

Introduction to the TPAI

**State of Connecticut
Department of Correction**



Impetus Leading to the TPAI

- ❑ DOC has had unacceptably high levels of waiting lists for its programs.
 - ❑ DOC offers many programs to offenders, some addressing criminogenic needs, others not.
 - ❑ A decision was made to identify and prioritize a limited number of core programs that addressed critical criminogenic needs.
 - ❑ These priority programs should be evidence-based.
 - ❑ This would free up space in core programs for higher-risk offenders and give us reasonable assurance that these efforts were having some effect.
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The Need for a Triage System

- Systems such as Departments of Correction cannot provide all the assessments & programs it would ideally provide due to resource limitations.
 - A rational triage system needs to exist to allocate limited resources.
 - A good place to start is by sorting inmates by level of risk of recidivating.
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Static Risk Assessment

- A static risk assessment has advantages.
 - Obviously based on the “risk principle.”
 - Easy to conduct
 - Economical
 - Easy to validate its predictive ability on the particular population for which it will be used.
 - All triage systems based on risk assessment are based on value assessments, not just scientific assessments.
 - Cutoffs are based on an assessment of what is acceptable risk given the reality of current resources.
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A Simple Risk Assessment (Proxy for LSI-R)

- Age at first arrest
 - Number of prior arrests
 - Current age
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Treatment and Program Assessment Instrument

- Initially based on the Pennsylvania DOC approach.
 - Adapted to the availability and quality of data.
 - Age @ sentencing to DOC
 - Age at first DOC movement
 - Number of Adult Incarcerations (DOC)
 - Gender
 - Violation of CJ Supervision (DOC)
 - Convictions for Violence (Specified List)
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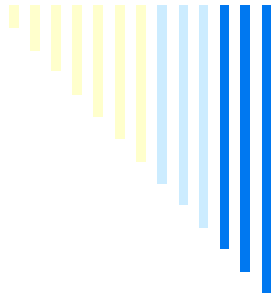
Scoring the TPAI

- Age
 - 50+ 0 points
 - 40-49 1 point
 - 25-39 2 points
 - < 25 3 points
 - Gender Male = 1; Female = 0.
 - Prior Adult Convictions 0-1 = 1; 2+ = 1.
 - Any violent conviction = 1.
 - Age @ first Adult Conviction < 16 = 1.
 - Violated CJ Supervision = 1.
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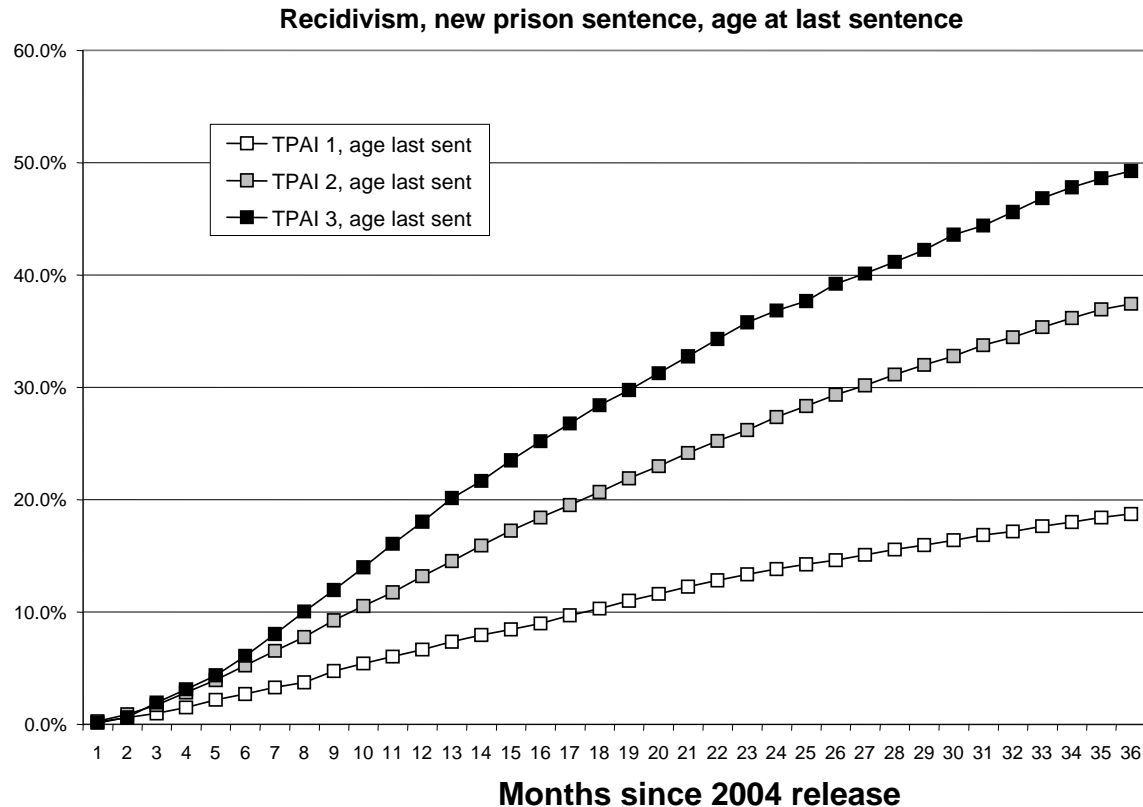


Validating the TPAI

- The goal was to identify a group of individuals who recidivate at a considerably lower rate.
 - We also wanted to know if the TPAI also could identify a group of low risk female offenders.
 - In addition we wanted to know if the TPAI would predict the commission of violent crimes.
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Rate of New Prison Sentence by TPAI Score





New Prison Sentence within 3 Years by TPAI Score

TPAI GROUP		n to Prison	%
1 (0-3)	3456	647	18.7%
2 (4-5)	8499	3181	37.4%
3 (6-8)	4517	2225	49.3%
	16472	6053	36.7%



Timing, Programming, & Treatment

- Upon admission assessments need to be done to triage offenders into appropriate medical and mental health treatment.
 - Sex offenders often require quite lengthy programming and such individuals need to be identified and moved into appropriate housing and programs relatively early due to both programming and security reasons.
 - Offenders with limited proficiency in reading need to be educated in order to be able to participate in most programs that depend on reading ability.
 - Providing some services far removed from release date may not be helpful. Substance abuse is an example.
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Assignment of Programs

- The core programs have an assessment that will be used prior to a person's enrollment.
 - Exceptions now are DV and DOC Reentry Program.
 - Low-risk offenders will not go through the entire battery of assessments.
 - On the front-end of a period of incarceration, these assessments are of more prescriptive utility than the LSI-R.
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Core Programs for Males

- Thinking for a Change
 - Anger Management
 - Sex Offender Programs
 - Addiction Programs
 - DOC Reentry Program
 - Education and Vocation Programs
 - Domestic Violence
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Validation of the TPAI

- In order to be of utility, the TPAI would have to be shown to predict recidivism. This is referred to as predictive validity.
 - Arrest, conviction, and re-incarceration data are available for 14, 472 offenders who left DOC facilities in calendar year 2004.
 - Used a “first instance” methodology.
 - In addition to the above it would also be helpful if the TPAI provided information about the probability of groups of offenders to recidivate with a violent crime.
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Violence & the TPAI

TPAI Score	n	Violent Crimes	%
0	28	0	0%
1	283	1	0%
2	911	5	1%
3	2234	30	1%
4	3804	133	3%
5	4695	298	6%
6	3794	333	9%
7	704	97	14%
8	19	4	21%
Totals	16472	901	5%



Females & the TPAI

- ❑ 54% fell into lowest risk group; for Males this was 21%.
 - ❑ Return for new offense = 19%.
 - ❑ Considering only TPAI score of 0-2 reduces both risk and number.
 - ❑ Therefore, the TPAI could be used as a triage tool for females.
 - ❑ But, is there something different about females in prison to consider?
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Assessment for Females

- Assessment of needs, especially mental health needs is in fact a predictor of institutional adjustment problems.
 - Therefore, for females, a tool such as the LSI-R, may be of prescriptive utility.
 - Sentences are shorter and therefore more could also have prescriptive utility related to reentry planning.
 - LSI-R has a Gender Responsive Trailer and is under review now with the author.
 - We are also in the process of modifying the current classification system for females.
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Using the LSI-R

- As offenders are closer to release (1 year) there is increased utility in conducting the LSI-R.
 - Prescriptive utility in planning for release services and supervision.
 - Integration of the LSI-R and Reentry Program.
 - LSI-R utility requires extensive training and quality assurance.
 - Validity of scoring.
 - Case management training.
 - Q.A. for both supervision & programming.
 - Is something lost when the supervising agent does not conduct the LSI-R?
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Summary

- We will use the TPAI as a static risk instrument to triage male offenders into programming.
 - We will review other uses of the TPAI related to release considerations including consulting with the BOPP.
 - Parole will continue to use the LSI-R for case management.
 - Parole may adopt the short version of the LSI-R or the TPAI to screen out very low risk individuals.
 - Both assessments and classification for females will undoubtedly change in the next year.
 - We will continue to work with CJPP on analyzing data.
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