondents
Anger Management In Spanish	8	11	19	12.10%
Bilingual Services (Day Report, Community Service, etc)	4	5	9	5.73%
Electronic Monitoring for Traditional Probation	1	6	7	4.46%
Anger Management	2	3	5	3.18%
Substance Abuse Evaluation, Inpatient, Outpatient Too Expensive	4	1	5	3.18%
Cognitive Programs	1	3	4	2.55%
Some Anger Management Too Expensive	2	2	4	2.55%
Chemical Dependency Evaluation and Outpatient Treatment in Spanish	1	3	4	2.55%
Halfway House - Male	0	3	3	1.91%
Sex Offender Services	0	3	3	1.91%
Parenting Classes/Skills	1	2	3	1.91%
Drug Testing	2	1	3	1.91%
Domestic Violence Programming in Spanish	2	1	3	1.91%
Substance Abuse Treatment - All Kinds	0	3	3	1.91%
Local Domestic Violence Programming	0	2	2	1.27%
Adult Drug Court	0	2	2	1.27%
Mental Health Residential	0	2	2	1.27%
Victim Offender Reconciliation	1	1	2	1.27%
Work Ethic Camp	1	1	2	1.27%
Mental Health Outpatient	1	1	2	1.27%
Substance Abuse Residential	1	1	2	1.27%
Mental Health Programming - Too Expensive	2	0	2	1.27%
Domestic Violence Programming - Too Expensive	2	0	2	1.27%
Transitional Living Arrangements	0	1	1	0.64%
Twelve Step Meetings	0	1	1	0.64%
Shoplifting Class	0	1	1	0.64%
Job Skill Services\Education	0	1	1	0.64%
Mothers Against Drunk Driving - Spanish	0	1	1	0.64%
Substance Abuse Residential Treatment in Spanish	0	1	1	0.64%
Skills and Training Other than Voc Rehab - Too Expensive	0	1	1	0.64%
Sex Offender Programming - Too Expensive	0	1	1	0.64%
Substance Abuse Group Therapy	0	1	1	0.64%
Anger Management Group Therapy	0	1	1	0.64%
Halfway Houses - Male and Female	0	1	1	0.64%
Medical Detoxification	0	1	1	0.64%
More Localized Services (100+ Miles)	0	1	1	0.64%
Stress Management	0	1	1	0.64%
Eating Disorders	1	0	1	0.64%
Dual Programming - Domestic Violence and Substance Abuse	1	0	1	0.64%
Programs for Domestic Violence Victims	1	0	1	0.64%
Gambling Support Groups	1	0	1	0.64%
Sex Offender Inpatient	1	0	1	0.64%
Methamphetamine Specific Treatment	1	0	1	0.64%

Question 4: **Programs and Services Availability**

Parole

What is Needed Additional Comments	Total	% From Total Respondents
Shorter Wait for Substance Abuse	5	33.33%
Affordable Sex Offender Services	5	33.33%
Services in Rural Areas	3	20.00%
Medication (Upon Release)	2	13.33%
Residential Substance Abuse Treatment	1	6.67%
Anger Management/Batterers Programs	1	6.67%

Question 5: Length of Wait to Utilize Services

Probation

Additional Comments to Explain Wait	Metro	Rural	Total	% From Total Respondents
Most Affordable Services Have Longest Waiting List	2	3	5	3.18%
Minimum Wage Jobs/No Employment	1	2	3	1.91%
Lack of Providers	3	0	3	1.91%
Spanish Population Without Social Security # Not Eligible for Free Service	0	2	2	1.27%
No Insurance	0	2	2	1.27%
Offender Lacks Desire to Seek Services or Chooses to for Pay Other Things	1	1	2	1.27%
Treatment Requires Down Payment	1	0	1	0.64%
Rural Nebraska - Limited Services	0	1	1	0.64%
Need for Mental Health for Indigent	0	1	1	0.64%
Lack of Openings in Programs	0	1	1	0.64%

Question 7: Top Barriers to Improving Services

Probation

Identified as #1 Barriers	Metro	Rural	Total	% From Total Respondents
Cost Prohibitive Services/Lack of Funding	9	9	18	11.46%
Lack of Funding for Mental Health and Substance Abuse Services	4	12	16	10.19%
Lack of Program Options/Providers	2	13	15	9.55%
Probation Funding Not Sufficient (i.e. for Supervision of Clients)	4	6	10	6.37%
Indigency of Offender (No Insurance)	2	8	10	6.37%
Caseloads Too High	4	4	8	5.10%
Long Waiting Lists	2	5	7	4.46%
Unaffordable Local Inpatient Services	1	5	6	3.82%
Lack of Adequate Providers	1	5	6	3.82%
Lack of Transportation, Too Distant (Funds) and Distance from Providers	1	4	5	3.18%
Not Enough Staff	4	0	4	2.55%
Lack of Interest by Client	2	2	4	2.55%
Language Barrier	0	4	4	2.55%
Male Residential Treatment Needed	2	1	3	1.91%
Local Services/Location of Services Not Sufficient	1	2	3	1.91%
Not Enough Local Halfway Houses	0	3	3	1.91%
Administration Philosophy - Law Enforcement Rather than Rehabilitate	2	0	2	1.27%
Lack of Communication/Teamwork Between Agencies	2	0	2	1.27%
Juvenile Funding, Services and Training Not Sufficient	2	0	2	1.27%
No Affordable Outpatient Sliding Scale	1	1	2	1.27%
Termination From Programs by Providers Upon Initial Failures by Probation Client	1	1	2	1.27%
Lack of Methamphetamine Treatment	1	1	2	1.27%
Excess Paperwork/Data Entry	0	2	2	1.27%
Lack of Drug Court Funding	1	0	1	0.64%
Poor Judicial Discretion about Who is Placed on Probation	1	0	1	0.64%
Rural Services Not Available	0	1	1	0.64%
Fairness of Sliding Scale for Programming	0	1	1	0.64%
Lack of Mental Health Providers	0	1	1	0.64%
Lack of Flexible Hours	0	1	1	0.64%

Question 7: **Top Barriers to Improving Services**

Probation

Identified as #2 Barriers	Metro	Rural	Total	% From Total Respondents
Cost Prohibitive Services/Lack of Funding	7	16	23	14.65%
Lack of Transportation, Too Distant	2	6	8	5.10%
Need Additional Staff	1	7	8	5.10%
Language Barrier/Services	3	4	7	4.46%
Lack of Program Options/Services	4	2	6	3.82%
High Case Load	4	1	5	3.18%
Long Waiting Lists	1	4	5	3.18%
Indigency Of Offender (No Insurance)	1	4	5	3.18%
Lack of Resources	1	4	5	3.18%
Lack of Adequate Programs/Providers	0	4	4	2.55%
Concerns with Juvenile System	2	1	3	1.91%
Lack of Mental Health Services	2	1	3	1.91%
Unavailable Sex Offender Evaluation/Treatment	2	1	3	1.91%
Not Enough Local Services	1	2	3	1.91%
Not Enough Substance Abuse Providers	0	3	3	1.91%
Lack of Residential Treatment	2	0	2	1.27%
Lack of Services in Rural Areas	0	2	2	1.27%
Need More Staff Training	1	0	1	0.64%
Need Offender Accountability with Providers	1	0	1	0.64%
Lack of Interest by Offender	1	0	1	0.64%
Need Methamphetamine Specific Treatment	1	0	1	0.64%
Unavailability of Sliding Scale Programs	1	0	1	0.64%
Need Medication for Offender	0	1	1	0.64%
Length of Halfway House Wait is Too Long	0	1	1	0.64%
Attitudes of Probation Officers	0	1	1	0.64%
Need Current Listing of Providers	0	1	1	0.64%
Lack of Intensive Supervision Probation Staff	0	1	1	0.64%
Need Local Substance Abuse Treatment	0	1	1	0.64%
Need More Immediate Sanctions	0	1	1	0.64%
Lack of Funding Mental Health and Substance Abuse	0	1	1	0.64%
Community/Public Safety Concerns	0	1	1	0.64%
Need to Change Sentencing Practices	0	1	1	0.64%
Poor Court Attitude Toward Offender	0	1	1	0.64%
Lack of Domestic Violence Programming	0	1	1	0.64%
Inflexible Program Times	0	1	1	0.64%
Need Follow-Up/Outcome Measures	0	1	1	0.64%

Question 7: Top Barriers to Improving Services

Parole

Identified as #1 Barriers	Total	% From Total Respondents
Lack of Funds	9	60.00%
Lack of Offender Employment	4	26.67%
Lack of Services/Transportation	1	6.67%
Legislative Bill 1235	1	6.67%
Unavailable/Unaffordable Services	1	6.67%

Question 7: Top Barriers to Improving Services

Parole

Identified as #2 Barriers	Total	% From Total Respondents
Community Lack of Understanding about Parole Process	3	20.00%
Distance Too Great to Access Services	2	13.33%
Lack of Program Availability/Waiting Lists	2	13.33%
Legislative Bill 1235	1	6.67%
Lack of Referrals to Appropriate Services	1	6.67%
Lack of Bilingual Staff and Services	1	6.67%

Question 11: Services to Add or Improve

Probation

Ranked #1 in Importance	Total	% From Total Respondents
Affordable/Accessible Programs	19	12.10%
Better/Affordable Sex Offender Programs/Inpatient	16	10.19%
More and Better Providers	10	6.37%
Funding for Programs	9	5.73%
Long Term Methamphetamine Treatment	6	3.82%
Affordable Mental Health	5	3.18%
Alcohol and Drug Treatment	5	3.18%
Specialized Caseloads and Officers	5	3.18%
Bilingual Services	4	2.55%
All Services Available at Day Reporting Centers	4	2.55%
Residential Alcohol/Drug Treatment	4	2.55%
More, Better and New Drug Detection Methods	4	2.55%
Funding for All Juvenile Services	3	1.91%
Anger Management Programs	3	1.91%
Job Services	3	1.91%
Drug Courts (Statewide)	3	1.91%
Affordable Domestic Violence Programs	3	1.91%
Reduced Caseloads	2	1.27%
Cognitive Based Programs	2	1.27%
Shorter Waiting Lists	1	0.64%
Training for Clients	1	0.64%
Medication Assistance	1	0.64%
Equipment Upgrades	1	0.64%
Dual Diagnosis Programs	1	0.64%
Affordable Cognitive Programs	1	0.64%
Day Treatment	1	0.64%
Training for Probation Officers to Work With and Identify Mental Illness	1	0.64%
Services for the Native American Population	1	0.64%
Community Service Programs	1	0.64%
Halfway Houses	1	0.64%
90 Day Work Ethic Program	1	0.64%
Rural Treatment Centers	1	0.64%
English for Spanish Speaking Offenders	1	0.64%
Juvenile Prison	1	0.64%
Increased Use of Intensive Supervision Probation	1	0.64%
Local Halfway Houses	1	0.64%
Youth and Parent Education	1	0.64%
Culturally Sensitive Domestic Violence Program	1	0.64%
Standardized Chemical Dependency Evaluations	1	0.64%
Community Supervision	1	0.64%
Life Skills	1	0.64%

Question 11: **Services to Add or Improve**

Probation

Ranked #2 in Importance	Total	% From Total Respondents
Better and Affordable Sex Offender Programs	10	6.37%
Affordable Residential Treatment	7	4.46%
Transportation	4	2.55%
Bilingual (Spanish) Treatment Counselors	4	2.55%
Long Term Methamphetamine Treatment	4	2.55%
Halfway Houses	3	1.91%
Day Reporting	3	1.91%
Funding for Programs	3	1.91%
Affordable Programs	2	1.27%
Anger Management Programs	2	1.27%
More, Better and New Drug Testing Methods	2	1.27%
Job Services	2	1.27%
Affordable Mental Health Programming	2	1.27%
Reduced Caseloads	2	1.27%
Specialized Caseloads	2	1.27%
Drug Courts (Statewide)	2	1.27%
Job Training	2	1.27%
Dual Diagnosis Programs	1	0.64%
Long Term Aftercare for Methamphetamine Addicts	1	0.64%
Flexible Work Hours	1	0.64%
Standardized Chemical Dependency Evaluations	1	0.64%
Services for Mentally Ill	1	0.64%
Electronic Monitoring	1	0.64%
More/Affordable Domestic Violence Programs	1	0.64%
More Use of Electronic Monitoring	1	0.64%
Shorter Waiting Lists	1	0.64%
Parenting Classes	1	0.64%
Tracker Services	1	0.64%
Community Service	1	0.64%
More Programming Options	1	0.64%
Drug Technician	1	0.64%
Group and Individual Outpatient Programs in Spanish	1	0.64%
More Juvenile Holding Facilities	1	0.64%
Understanding Criminogenic Risk by Courts/Officers	1	0.64%

Question 11: **Services to Add or Improve**

Probation

Ranked #3 in Importance	Total	% From Total Respondents
Affordable/Available Low Income Mental Health Services	4	2.55%
Bilingual Services	3	1.91%
Halfway Houses	3	1.91%
Anger Management Programs	3	1.91%
Affordable Programs	2	1.27%
Day Reporting	2	1.27%
State Funding for Juvenile Holding	1	0.64%
Domestic Violence Programs	1	0.64%
Job Services	1	0.64%
General Equivalency Diploma	1	0.64%
Methamphetamine Programs and Specific Treatment	1	0.64%
Supervision Training For Specialized Caseloads	1	0.64%
Increased Staff	1	0.64%
Drug Courts	1	0.64%
Redevelop Presentence Investigation to Include Criminogenic Risk Factors	1	0.64%
Alcoholics Anonymous/Twelve Step Programs	1	0.64%
Tracker Program	1	0.64%
Funding	1	0.64%
Cognitive Based Programs	1	0.64%
More, Better and New Drug Testing Methods	1	0.64%
Shorter Waiting Lists	1	0.64%
Parenting Classes	1	0.64%
Violators Program	1	0.64%
Methamphetamine Detoxification	1	0.64%
Better and Affordable Sex Offender Programs	1	0.64%
Substance Abuse After Care	1	0.64%
Flexible Work Hours for Probation Officers	1	0.64%

Question 11: Services to Add or Improve

Parole

Ranked #1 in Importance	Total	% From Total Respondents
Substance Abuse Services	3	20.00%
Sex Offender Services	2	13.33%
Available Psychiatric Care/Medication	2	13.33%
Drug Testing by Independent Agency	1	6.67%
Parole Violators Program in Community	1	6.67%
Cognitive Based Programs	1	6.67%
Additional/Affordable Services - All Areas	1	6.67%
Funding for Services	1	6.67%
Substance Abuse and/or Mental Health Prior to Release	1	6.67%
Life Skills	1	6.67%
Employment Referrals	1	6.67%

Question 11: Services to Add or Improve

Parole

Ranked #2 in Importance	Total	% From Total Respondents
Communication with Administration/Parole Board	2	13.33%
Halfway House	1	6.67%
Education (General Equivalency Diploma, English Second Language, Literacy)	1	6.67%
Substance Abuse and Mental Health Provided by Department of Correctional Services	1	6.67%
Available Psychiatric Care/Medication	1	6.67%

Question 13: How the Community Corrections Council Could Assist Officers

Probation

	Metro	Rural	Total	% From Total Respondents
Reduce Caseloads	16	1	17	10.83%
Funds for Services	7	8	15	9.55%
Additional Officers	5	6	11	7.01%
Don't Know What Community Corrections Council Is	2	8	10	6.37%
Specialized Units Program Funds	8	1	9	5.73%
More and Better Services	2	4	6	3.82%
Electronic Monitoring and Staff	1	4	5	3.18%
Rural Services Residential Treatment in the West	0	5	5	3.18%
Create Day Reporting	3	2	5	3.18%
Continuity and Consistency from Courts in Sentencing Practices/Sentencing Guidelines	2	2	4	2.55%
User-Friendly and Time Efficient Computer System	1	3	4	2.55%
Training for Probation Officers on Mental Health Issues	1	3	4	2.55%
Sobriety, Equipment and Laptops	0	4	4	2.55%
Job Service and Employment Assistance for Offenders	3	0	3	1.91%
Mental Health Services	3	0	3	1.91%
More Sex Offender Programming	2	1	3	1.91%
Training for Probation Officers (Online) for Working with Sex Offenders and Addictions	2	1	3	1.91%
Compensation for Additional Job Duties	2	1	3	1.91%
Methamphetamine Specific Treatment	2	1	3	1.91%
Community Corrections Council Communicate/Support/Attend Probation Meetings	1	2	3	1.91%
Provide Drug Treatment for Offenders	1	2	3	1.91%
Reduce Paperwork	1	2	3	1.91%
Good Relationship Between Community Corrections Council, Probation Officers and Administration	1	2	3	1.91%
Local Services	0	3	3	1.91%
Affordable Treatment Services, Evaluation and Therapy	0	3	3	1.91%
Understanding and Communicating with Administration about Probation Officers' Duties	1	1	2	1.27%
Probation Officers be Allowed to Carry Firearms	1	1	2	1.27%
Need More Training	1	1	2	1.27%
Transportation Services for Offenders	1	1	2	1.27%
Drug Testing Machines and More Efficient Drug Testing	1	1	2	1.27%
Statewide Drug Courts and Funds to Support	1	1	2	1.27%
Shorter Waiting Lists	0	2	2	1.27%
Bilingual Services	0	2	2	1.27%
Awareness of Rural Needs	0	2	2	1.27%
Equal Program Consideration for Rural Areas	0	2	2	1.27%
Monetary Support for All, Not Just Felony Offenders	0	2	2	1.27%
Mental Health Courts	1	0	1	0.64%
Education Opportunities for Offenders (Further Education, Basic Job Training, Job Application, Interviewing for Employment)	1	0	1	0.64%
Stress Support Services for Officers	1	0	1	0.64%
Make Services Accessible	1	0	1	0.64%
Judiciary Use of Sentencing Practices, Risk Instrument	1	0	1	0.64%
Education on Best Practices for Judges and Officers	1	0	1	0.64%

Question 13: How the Community Corrections Council Could Assist Officers

Probation

(Continued)

	Metro	Rural	Total	% From Total Respondents
Create Violators Program	1	0	1	0.64%
Create Continuum of Services	1	0	1	0.64%
Equalize Caseloads Between Rural and Metro	1	0	1	0.64%
Better Judges	1	0	1	0.64%
Move Probation Out from Supreme Court	1	0	1	0.64%
Domestic Violence Programs	0	1	1	0.64%
Halfway House	0	1	1	0.64%
Online Training	0	1	1	0.64%
Secure Juvenile Detention	0	1	1	0.64%
Compensation for Intensive Supervision Probation On Call	0	1	1	0.64%
Safer Work Environment	0	1	1	0.64%
Balanced Use of Resources Between Adult and Juvenile Systems	0	1	1	0.64%
Current, Frequently Updated Providers List	0	1	1	0.64%
Narcotics Anonymous Meetings	0	1	1	0.64%
Sober House	0	1	1	0.64%
Communication with Law Enforcement	0	1	1	0.64%
Better Driving Under the Influence Offender Consequences	0	1	1	0.64%

Question 13: **How the Community Corrections Council Could Assist Officers**

Parole

	Total	% From Total Respondents
Prior Planning for Offender Release and Reentry	2	13.33%
Affordable Substance Abuse and Mental Health Services	2	13.33%
Resources and Support	2	13.33%
Department of Correctional Services Staffed Substance Abuse Programs	1	6.67%
Drug Testing by Outside Entity	1	6.67%
More Parole Officers	1	6.67%
Don't Know what Community Corrections Council Does	1	6.67%
Expand Services to Rural Areas	1	6.67%
Community Education About Parole Process	1	6.67%
Community Corrections Council Recognize Problems with Probation/Parole Merger	1	6.67%
Communication with Administration	1	6.67%
Education - Literacy, General Equivalency Diploma Preparation and Testing	1	6.67%
Life Skills Training	1	6.67%
Halfway House Availability	1	6.67%

Question 14: **Additional Comments**

Probation

Question 14 Any Other Helpful Comments	Metro	Rural	Total	% From Total Respondents
Need Additional Staff and Reduced Caseloads	6	7	13	8.28%
Concerns About Administrative Complacency Regarding Unequal Distribution of Workload	6	0	6	3.82%
Need User Friendly Computer System and Less Paperwork	5	1	6	3.82%
Commensurate Salary and Acknowledgement of Workload and Stress Levels of Job	2	4	6	3.82%
Need for Program Funding	3	1	4	2.55%
Emphasis on Juvenile Funding/Services	2	2	4	2.55%
Concerns for Administration Philosophy - Compliance vs. Rehabilitation	2	2	4	2.55%
Reduce Minor in Possession/Driving Under the Influence Supervision	2	1	3	1.91%
Need More Staff Training	1	2	3	1.91%
Explore Intensive Supervision Probation Officer Turnover Rates	2	0	2	1.27%
Officer Safety-Training and Equipment	2	0	2	1.27%
Proper Distribution of Services/More and Better Services	1	1	2	1.27%
Merger/Legislative Bill 1235 Concerns	0	2	2	1.27%
Need for Additional Specialized Caseloads	0	2	2	1.27%
Judicial Accountability is Needed	1	0	1	0.64%
Need Leadership to Organize, Prioritize, Standardize	1	0	1	0.64%
Mental Health and Substance Abuse Training for Officers	1	0	1	0.64%
Community Corrections Council should Communicate with Probation Officers	1	0	1	0.64%
Expand Bilingual and Cultural Services	1	0	1	0.64%
Create Better Supervision System for Offenders	1	0	1	0.64%
Remove Probation from Supreme Court	0	1	1	0.64%
Need Equipment, Computers and Offices updated	0	1	1	0.64%
Need for Halfway Houses in Western Nebraska	0	1	1	0.64%
Need for Additional Dual Diagnosis Treatment	0	1	1	0.64%
Concerns About More Violent Offenders Being Placed on Probation	0	1	1	0.64%
Increase Focus on Substance/Addictions Treatment	0	1	1	0.64%
Expand Rural Services	0	1	1	0.64%
Request Feedback from Survey	0	1	1	0.64%
Don't Know what Community Corrections Council Is	0	1	1	0.64%
More Intensive Substance Abuse/Addictions Treatment at Work Ethic Camp	0	1	1	0.64%

SURVEY DATA

PROBATION

PAROLE

PROBATION & PAROLE

PROBATION OFFICER
ADULT OFFENDER PROGRAMS & SERVICES SURVEY

1. What is the title of your current position?

- | | |
|--|-----------------------------|
| <u>5</u> Trainee | <u>5</u> Case Manager |
| <u>29</u> Probation Officer | <u>2</u> Supervisor |
| <u>70</u> Senior Probation Officer | <u>13</u> ISP Coordinator |
| <u>12</u> Deputy Chief Probation Officer | <u>4</u> ISP Officer |
| <u>12</u> Chief Probation Officer | <u>5</u> Senior ISP Officer |

2. How long have you been with Probation?

7 months 11 years

3. What is the location where you work? Indicate city, district, or region, if applicable.

City/Cities _____

District 1-4, 2-11, 3-10, 4-24, 5-8, 6-9, 7-7, 8-5, 9-12, 10-6, 12-4, 16-3, 17-8, 18-4, 20-7

Region A-3, B-4, D-3, E-5, F-6

4. In the box below, please indicate (Specify all that apply):

- In column 1 – programs or services currently available to **adult** offenders in the community where you provide supervision.
- In column 2 – programs or services for **adult** offenders not available but needed in the community where you provide supervision.
- In column 3 – programs or services that are available but not affordable.
- In column 4 – programs or services that are available but you do not refer clients to based on inadequacies or low quality.
- In column 5 – programs or services that have a waiting list (If a waiting list exists, indicate the wait by number of months).
- In column 6 – programs or services that incorporate cognitive-based programming (Please indicate “Yes,” “No,” or “Not Sure”).
- In column 7 – programs or services available that offer bi-lingual or multi-cultural services (If “Yes”, please indicate language or cultural service.)

Explanation of Table

Bolded numbers in the table indicate the number of probation staff who said the service was currently available, not available but needed, etc. Example: 123 probation officers said anger management was currently available.

Waiting list identified in months has 2 columns. The first column under waiting list has a single number and it represents the number of probation staff that indicated yes there is a wait list but gave no indication of how many months. The second column has 2 numbers separated by a dash such as 3.0 - 1, which means 1 probation staff said there was a wait of 3 months. The number inside parenthesis indicates the average amount of waiting indicated.

.25 = 1 week .50 = 2 weeks .75 = 3 weeks 1.0 = 1 month

	1	2	3	4	5		6	7
Programs or services utilized by for adult probationers	Currently available	Not available but needed	Available but not affordable	Available but do NOT refer	Waiting list identified in months		Cognitive-based programming	Bi-lingual/multi-cultural
Anger management	123	18	10	8	1	3.0 -1 (3)	15	14
Community service	142	5	0	4	0		3	10
Day reporting center	33	65	0	7	1		4	3
Domestic violence batterers program	116	21	17	5	9	1.5 -3 (1.5)	15	21
Domestic violence evaluation services	91	40	3	4	1	3.5 -1 (3.5)	5	17
Drug court	65	47	2	12	1		8	7
Drug testing	142	0	0	2	0		1	7
Electronic monitoring	131	5	1	5	0		5	6
Education services	128	14	1	3	0		2	26
Gang-related services/unit	19	62	1	6	0		2	3
Halfway house	74	55	3	7	17	1.0 -2 1.5 -1 2.0 -1 4.5 -1 (2)	1	3
Job skills training/vocational	102	33	3	7	1		4	10
Mental health, in-patient	51	60	21	2	8	1.0 -1 4.0 -4 (2.5)	1	4
Mental health, out-patient	112	6	28	3	2		4	13
Parenting class	112	20	2	3	7	2.0 -1 3.0 -1 5.0 -1 (3.33)	5	8
Sex offender evaluation	71	54	22	4	3		2	4
Sex offender services, out-patient	68	59	15	4	3		4	5

	1	2	3	4	5		6	7
Programs or services utilized by for adult probationers	Currently available	Not available but needed	Available but not affordable	Available but do NOT refer	Waiting list identified in months		Cognitive-based programming	Bi-lingual/multi-cultural
Sex offender treatment, in-patient	20	93	4	4	5	1.5 -1 (1.5)	2	2
Substance abuse evaluation	135	4	17	3	16	1.0 -2 1.5 -4 2.0 -3 4.5 -1 (1.85)	2	32
Substance abuse treatment, in-patient	73	43	23	2	42	1.0 -4 1.5 -4 2.0 -6 3.0 -1 3.5 -1 4.0 -3 4.5 -3 9.0 -1 (2.74)	4	7
Substance abuse treatment, out-patient	132	5	17	3	20	.75 -1 1.0 -2 1.5 -2 1.75-1 2.0 -1 3.5 -1 4.5 -1 (1.94)	8	30
Victim offender reconciliation	58	54	3	6	1		2	4
Other: CD Treatment for IOP						6.0-1 (6.0)		
Other: MADD						5.0-1 (5.0)		
Other (Specify)								

5. In terms of a wait for probationers to utilize services, is the wait due to lack of funds on the part of the offender or lack of openings in the programs or both? Please explain.

34 (or 21.66%) Lack of funds

17 (or 10.83%) Lack of openings

96 (or 61.15%) Both

10 (or 6.37%) Unknown

7. Name the top two major barriers to improving services for probationers. Please explain.

1 _____

2 _____

8. Please list, *in order of importance*, your philosophical orientation in carrying out your duties as a probation officer.

(e.g., *Rehabilitation, Compliance, Monitoring, Education, Public Safety, Offender Accountability, Reintegration, Training, etc.*)

Ranked 1

Ranked 2

- | | |
|---------------------------------------|-----------------------------------|
| (1) <u>Public Safety 62</u> | <u>Offender Accountability 54</u> |
| (2) <u>Rehabilitation 30</u> | <u>Rehabilitation 36</u> |
| (3) <u>Offender Accountability 29</u> | <u>Public Safety 24</u> |
| (4) <u>Other 19</u> | <u>Compliance 18</u> |
| (5) <u>Compliance 16</u> | <u>Monitoring 4</u> |

9. In your opinion, has Probation tried any innovative programs in the last 3 years that have proven effective?

Yes **101 (or 64.33%)**

No **56 (or 35.67%)**

If "Yes," please identify and explain below.

10. In your opinion, has Probation tried any innovative programs in the last 3 years that were not proven successful?

Yes **42 (or 26.75%)**

No **115 (or 73.25%)**

If "Yes," please identify and explain below.

11. Please indicate, in order of preference, any services for probationers you would like to add or improve and why.

12. Rank, *in the order of importance*, what you believe would most help you to fulfill your duties as a probation officer.

Ranked 1

Ranked 2

<u>14</u>	<u>18</u>	Officer safety
<u>24</u>	<u>22</u>	Staff development training
<u>36</u>	<u>40</u>	Additional staff
<u>55</u>	<u>28</u>	Reduced caseload
<u>16</u>	<u>16</u>	Increased salary
<u>5</u>	<u>18</u>	Equipment upgrades
<u>5</u>	<u>5</u>	Other (Please Indicate) _____

13. How might the Community Corrections Council assist you in adult offender supervision?

14. Please provide any other additional comments you believe would be helpful.

Thank you very much for taking time to complete this survey!

PAROLE OFFICER
ADULT OFFENDER PROGRAMS & SERVICES SURVEY

1. What is the title of your current position?

- 10 Senior Parole Officer
- 3 Parole Officer
- 2 District Supervisor

2. How long have you been with Parole?

- 9 months 15 years

3. What is the location where you work? Indicate city, district, or region, if applicable.

- City/Cities _____
- District Lincoln District -7 Omaha District -8
- Region _____

Lincoln Parole District =
Grand Island, North Platte,
Scottsbluff, Lincoln
Omaha Parole District =
Omaha, Norfolk

4. In the box below, please indicate (Specify *all* that apply):

- In column 1 – programs or services currently available to **adult** offenders in the community where you provide supervision.
- In column 2 – programs or services for **adult** offenders not available but needed in the community where you provide supervision.
- In column 3 – programs or services that are available but not affordable.
- In column 4 – programs or services that are available but you do not refer clients to based on inadequacies or low quality.
- In column 5 – programs or services that have a waiting list (If a waiting list exists, indicate the wait by number of months).
- In column 6 – programs or services that incorporate cognitive-based programming (Please indicate “Yes,” “No,” or “Not Sure”).
- In column 7 – programs or services available that offer bi-lingual or multi-cultural services (If “Yes”, please indicate language or cultural service.)

Explanation of Table

Bolded numbers in the table indicate the number of parole staff who said the service was currently available, not available but needed, etc. Example: 14 parole officers said anger management was currently available.

Waiting list identified in months has 2 columns. The first column under waiting list has a single number and it represents the number of parole staff that indicated yes there is a wait list but gave no indication of how many months. The second column has 2 numbers separated by a dash such as .75 - 1, which means 1 parole staff said there was a wait of .75 months. The number inside parenthesis indicates the average amount of waiting indicated.

.25 = 1 week .50 = 2 weeks .75 = 3 weeks 1.0 = 1 month

	1	2	3	4	5		6	7
Programs or services utilized by for adult parolees	Currently available	Not available but needed	Available but not affordable	Available but do NOT refer	Waiting list identified in months		Cognitive-based programming	Bi-lingual/multi-cultural
Anger management	14	2	4		1	.75-1 (.75)	1	1
Community service	10	1		1			1	1
Day reporting center	3	5		1				
Domestic violence batterers program	14	1	2			.75-1 (.75)		1
Domestic violence evaluation services	11	3	1	1			1	2
Drug court	6	2		2			1	1
Drug testing	14							1
Electronic monitoring	14		1					
Education services	13	1		1				1
Gang-related services/unit	7	3		1			1	1
Halfway house	13	2		1	1	1.5-1 1.25-1 (1.375)	1	1
Job skills training/vocational	11	3		1				1
Mental health, in-patient	10	2	2	2			1	1
Mental health, out-patient	14		4		2		1	1
Parenting class	13	1					1	1
Sex offender evaluation	11	1	6	1	1	.25-1 (.25)	1	1
Sex offender services, out-patient	11	1	6		1			
Sex offender treatment, in-patient	4	6		3				
Substance abuse evaluation	14	1	4		3	1.5-1 1.0-1 (1.25)		1

	1	2	3	4	5	6	7	
Programs or services utilized by for adult parolees	Currently available	Not available but needed	Available but not affordable	Available but do NOT refer	Waiting list identified in months		Cognitive-based programming	Bi-lingual/multi-cultural
Substance abuse treatment, in-patient	11	1	2	1	4	1.5-12.0-1 (6.75)		
Substance abuse treatment, out-patient	13		3		4	4.0-1 (4.0)		1
Victim offender reconciliation	7	3		1				1
Other: Medication						1.0-1 (1.0)		
Other (Specify)								
Other (Specify)								

5. In terms of a wait for parolees to utilize services, is the wait due to lack of funds on the part of the offender or lack of openings in the programs or both? Please explain.

3 (or 20%) Lack of funds

0 Lack of openings

10 (or 66.67%) Both

2 (or 13.33%) Unknown

7. Name the top two major barriers to improving services for parolees. Please explain.

1 _____

2 _____

8. Please list, *in order of importance*, your philosophical orientation in carrying out your duties as a parole officer.

(e.g., *Rehabilitation, Compliance, Monitoring, Education, Public Safety, Offender Accountability, Reintegration, Training, etc.*)

Ranked 1

Ranked 2

(1) Public Safety 11

Compliance 7

(2) Education 1

Public Safety 2

(3) Monitoring 1

Offender Accountability 2

(4) Offender Accountability 1

Rehabilitation 2

(5) Compliance 1

Monitoring & Reintegration tie at 1 vote each

9. In your opinion, has Parole tried any innovative programs in the last 3 years that have proven effective?

Yes 2 (or 13.33%)

No 13 (or 86.67%)

If "Yes," please identify and explain below.

10. In your opinion, has Parole tried any innovative programs in the last 3 years that were *not* proven successful?

Yes 1 (or 6.67%)

No 14 (or 93.33%)

If "Yes," please identify and explain below.

11. Please indicate, in order of preference, any services for parolees you would like to add or improve and why.

12. Rank, *in the order of importance*, what you believe would most help you to fulfill your duties as a parole officer.

Ranked 1

Ranked 2

<u>6</u>	<u>1</u>	Officer safety
<u>1</u>	—	Staff development training
<u>1</u>	<u>3</u>	Additional staff
—	—	Reduced caseload
<u>5</u>	<u>7</u>	Increased salary
<u>1</u>	<u>4</u>	Equipment upgrades
<u>1</u>	—	Other (Please Indicate)_____

13. How might the Community Corrections Council assist you in adult offender supervision?

14. Please provide any other additional comments you believe would be helpful.

Thank you very much for taking time to complete this survey!

250 Probation Officers
 157 Probation Survey Responses
 17 Parole Officers
 15 Parole Survey Responses

PROBATION & PAROLE OFFICER
ADULT OFFENDER PROGRAMS & SERVICES SURVEY

1. What is the title of your current position?

- | | | |
|--|-----------------------------|---------------------------------|
| <u>5</u> Trainee | <u>5</u> Case Manager | <u>10</u> Senior Parole Officer |
| <u>29</u> Probation Officer | <u>2</u> Supervisor | <u>3</u> Parole Officer |
| <u>70</u> Senior Probation Officer | <u>13</u> ISP Coordinator | <u>2</u> District Supervisor |
| <u>12</u> Deputy Chief Probation Officer | <u>4</u> ISP Officer | |
| <u>12</u> Chief Probation Officer | <u>5</u> Senior ISP Officer | |

2. How long have you been with Probation / parole?

2 months 12 years

3. What is the location where you work? Indicate city, district, or region, if applicable.

City/Cities _____

Parole District Lincoln District -7 Omaha District -8

Probation District 1-4, 2-11, 3-10, 4-24, 5-8, 6-9, 7-7, 8-5, 9-12,
10-6, 12-4, 16-3, 17-8, 18-4, 20-7

Region A-3, B-4, D-3, E-5, F-6

Lincoln Parole District =
 Grand Island, North Platte,
 Scottsbluff, Lincoln
Omaha Parole District =
 Omaha, Norfolk

4. In the box below, please indicate (Specify all that apply):

- In column 1 – programs or services currently available to **adult** offenders in the community where you provide supervision.
- In column 2 – programs or services for **adult** offenders not available but needed in the community where you provide supervision.
- In column 3 – programs or services that are available but not affordable.
- In column 4 – programs or services that are available but you do not refer clients to based on inadequacies or low quality.
- In column 5 – programs or services that have a waiting list (If a waiting list exists, indicate the wait by number of months).
- In column 6 – programs or services that incorporate cognitive-based programming (Please indicate “Yes,” “No,” or “Not Sure”).
- In column 7 – programs or services available that offer bi-lingual or multi-cultural services (If “Yes”, please indicate language or cultural service.)

Explanation of Table

Bolded numbers in the table indicate the number of probation/parole staff who said the service was currently available, not available but needed, etc. Example: 137 probation/parole officers said anger management was currently available.

Waiting list identified in months has 2 columns. The first column under waiting list has a single number and it represents the number of probation/parole staff that indicated yes there is a wait list but gave no indication of how many months. The second column has 2 numbers separated by a dash such as .75 - 1, which means 1 probation/parole staff said there was a wait of .75 months. The number inside parenthesis indicates the average amount of waiting indicated.

.25 = 1 week .50 = 2 weeks .75 = 3 weeks 1.0 = 1 month

	1	2	3	4	5		6	7
Programs or services utilized by for adult probationers	Currently available	Not available but needed	Available but not affordable	Available but do NOT refer	Waiting list identified in months		Cognitive-based programming	Bi-lingual/multi-cultural
Anger management	137	20	14	8	2	3.0 -1 .75 -1 (1.875)	16	15
Community service	152	6	0	5	0		4	11
Day reporting center	36	70	0	8	1		4	3
Domestic violence batterers program	130	22	19	5	9	.75 -1 1.5 -3 (1.31)	15	22
Domestic violence evaluation services	102	43	4	5	1	3.5 -1 (3.5)	6	19
Drug court	71	49	2	14	1		9	8
Drug testing	156	0	0	2	0		1	8
Electronic monitoring	145	5	2	5	0		5	6
Education services	141	15	1	4	0		2	27
Gang-related services/unit	26	65	1	7	0		3	4
Halfway house	87	57	3	8	18	1.0 -2 1.25 -1 1.5 -2 2.0 -1 4.5 -1 (1.82)	2	4
Job skills training/vocational	113	36	3	8	1		4	11
Mental health, in-patient	61	62	23	4	8	1.0 -1 4.0 -1 (2.5)	2	5
Mental health, out-patient	126	6	32	3	4		5	14
Parenting class	125	21	2	3	7	2.0-1 3.0-1 5.0-1 (3.33)	6	9
Sex offender evaluation	82	55	28	5	4	.25-1 (.25)	3	5

	1	2	3	4	5		6	7
Programs or services utilized by for adult probationers	Currently available	Not available but needed	Available but not affordable	Available but do NOT refer	Waiting list identified in months		Cognitive-based programming	Bi-lingual/multi-cultural
Sex offender services, out-patient	79	60	21	4	4		4	5
Sex offender treatment, In-patient	24	99	4	7	5	1.5 -1 (1.5)	2	2
Substance abuse evaluation	149	5	21	3	19	1.0 -3 1.5 -5 2.0 -3 4.5 -1 (1.75)	2	33
Substance abuse treatment, in-patient	84	44	25	3	46	1.0 -4 1.5 -5 2.0 -6 3.0 -1 3.5 -1 4.0 -3 4.5 -3 9.0 -1 12.0 -1 (3.06)	4	7
Substance abuse treatment, out-patient	145	5	20	3	24	.75 -1 1.0 -2 1.5 -2 1.75 -1 2.0 -1 3.5 -1 4.0 -1 4.5 -1 (2.15)	8	31
Victim offender reconciliation	65	57	3	7	1		2	5
Other: CD Treatment for IOP						6.0-1 (6.0)		
Other: MADD						5.0-1 (5.0)		
Other: Medication						1.0-1 (1.0)		

5. In terms of a wait for probationers / parolees to utilize services, is the wait due to lack of funds on the part of the offender or lack of openings in the programs or both? Please explain.

37 (or 21.51%) Lack of funds

17 (or 9.88%) Lack of openings

106 (or 61.63%) Both

12 (or 6.98%) Unknown

7. Name the top two major barriers to improving services for probationers / parolees. Please explain.

1 _____

2 _____

8. Please list, *in order of importance*, your philosophical orientation in carrying out your duties as a probation / parole officer.
(*e.g., Rehabilitation, Compliance, Monitoring, Education, Public Safety, Offender Accountability, Reintegration, Training, etc.*)

Ranked 1

Ranked 2

(1) <u>Public Safety 73</u>	<u>Offender Accountability 56</u>
(2) <u>Rehabilitation 30</u>	<u>Rehabilitation 38</u>
(3) <u>Offender Accountability 30</u>	<u>Public Safety 26</u>
(4) <u>Other 19</u>	<u>Compliance 25</u>
(5) <u>Compliance 17</u>	<u>Monitoring 5</u>

9. In your opinion, has Probation / parole tried any innovative programs in the last 3 years that have proven effective?

Yes **103 (or 59.88%)**

No **69 (or 40.12%)**

If "Yes," please identify and explain below.

10. In your opinion, has Probation / parole tried any innovative programs in the last 3 years that were not proven successful?

Yes **43 (or 25.00%)**

No **129 (or 75.00%)**

If "Yes," please identify and explain below.

11. Please indicate, in order of preference, any services for probationers / parolees you would like to add or improve and why.

12. Rank, *in the order of importance*, what you believe would most help you to fulfill your duties as a probation / parole officer.

Ranked 1

Ranked 2

<u>20</u>	<u>19</u>	Officer safety
<u>25</u>	<u>22</u>	Staff development training
<u>37</u>	<u>43</u>	Additional staff
<u>55</u>	<u>28</u>	Reduced caseload
<u>21</u>	<u>23</u>	Increased salary
<u>6</u>	<u>22</u>	Equipment upgrades
<u>6</u>	<u>5</u>	Other (Please Indicate)_____

13. How might the Community Corrections Council assist you in adult offender supervision?

14. Please provide any other additional comments you believe would be helpful.

Thank you very much for taking time to complete this survey!

