

INMATE CLASSIFICATION, NATIONAL TRENDS AND
THEIR EFFECT ON THE PENNSYLVANIA
CLASSIFICATION SYSTEM

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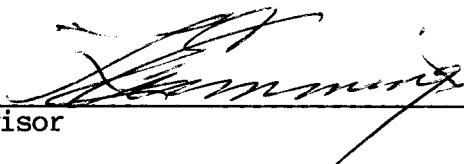
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ABSTRACT

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For centuries, society has resorted almost exclusively to the use of brute force in dealing with offenders. As early as the eighteenth century, it became apparent that brutal forms of punishment were neither effective nor humane. Due in part to the Quaker influence, Pennsylvania became the first state to abolish the use of corporal punishment for crime. A system of incarceration was instituted with the goal of protecting society and rehabilitating the offender. As time went on, prison administrators began to view the inmate as a human being with ability and potential to reform.

It is reasonable to estimate that approximately ninety-six percent of the individuals currently incarcerated in prisons throughout the nation will eventually be released back into society. Prisons must, in fact prepare these individuals for their return to society by subjecting them to relevant therapy and educational and vocational programs. Furthermore, prisons must help offenders gain sufficient motivation and personal insight which will allow them to remain crime free following release. Through a process called classification, the correctional system attempts to thoroughly understand the individual offender and the factors which contribute to his/her present difficulties.

Classification allows an offender's needs to be identified in a variety of areas. Institutional treatments and programs are then targeted to meet these varying needs during confinement.

This paper is intended to provide a logical, historical review of the evolution of offender classification. ~~The~~ various national trends that have emerged will be ~~reviewed~~ and discussion will conclude with the **impact** that these national trends have had on the **Pennsylvania** system of offender classification.

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CHAPTER I

INTRODUCTION

It is realistic to assume that only 5 out of every 1000 offenders end up serving periods of incarceration in adult correctional facilities. In a majority of misdemeanor and minor degree felony cases, the payment of fines, costs and restitution along with a period of probation is the only penalty. This writer is not going to argue the fact that it is impossible to jail everyone who violates the law. Nor can it be challenged that these alternatives to incarceration are less costly. On the other hand, it is also unrealistic to think of orderly law abiding society without prisons. If the alternatives to prison were working effectively, many prisons would be phased out and closed. In reality, the opposite appears to be taking place today throughout the country. The 5 per 1000 ratio of incarceration per number of convictions will escalate in coming years and more and more prisons will be needed as we finish out this century.

Prisons and jails serve a variety of conflicting objectives. These institutions are in place not only to punish but to correct. They are a visible reminder of the type of sanctions that can be imposed by society for criminal behavior. Prisons also simply warehouse those who are too dangerous to continue free independent life. It is difficult to say, specifically, just what prisons are to achieve.

A growing number of citizens in the United States share the opinion that offenders deserve to be locked up. With ever increasing

concern for victims' rights, the focus in the criminal justice system appears to be providing a "just desert" for an offense. Probation or other sentencing alternatives cannot carry out **punishment** as directly or with as **much** of an impact as "total confinement." It is assumed that through the denial of liberty and the physical separation of the individual from family and friends, an offender will, in effect, learn his lesson and avoid future exposure to prison and adopt a "law abiding" lifestyle.

The second major objective that prisons and jails serve is in taking offenders out of circulation so that they cannot continue to offend. This is **termed** "incapacitation". In this way, imprisonment is an absolute **guarantee** that future crimes will not be **committed** by the individual for a given period of time. Probation and other sentencing alternatives cannot offer this **type** of iron clad guarantee of societal protection. Although **it** is difficult to measure the success of incapacitation, in theory **its** application appears to have some merit in certain cases. In addition to locking people up for a societal revenge or to get an offender out of circulation, defendants are at times imprisoned in order to deter others from **committing** similar offenses. Imprisonment is a visible sanction. An example is the recent imprisonment of **government** officials involved in ABSCAM. It is unlikely that these officials will **reoffend** by **committing** similar acts. A lesser sentence **would** have no true deterrent affect and in effect lessen society's perception of the seriousness of the crime,

Finally, and of particular interest, an important role of imprisonment is rehabilitation. Incarceration through forced isolation allows an individual to take a hard look at **his/her** life situation and

make improvements where necessary. The prisons of the 1980's are equipped with medical treatment facilities. They offer psychiatric and psychological services; also provided are basic education classes, vocational training programs, college courses, substance abuse therapy groups and a wide range of religious programs. Each program and service allows the inmate a means through which self-improvement can be achieved. Through a process called classification, the Correctional Institution attempts to identify an offender's rehabilitative needs and focus appropriate treatment programs which are geared to meet them.

At that point of entry into the Correctional System, little is known about the individual inmate's wants, needs, strengths and weaknesses. Basically, he or she is an unknown entity. Classification provides an objective, systematic approach for individual evaluation of the offender. If prisons are to effectively succeed in their most important goal, the rehabilitation of the offender, the criminal justice practitioner must have at his disposal state of the art methods of insuring proper allocation of treatment resources in areas of true need.

Objective/Purpose

Through the Quaker-inspired Walnut Street Jail and Eastern Penitentiary, the Commonwealth of Pennsylvania has been acknowledged as a pioneer in the humane handling of offenders through the utilization of classification methodology. Classification in Pennsylvania prisons has evolved from a simple process of separating inmates: weak from strong; men from women and black from white to the present day complex scientific method of offender classification including individual diagnosis, program development and program execution. Over the years a

variety of national trends have influenced the Pennsylvania **System** of Classification. This paper will trace the history of classification from the colonial period to the present, and will focus on relevant national trends which have emerged. The effect that these trends have had on the Pennsylvania System of Classification will be analyzed.

A thorough historical study of this type has never been attempted. The **knowledge** gained through research into this subject will contribute to a greater understanding of the origins of classification in the Pennsylvania Correctional System.

Methodology

This paper **has** been prepared, utilizing the following methodology:

A. An extensive review of Criminal Justice literature, including correctional journals such as Corrections Magazine, Federal Probation and Corrections Today. Other primary sources included Pennsylvania Department of Corrections operations manuals.

B. Legal research involving statutes and case law of a precedent setting nature, relevant to the establishment of classification **systems** in the United States.

C. A search through the various operations manuals of the Department of **Corrections** in Pennsylvania.

D. Institutional **visits** to the State Correctional facilities at Pittsburgh and Greensburg to review the practice of offender classification in operation and interviews with administrative personnel.

E. Personal **work** experience which has resulted in familiarity with the practice of classification in the State of Pennsylvania.

CHAPTER II

INMATE CLASSIFICATION PRIOR TO 1900

Classification for Separation & Segregation by Types

In order to establish an intelligent appreciation regarding the development of a system of institutional classification for treatment and rehabilitation of offenders, a brief historical orientation on the evolution of this concept appears to be appropriate.

As history reveals, the imprisonment of convicted offenders is a relatively new practice. Until approximately two hundred years ago, offenders were punished by flogging, banishment, humiliation or by the payment of fines. An individual criminal could also be put to death in response to a particular offense. Imprisonment or detention was utilized exclusively for those awaiting sentence. In the latter part of the eighteenth century, partially in response to the writings of social theorists such as Montesquieu, Beccaria, Rousseau and Blackstone, brutal punishments were abandoned in favor of a more "humane" approach, namely total incarceration.

In 1787, a small group of Americans including Benjamin Franklin and Dr. Benjamin Rush organized the Philadelphia Society for Alleviating the Miseries of Public Prisons; a year later, in the first of many memorials issued to the legislature, the society declared its belief that solitary confinement at hard labor with total abstinence was thought to be the most effective means of reforming criminals. Impressed with the argument in favor of hard labor in prison, which satisfied the

desire for profit as well as the movement toward piety, the Pennsylvania General Assembly in 1770 enacted the legislation providing solitary confinement at hard labor. The course of the penal history was changed, the penitentiary was born. Classification of offenders has been practiced and often disguised in one form or another since this point in American history. Historically, classification has operated under various names and usually reflected the philosophy of a particular prison. At its beginning stages, classification was little more than a broad separation of offenders, one from another. In their writings, the Philadelphia reformers felt that criminals would contaminate one another through interacting and segregation would effectively stop the spread of criminal ideas.

In laying the foundation for the implementation of a rudimentary classification system in the penitentiary, the Philadelphia Prison Society wrote: "The sexes must be segregated," "the hardest criminal must be separated from the novice in crime," and "the debtor from the ordinary criminal." The first penitentiary built to initiate the segregation philosophy was Eastern Penitentiary in Philadelphia.

Another movement which emerged during this period was led by the Quakers and other evangelical denominations. The Quakers felt that prisoners should be separated one from another in order to allow ample time for personal reparation. Religious meditation was thought to be an excellent method of rehabilitating an individual for possible, future reintegration into society. Repentance and redemption are only obtained through reflection in solitude. Eastern Penitentiary was designed specifically to serve this purpose. Inmates were housed in single

cubicles arranged in a manner which prevented the prisoners from interacting. An individual would eat, sleep, exercise, meditate and work within the confines of his cell. Work was used as a method of rehabilitation. Solitary work programs such as shoemaking and weaving were incorporated into the daily routine to reduce problems associated with idleness.

In the late eighteenth century through the beginning of the nineteenth century, prisons served as little more than human warehouses. Corporal punishment was utilized as a means of maintaining control. As time elapsed, state officials began to find institutions constructed according to the Pennsylvania system of solitary confinement both costly to construct and difficult to manage. Under the Pennsylvania system it was difficult to assemble and administer a collective labor force. Furthermore, total solitary confinement was very difficult mentally for the individual offender.

Under an Act of 1821, following an experiment in Pennsylvania, New York adopted a scheme of grading which proposed three classes. The most dangerous and impenitent composed the first class, which was doomed to constant confinement in solitary cells. The second class, to be less incorrigible should alternate between solitary confinement and labor as a recreation. The third, being the most hopeful, were to work in association by day and be in seclusion by night.² Hence came a rival system of prison discipline beginning in Auburn, New York in 1824-25, where prisoners were confined in solitude during the night but were allowed to work together in shops during the day. Since complete silence was imposed upon prisoners outside their cells, the Auburn

System became known as the Silent System. This system became popular because it served to provide a mechanism for collective labor. At this period, treatment and rehabilitation programs were practically nonexistent. By the end of the 19th century, penologists are beginning to discover that prisons should serve more of a purpose in rehabilitating individual inmates.³

In October 1870, prison reformers and others interested in welfare of inmates were summoned to Cincinnati for a meeting. This first meeting of the National Council on Penitentiary and Reformatory Discipline, expounded the leading reform ideas of the period and brought into being the National Prison Association. During the conference, a number of excellent papers were presented and the association adopted their now famous "Declaration of Principles."⁴

The National Prison Association, in the "Declaration of Principles" recognized that correctional programs should reflect the fact that prisoners were human beings with the need for dignity as well as reformation. The following selection of principles is instructive:

- V - The prisoner's destiny should be placed measurably in his own hands; he must be put into circumstances where he will be able, through his own exertions, to continually better his own conditions.
- XI - The system of prison discipline, to be truly reformatory must gain the will of the prisoner. He is to be amended; but how is this possible with his mind in a state of hostility?
- XIV - The prisoner's self-respect should be cultivated to the utmost, and every effort made to give back to him his manhood. There is no greater mistake in the whole compass of penal discipline than its studied imposition of degradation as a part of punishment.⁵

Until this time, the classification in American prisons was a practice synonymous with separation. In order to minimize internal problems and insure orderly operations, weak offenders were separated from the strong. Men were separated from women. This separation also took place along racial lines and the black offender was kept separate from the white. Also, the young salvageable inmate was segregated from the older incorrigibles.

Beginning in the middle of the 19th century and continuing through the 20th century, an obvious national trend had taken place in prisons. Specialized institutions were designated to house specific categories of offenders.

This trend originated in 1841 when Dorothea Dix began a campaign urging legislators to remove the insane from prisons throughout the country. Twenty states responded to her appeals by either establishing or enlarging institutions for the insane, or creating more than one institution of this sort. Through her efforts, Pennsylvania opened its first asylum at Harrisburg in 1845.⁶ Special institutions were opened to house increasing numbers of women offenders. In turn, juveniles, negroes and the sick were afforded specialized incarceration.

Overcrowding had become a problem in the 1860's and the need for new institutions became evident. The reformatory ideals espoused at Cincinnati along with the trend toward separate institutions for different types of offenders were to be applied in newly constructed institutions. The Elmira Reformatory at Elmira, New York became a model for all that followed. Reformatories were established in eleven states between 1877 and 1901.

The practice of **specialized** classification was practiced in **Elmira**. Essentially, the reformatory dealt with first offenders **between** the ages of 16 and 30. **The** indeterminate sentence was implemented along with a system of parole supervision. A classification (or grading) system **was formulated**. The system stressed personal reformation rather than penance. Individual change and progress was encouraged rather than spiritual reparation. **At the Elmira Reformatory,** inmates were divided into **three** classes or grades. At entry, each inmate was placed in the second grade. At the end of six months of good conduct, he could be promoted to the first grade, and six months of good behavior in this grade could entitle **him** to parole. Misbehavior was punished by demotion to the third grade, where a months good conduct was required before restoration to **the** second grade. Incurable inmates had to serve the maximum sentence.⁷

The correctional philosophy at the time held that society maintains the right of defense and self protection against the offender, **but** society has no hate or **animosity** for the incarcerated offender. Imprisonment was used for the protection and security of others. **It was** not for the **purpose of** taking vengeance upon the offender. Rather, the purpose was to aid in the re-education or re-socialization of the offender, since this task **was** not adequately **accomplished** in the **developmental** years of the child. The goal in correction was to aid the individual in his efforts to learn and develop **his** capabilities and potentialities and to direct his energies toward constructive self and social **goals**. In a sense, the offender was no longer expected to pay

back his debt to society; **it** is society who must **pay back** its debt to the offender for its failure to do **the job** properly in the first place. **8**

FOOTNOTES

¹Harry Barnes and Negley Teters: New Horizons in Criminology, (New York: Prentice, Hall Inc. 1945), p. 756.

²George Killinger and Paul Cromwell: Penology: The Evolution of Corrections in America, (St. Paul, Minnesota: West Publishing Company, 1973), p. 69.

³A detailed discussion of the emergence of the Auburn System of Penology along with corresponding background may be found in H. Barnes and N. Teters: New Horizons in Criminology, (New York: Prentice Hall, Inc., 1945) pp. 516-538.

⁴George Killinger and Paul Cromwell: Introduction to Corrections, (St. Paul, Minnesota: West Publishing Company, 1978), p. 59.

⁵George Killinger and Paul Cromwell, (1978), p. 59.

⁶Harry Barnes and Negley Teters, p. 759.

⁷Harry Barnes and Negley Teters, p. 554.

⁸Leonard J. Hippchen, Correctional Classification and Treatment, (Cincinnati, Ohio: W. H. Anderson Company, 1975), p. 19.

CHAPTER III

1900 - 1935

The New Jersey System & The Industrial Period

By the twentieth century, thanks to the efforts of the Correctional Congress of 1870, various penologists attempted to successfully approach the phenomena of criminality. Links were proposed between various geographic and ecological locations and criminality. Immigrants were viewed as causes of escalating urban crime rates. Phrenologists continue to propose that certain physical characteristics and head configurations could identify criminals. The Positive School of Criminology is, however, credited with providing the most important contribution to the advancement of criminal justice theory. According to the positivists, the criminal is viewed as an individual suffering from a "social sickness". Theoretically, if the causes of the social sickness are known, then the penologist could prescribe an appropriate treatment and thus effect a cure.

The adoption of the treatment model has been described in Struggle for Justice, prepared for the American Friends Service Committee and was reproduced for use in the National Advisory Commission report on Corrections. Previously, reformation was achieved through penitence or the acquisition of working skills and habits. This theory was changed following various developments in the social and behavioral science. Varying scientific or pseudo-scientific approaches to crime, although in conflict with one another and unconfirmed by hard scientific

data view criminals **as** distinct biological, psychological or social cultural types. Such theories **all** share a more or less deterministic premise holding that man's behavior is caused by social or psychological forces located outside his consciousness and therefore beyond his control. **Rehabilitation**, therefore, is **deemed** to require expert help so as to provide the inmate with the understanding and guidance that **it** is assumed he cannot achieve on his **own**.⁹ **This** new trend toward treatment of the offender caused prisons throughout the country to employ practitioners in the fields of psychology, psychiatry and social work.

Benjamin Kaysman as cited in **Edwin Sutherland's** Criminology writes:

"we have to treat them (convicts) **as** sick people, which in every respect they are.. **it** is the hope of **the more** progressive **elements** in psychotherapy and criminology that the guard and the jailer will be replaced by the nurse and the judge by the psychiatrist, **whose** sole attempt will be to treat and cure the individual instead of merely to punish him. **Then** and only then can **we** hope to lessen, even if not **entirely** to abolish crime, the **most** costly burden that society has today."¹⁰

Educators capable of instructing inmates in basic **academic** skills such as reading and mathematics rode into the prisons on the treatment bandwagon. *Also* prisons introduced chaplains to the institution as **paid** staff **members** **charged** with the duty of providing **moral** instruction.

During the period from 1914 to 1918, social science was developing and finding deeper inroads into **the** prison. **At** Sing Sing prison in New York, Dr. Bernard **Gluek** began conducting individual studies of inmates. Similar studies **were** conducted by Dr. **W.J. Root** at Western Penitentiary in Pittsburgh, PA. Studies by **Root** and other social scientists eventually led to the system of "classification"

based on the development of case histories known in correctional circles today. The classification system was the death knell: for the "old prison discipline". The idea that all prisoners should be treated alike and would no longer suffer, for once presented with the case histories of offenders, treatment was destined to become individualized. 11

The New Jersey System of inmate classification was implemented in 1918 when a diagnostic clinic opened in the New Jersey State Prison.

Essentially, this clinic was intended to diagnose appropriate rehabilitative treatment for individual inmates. After thorough psychological, medical and psychiatric diagnosis, prisoners were sorted into six major groups:

1. The difficult class, (recidivists, alcoholics, addicts).
2. Better class:
 - A. Those serving long terms.
 - B. Those not serving long terms.
 - C. Young defective delinquent with good intelligence.
3. Simple and feeble minded class.
4. Senile and incapacitated class.
5. Psychotic and epileptic class.
6. Defective delinquent group. 12

The early New Jersey classification system was established to analytically determine into which general class an individual inmate belongs. The four phases of classification were diagnosis, assignment guidance, supervision and restoration. A brief overview is provided in the following paragraphs. 13

During the diagnosis phase the new inmate was subjected to a variety of tests and evaluations during a 30 day quarantine period. The psychiatrist, physician, psychologist, chaplain, director of education

and social caseworker all were involved in the diagnosis. Each practitioner formulated a treatment plan specifically geared to meet the needs of the inmate. Class designation treatment and rehabilitative program participation were prescribed in the assignment phase by a Case Assignment Committee. This phase also included the determination of institution housing, job and training programs.

The third phase was that of guidance. The classification committee's recommendations were monitored by the social caseworker. Accomplishments and individual program changes were documented. The offender was subjected to periodic personal counseling utilizing social work methods to insure his progress within the institution. Also in this phase reclassification was carried out to re-evaluate and alter treatment objectives, add responsibility or decrease security.

Restoration served to fulfill the objective of the prison, namely to restore a man to the community with a greater ability to cope with life and function within society.

The main purpose of the New Jersey classification system was to correct correctable characteristics, to hold in custody those for whom no corrective means have been found, to guide in a way that will make for possible success on regaining freedom and assisting the prisoners to take full advantage of the opportunities which the community offers for his rehabilitation. The final aspect of the classification plan in the New Jersey system was necessary because rehabilitation was said to be impossible when various classes of inmates are grouped together in the same prison.

Despite the appeal of professionals, the trend toward treatment-oriented institutions did not spread in this country until after the

Great Depression. *One* factor which contributed to **this** ideological stagnation **was** the problem of prison overcrowding. In the period 1900 to 1930 **more** prisons **were** needed to house increasing numbers of offenders. The period 1904 to 1935 saw a drastic rise in the American prison population from 53,292 to 126,258 inmates.¹⁴ **This** increase was attributed to the industrial revolution which caused many citizens to **abandon** rural farm life in favor of employment in industrial urban areas. In addition, an influx of **European immigrants** added to the congestion of city life., A natural by-product of **overcrowding** within the cities was an increase in law violations and subsequently in incarceration.

The industrial revolution **also caused** prisons to focus attention on industry behind the walls. Wardens **throughout the** country **were** taking advantage of captive but able bodied manpower to produce various goods. The money generated by inmate **labor** and the sale of products produced **were** essential to the survival of most prisons. In the 1920's **work** was the **number** one priority. Prisoner reform and rehabilitation **were** placed on the back burner. Classification reverted back to the early days of **American penology** and was used for separation purposes. **Rudimentary** classification systems **were mainly** used to separate the weak from the strong. **Those best** suited for manual labor were identified and utilized. Except in **some** isolated areas such as those mentioned earlier, **American** prisons **between** 1900 and 1930 offered programs **that were** custodial, **punitive** and industrial.

Private industry **has** historically challenged **the** practice of selling prison-made goods on the open market. **The** Great Depression 1929-1933 caused thousands of free law abiding citizens to lose

employment. In order to move jobs from inside the wall to the outside, Federal and State legislators passed laws which closed prison industrial plants.

The most notable among the legislative curbs on prison industry were the Hawes Cooper Act, passed by Congress in 1929, and the Amherst Sumners Act, passed in 1935. The former wrested prison-made goods of their interstate characteristics on arrival at a destination, thus bringing them under purview of the laws. The latter prohibited companies from accepting prison-made goods for shipment to any other state in violation of the state's laws, and required that all such goods be labeled "prison-made" before being involved in interstate transportation. The Act of 1935 excluded almost all prison-made product from interstate commerce and most states had by this period passed same law placing limitation on prison-made products.¹⁵

FOOTNOTES

⁹American Friends Service Committee, Struggle for Justice, (Hill and Wang, 1971), pp. 36-37.

¹⁰Benjamin Kaysman, cited in Edwin Sutherland and Donald Dressey, Criminology, (Philadelphia: Lippincott Publishers, 1974), p. 605.

¹¹George Killinger and Paul Cromwell, (1978), p. 65.

¹²Fred E. Haynes, The American Prison System, (New York: McGraw Hill Book Company, Inc. 1939), p. 233.

¹³Fred E. Haynes, p. 242. The materials in the remainder of this section are also taken from Haynes.

¹⁴George Killinger and Paul Cromwell, Corrections and Administration, (St. Paul, Minnesota: West Publishing Company, 1976), p. 47.

¹⁵George Killinger and Paul Cromwell, (1976) p. 49.

CHAPTER IV

CLASSIFICATION 1930 - 1950

E Toward Individua Treatment

As the previous chapter explained, the major emphasis in American prisons during the first two decades of the twentieth century was on industry. The few educational programs that existed were designed mainly to provide hands-on practical training in prison industry related areas. Theoretically, it was the belief of early 20th century prison administrators that the day to day routine would instill in the prisoners a work ethic which could be carried over into the private sector job market. Also during this time some advancements were made in inmate classification. The New Jersey method of inmate classification implemented in 1918 was the pioneer in a more individualized approach to dealing with rehabilitation of offenders. Preoccupied with competing against civilian industry, American prisons were not quick to follow New Jersey's lead in regard to classification. The New Jersey Classification system was largely ignored until the depression struck the-country.

Legislation which severely restricted the sale of prison-made goods in the private sector caused prison industries to either shut down or produce goods which could be used by government agencies. This change idled many prisoners and created unrest. The riots and chaos that resulted from an idle inmate population forced correctional administrators to adopt a more humanistic approach to prison management.

In re-evaluating their mission, **industrial** prisons shifted direction and the trend **toward** correctional treatment utilizing a scientific **method** of classification began. The Federal System along with states such as **New** York, Massachusetts and Minnesota emerged as pioneers in the implementation of a classification system which separated the various types of **inmates** in a prison system according to their potential for success in treatment. Individual needs were identified and institutional treatment resources were applied to meet these needs and attempt rehabilitation. The following paragraphs will briefly overview the contributions made by the pioneers in scientific inmate classification-during the 1930's.

The Federal Prison System

Severe **overcrowding** within the Federal Prison System in the late **1920's** caused federal authorities to provide housing facilities for inmates. US. Army barracks such as those in **Leavenworth**, Kansas were converted into prison **camps** and Congress was asked to fund construction of additional institutions.

A program of new construction was approved by Congress in 1930 as a result of the recognition that adequate facilities to care for the inevitable increase in prison **population** must be provided. **The need** was indicated by the growth of the average daily population from 3,760 in 1920 to 11,250 in 1930. **The** federal institutions authorized by Congress were a new penitentiary for the north-eastern section of the country, a reformatory for the south—st, and a hospital for defective delinquents. With the three institutions at Atlanta, **Leavenworth**, **McNeil** Island, and the reformatory for women at **Alderson**, the four new institutions gave

the federal **penal** system facilities for handling different types of offenders in the different sections of the country. ¹⁶

Patterning a classification system after **New Jersey**, the federal government eventually **was** able to classify its various institutions **as** either maximum, **medium** or **minimum** security, thus allowing **placement** of inmates within the federal system according to their respective custody needs. Probation and parole **were** utilized **as means** of dealing with first time offenders. **Under** the leadership of Sanford **Bates**, the federal prison system in 1930's continued to develop a classification system which attempted to abandon the age of old philosophy of mass treatment and began **to** focus on individual **treatment** of offenders. Social service units **were** established within the institutions to prepare individual case histories of **new commitments** and assist prisoners with personal and family problems. Psychologists and social **workers** staffed these social service units and attempted to scientifically prescribe a method of treatment for the offender utilizing existing institutional resources. Specific offender needs **were** identified and medical, educational, vocational or occupational resources **were** targeted to meet these needs. **As** in **New Jersey**, a classification **committee** composed of various **specialists** coordinated housing and program assignments.

New York

In 1929, following a series of destructive riots within the **New York** system, a **commission** was formed to study the prisons within the state and provide the legislature with suggestions for improvement. Several **recommendations** **were** made. First, the state was encouraged to abandon future construction of old fortress-like prisons. Two reception prisons **were** recommended to thoroughly examine each prisoner and

determine the relevant program needs. Classification boards were suggested to coordinate the decision making involved in the process,

Each of the boards was to consist of the Deputy Commissioner of Correction, the Warden, the Psychiatrist in charge of the unit, the Psychologist, the prison Physician, a representative of prison industries, the head schoolteacher and the prison chaplain. The full record of each prisoner was to be placed before the board for consideration after which he would appear in person and be interviewed. The board would then formulate its recommendations and a full report on the case was compiled including the main facts in the assignment of a prisoner to a particular prison community and, if he is transferred, a copy of his report would accompany him.

Six months after admission, the case of each inmate was to be reviewed to determine whether or not he is making progress and whether or not any change should be made in his assignment. The case of every inmate was then reviewed at least once per year during the term of his incarceration. A full record of the facts relating to each case was to be sent to the central office at Albany and kept up to date.¹⁷

The commission report essentially aimed to create a scientifically oriented prison system. A classification procedure similar to the ones in New Jersey and in the Federal Bureau of Prisons was implemented. The New York report stresses the importance of a centralized authority to manage and oversee the operation of the various institutions within the state. Also the trend toward centralized reception centers emerges to the forefront of correctional ideology, The New York method of classification also classified the various prisons in the state according to their degree of security and types

of rehabilitative services. New York in the 1930's operated six types of prisons.

1. Maximum security prisons at Clinton, Auburn and Attica accepted male adults least suitable for rehabilitation.
2. Maximum security prisons at Great Meadow and Attica emphasized treatment in work, industrial and agricultural programs.
3. Maximum security prisons at Sing Sing and Greenhaven accepted inmates requiring secure custody but with definite possibilities for education or vocational training. These institutions operate formal vocational programs.
4. Medium security prisons at Wallkill, Elmira, the New York State Vocational Institution and Westfield State Farm for Women serviced inmates that did not require a maximum degree of custody. A wide range of training programs were available.
5. Institutions at Albion and Napanoch accepted inmates who were mentally retarded.
6. Institutions for the insane operated at Metteawah and Dannamora.¹⁸

Massachusetts

Massachusetts has been involved in classification throughout the years and has made progressive responses to national trends. Through classification by separation, Massachusetts like most other states in the early 1800's, separated women from men, weak from strong, first offender from recidivist, etc. Classification by specialized institutional housing was implemented in the early twentieth century with specialized institutions designated for delinquents, the insane and women. Individualized treatment began to be practiced in the mid 1920's

when psychiatric examinations were conducted for all new receptions. At this time, Massachusetts employed social work practitioners in the prison setting and based program recommendations on social and psychological evaluation. These recommendations were channeled through a classification committee.

An essential component of any scientific treatment strategy involved monitoring and evaluating the subject in order to determine if he or she was responding appropriately to the method of prescribed treatment. The Massachusetts Prison System stressed the importance of classification as a dynamic and ongoing process that begins with a diagnosis of the inmate's needs, continued with the development of a treatment plan and was modified as the need exists after close monitoring and re-evaluation.

Inclusion of the latter function in the classification process originated in Massachusetts. In order to monitor responses to individualized treatment at the State Prison Colony at Norfolk the distinction was made between house officers and watch officers. The duties of the former were to care for a group of inmates housed in dormitories, composed of three units with accommodations for fifty men in each unit. These officers assisted in the promotion of the adjustment of the inmates to institutional programs and kept daily records of their contacts with them. Watch officers corresponded more closely with institutional guards - they served on the wall, policed the grounds and were generally responsible for the safety and security of the institution, 19

The prison guard was identified as an important actor in the classification process. This trend to utilize correctional officers in

areas other than custody soon spread to other systems in the nation.

Minnesota/Illinois

The concept of a centralized reception and diagnostic clinic initially promoted in New Jersey was again resurrected in the states of Illinois and Minnesota. In Minnesota, by the Classification Act of 1935, all state prisoners were sent to the reformatory at St. Cloud for initial processing and examination. After routine examination and the preparation of a case history, a report on each prisoner was submitted to the State Classification Committee which determined the type of institution the prisoner should serve his sentence. In Illinois, since 1933, all new prisoners here received at the Diagnostic Depot at the Joliet Prison or at the receiving station at Knard. All examinations and preparation of case records here the charge of the state criminologist and his staff. They determined where prisoners would serve time. To the Pontiac Prison were sent all improvable prisoners under 25 years of age; to Statesville all improvable over 25; to Joliet all unimprovable and to Knard the psychopathic, psychotic and mentally defective. Each prisoner was accompanied by the reports and recommendations of the Diagnostic Depot and efforts were made by the wardens to carry-out the plans of treatment prescribed.²⁰ This trend toward the use of centralized diagnostic and classification centers spread throughout the United States during the post world war period of the 1940's. Newly committed inmates were formally received at designated institutions that here equipped with professionals. These professionals, including physicians, psychologists, educators and social workers performed a series of evaluations which, in turn, determined where an inmate would be housed in the system, what type of treatment was

appropriate for a given **case** and what type of educational or vocational training **would** assist the inmate with post release adjustment.

With the expanded use of various classification techniques, the **American** Correctional Association sought to develop a national model on the classification process. **This** model which was published by the ACA in 1947 provided a standard guide for criminal justice professionals seeking to develop a state of the art classification system. **The** following paragraphs will review the essential features of classification as mandated by the ACA.

1. **The Classification Process**

The classification process consists of organized procedures by which diagnosis, **treatment** planning, and the carrying out of the component parts of the general treatment **program** are coordinated and focused on the individual in prison and parole.

2. **The Reception Program**

The reception program includes the instruction or orientation of the newly received inmate regarding the institutional and parole programs during his stay in reception facility while the initial diagnostic case **studies** are being made.

3. **The Admissions Summary**

The admissions **summary** consists of the compilation, first, of information from all phases of the diagnostic study during the reception period, and second, of the listing of **recommendations** issuing from this diagnosis for the **treatment** of each individual.

The admissions **summary** is the cornerstone upon which a **cumulative** case history is developed, as information about the inmate is added to it **systematically** during his time in prison and on **parole**.

4. The Records Office

A records office, conveniently located and well organized, is essential for the classification program. The cumulative case histories are the primary sources of information about the inmates' programs and all other aspects of their cases.

5. The Institutional Classification Committee

The institutional classification committee consists of personnel representing all institutional departments having contact with individual inmates. They meet together as a whole or in subgroups to consider and to direct the care and treatment program of each individual inmate.

6. The Initial Classification Meeting

The initial classification meeting occurs shortly after an individual inmate's assignment to the institution. All diagnostic factors available in the case are studied and a realistic program of custodial care and constructive treatment is formulated.

7. Reclassification

Reclassification meetings are held at regular intervals and whenever a major change in an inmate's program appears indicated. Such reviews of an individual's case help insure continuity in the treatment program and expedite necessary program revisions to meet the needs of the inmate.

8. Classification Procedures Immediately Prior to Parole or Release

Prior to a parole hearing, the classification committee may prepare a special summary or preparole report which represents the coordinate staff's thinking about an inmate's adjustment and readiness for release, so important in the deliberations of a

paroling authority. It may also include relevant suggestions as to the **most** satisfactory treatment program for the individual after release or parole.²¹

To **summarize** the developments in the classification from the turn of the century through 1950, one must first give appropriate recognition to the New Jersey State Prison System. It was New Jersey that pioneered the **practice** of classification and the shift toward individualized treatment for offenders. The New Jersey system of inmate classification was slightly ahead of its time. **During** the period that this plan was introduced, prisons in the United States placed **heavy emphasis** on prison **industry** and the production of prison **made** goods. **Wardens** and prison administrators had little **time** for seemingly non-productive programs. With the Great Depression **came** new **laws** which spelled the kiss of death for prison industries and correctional practitioners scrambled to **find** ways to occupy an idled and escalating prison **population**.

The United States Prison System, under the direction of Sanford Bates, effectively resurrected and **pumped** new blood into the **concept** of individualized treatment through classification. Using the New Jersey system as a model, the Federal Prison System provided a more scientific approach to classification, whereby an inmate's personal, social, psychological and medical needs **would** be scientifically analyzed. Individual treatment plans **would** then be developed in an attempt to effectively **meet** them. New York was credited with the **development** of a pure systems approach to classification. The various prisons in New York **were** formed into a united system. Prisons **were** then divided according to respective **containment**, capability, and available programs.

Massachusetts implemented a model that included guards as correctional officers in classification. **Guards were** charged with the duty of monitoring an individual inmate's progress toward treatment objectives. Massachusetts added another dimension to the role of prison guard. Illinois and Minnesota **were instrumental** in the establishment of system wide **reception/assessment** and diagnostic centers. Finally it was the **American** Correctional Association that in effect put it all together and standardized the classification system model for national implementation in **the late 1940's**.

FOOTNOTES

¹⁶Fred E. Haynes, p. 247.

¹⁷Fred E. Haynes, p. 254.

¹⁸Harry Barnes and Negley Teeters, p. 764.

¹⁹Fred E. Haynes, p. 258.

²⁰Harry Barnes and Negley Teeters, p. 763, 764.

²¹American Correctional Association, Manual of Correctional Standards, (Washington D.C. : American Corrections Association, 1966), p. 352.

CHAPTER V

1950's & 1960's

Classification & Treatment Program Development

During the period between 1950 and 1966, over 100 riots and other major disturbances troubled American prisons. The eruption of prison violence at this time heightened public awareness and paved the way for some changes in prison programming.²² Investigative reports following these disturbances unanimously agree that prisons must be more productive in providing treatment and rehabilitative services.

A variety of creative approaches emerged at this time, attempting to treat or rehabilitate the inmate by utilizing state of the art behavioral science approaches. Classification during this period was used by prison systems to identify the inmates that could potentially benefit from exposure to a particular rehabilitative approach. Included among the innovative methods of treating offenders during the 1950's and 1960's were individual and group counseling, therapeutic communities, treatment teams, functional units, and re-integration through community corrections programs.

Individual and Group Counseling

Individual counseling involves a one on one relationship in which one endeavors to help another understand and solve his problems. It is distinguished from admonition in that it implies mutual consent. As the term has come to be used with offenders, counseling encompasses the personal and group relationships that are undertaken by the staff.

It has as its goal either the immediate solution of a specific problem or a long-range effort to develop increased self-understanding and maturity within the offender. Counseling may be a part of the activity of a professional caseworker or psychiatrist.²³

Group counseling attempts to solve personal and social problems through the interaction of three or more individuals. Average size group counseling sessions have one or two counselors working with five to ten inmates. In correctional institutions, group counseling sessions are relied upon partly because of the savings in both time and personnel that they afford. Two types of group counseling are commonly practiced, group counseling and group therapy. Group counseling generally focuses on personal and social issues and is conducted by a para-professional or a non-licensed individual. Group therapy is generally concerned with deep-seated psychological problems and is directed by a licensed psychological or mental health professional.²⁴

Therapeutic Communities

In the opinion of the behaviorists, rehabilitation of the offender can only be accomplished in the proper environment. In developing this proper environment, prisons are encouraged to become more humanistic and less rigid. Thus the trend emerges in the 1950's and 1960's to decrease the emphasis on custody and house inmates in the least restrictive, most therapeutic environment possible. Classification was used as the vehicle through which this determination was made.

Traditionally, prisons have been rated as either maximum, medium or minimum security. Realistically, prior to 1950, the first two categories encompassed all prisons. In looking back, prisons classified

as minimum security ~~were~~ actually medium security institutions by modern day standards. The trend toward least restrictive, more therapeutic environments brought on a redefinition of the term and an increase in the use of a minimum security prison. The minimum security prison was specifically designed to function as a **community** with therapy as its mission.

At this time ~~smaller,~~ more **campus** like facilities ~~were~~ constructed. *Also some* existing facilities ~~were~~ converted into a minimum security level of operation. These minimum security institutions replaced bars with **windows** and doors, cells with rooms, and walls surrounding ~~prisons~~ ~~were~~ replaced by fences. In addition, methods of handling disciplinary ~~problems~~ were liberalized; housing and dining facilities ~~were made~~ to be **more** homelike; a friendly, more helpful attitude ~~was~~ developed by the staff in working with the inmates; the role of the staff ~~was~~ changed to that of treatment agents ~~who are~~ concerned about therapeutic outcomes.²⁵

In essence, the mission of this type of prison was changed from the traditional punitive orientation to a more progressive liberal treatment orientation. Within this institution, the focus was on identifying an **inmate's** needs through classification and matching appropriate education, vocational or therapy programs specifically geared to meet them. The prison attempted to create an appropriate environment ~~from~~ which positive personal change could be accomplished by the inmate.

Treatment Teams

The treatment team concept had its origin at the 3332th Retraining Group at **Amarillo Air Force Base** in **Texas** and at the

Federal Correctional Institution at Ashland, Kentucky.²⁶ In this system, the inmate was continually monitored from initial classification through release by a team of staff members. A typical treatment team was composed of three to five members from different departments within the institution. Usually the inmate's counselor, the education instructor, job supervisor and housing correctional officer were members of the treatment team. A specific team was usually designated to monitor inmates assigned to a particular housing unit or dormitory.

Normally an inmate was designated to a particular treatment team by the initial classification committee. These staff members then closely follow an inmate's progress toward achieving treatment goals prescribed by the initial classification committee. Periodic reclassification reviews are then conducted to formally track progress and increase privileges. Reclassification allows the team to collectively determine if the prescribed treatment plan of educational/vocational and therapy programming was effective for the inmate. The treatment team may modify an inmate's program, recommend community corrections programming or release from the institution on parole supervision.

Functional Units

According to Corrections Theorists, Ronald Ziegler, Robert Costello and George Horvath, changes are needed in the prison environment if rehabilitation of inmates is to succeed. They point out that the average inmate spends a very brief period of time each day in therapy or educational programs. The majority of an inmate's day is actually spent in the cellblock or dormitory interacting with his/her peers. It is safe to say that any progress or inroads which are made in therapy, counseling or in the classroom are quickly negated when

the inmate returns to the cellblock or dorm. Ziegler, Costello and Horvath advocated the creation of separate environments or units within the prison, free from psychological pressures where many of the negative effects of the traditional prisons are eliminated. These functional units allow inmates to better themselves in specific treatment areas with a clinical environment.

As explained by Roy E. Gerard, a functional unit can be conceptualized as one of a number of small, self-contained institutions operating in a semi-autonomous fashion within the confines of a larger facility. This concept includes the notion of (a) a relatively small number of offenders (50-100); (b) who are housed together (generally throughout the length of their institutional stay or as they near completion 12 to 18 months); (c) and who work in a close, intensive treatment relationship with a multi-disciplinary, relatively permanently assigned team of staff members whose officers are located within the unit; (d) these staff members have decision making authority within institution aspects of programming and institutional living; (e) assignment of an offender to a particular unit is contingent upon his/her need for the specific type of treatment program offered.²⁷

The functional unit approach to offender treatment has been applied with inmates who share common problems. Various programs of this type for alcoholics, drug addicts and sexual offenders are in operation in prisons throughout the United States. The alcohol treatment unit located at the U.S. Penitentiary at Leavenworth, Kansas follows an operational design which is typical of most functional units.

The alcoholic treatment unit was structurally designed to house

up to 50 men who have been diagnosed as being alcoholic. Admission is obtained on a strictly voluntary basis by inmates of the institution. The criteria for admission are: (1) documentation of an alcoholic behavior pattern; (2) not more than three, nor less than one year, away from probable release; (3) no detainers; (4) no noted homosexual activity and (5) no record of having been labeled an informant. The latter two criteria were enacted in the interest of the unit. Due to the potentially violent ramifications of homosexual activity and informing on the routine of penitentiary life, it was believed that at least during the initial phases of the program, it would be best if these two elements were excluded from the operation of the unit.

The Alcoholic Treatment Unit offers an alternative to residents of the Leavenworth Penitentiary. By the time a man is incarcerated in a penitentiary, most people would say that he has had all the chances that society can risk giving him. Yet, it appeared obvious to those who have worked in a penitentiary that men continue to change with or without staff assistance. The Alcoholic Treatment Unit offers an opportunity and an alternative to those men who meet the criteria and who have reached a point where they have decided that they want and can use the opportunities available in this unit. When a prospective unit member wishes to become a permanent part of the Alcohol Treatment Unit, he informs his institution caseworker. If the caseworker concurs with the validity of the request, he brings the individual before the institution classification team for referral to the unit.²⁸

Currently, there are two basic theoretical orientations utilized in the unit, Transactional Analysis and Rational Self Counseling. In most cases prospective members are assigned to an outpatient group prior

to actually moving into the unit. The outpatient experience includes instruction in basic group procedure, exposure to the concept of alcoholism, unit procedures and, a mini encounter group experience. During this phase of the unit experience, the individual is provided cursory glances at Transactional Analysis and Rational Self Counseling. Using this experience as a frame of reference, the individual chooses one or the other as his primary interest during his first 20 weeks in the unit. On this basis he signs up for weekly participation in one lecture type therapy class, a corresponding encounter group, a confrontation group, and the weekly business meeting.²⁹

Community Corrections Programs

State prisons have historically isolated themselves from the outside community. Behind high walls and fences these prisons created an artificial environment through which an inmate could prepare him/herself to return to the community. In theory, prisons attempted to rehabilitate through complete isolation from family, friends and outside resources. The use of the community was literally ignored by correctional treatment practitioners. The riots of the 1950's brought to the public's attention many of the failures attributed to traditional incarceration.

Prison was again an area of concern, and even its most faithful supporters recognized the ineffectiveness of then current practices. The early penitentiary and reform principles that stimulated optimism had now turned to pessimism and apathy. Penologists suggested that if "rehabilitation" were accomplished, it had little effect on post-prison behavior. It was generally argued that this resulted from the offender's returning to a disorganized community whose citizens were at

best indifferent and at worst resistant to his/her return. This rejection led to inmate frustration and often encouraged the criminal to return to illegal activities. Rather than temporary isolation through imprisonment, an effort to include the community in the rehabilitative function came to be viewed as a logical alternative.

Added to the mission of the prison was the task of reintegration. Through reintegration, an effort is made to remedy the problems associated with forced isolation and abrupt release. Prisons implemented program such as work and education release, furlough and half-way house placement, in order to provide a gradual, controlled re-entry into the community for appropriate offenders.

Work Release

Before 1950, only four states had provisions for work release laws, but interest in work release dramatically increased following the comprehensive work release program enacted by North Carolina in 1957. Twenty-nine jurisdictions, made up of twenty-seven states, the federal government and the District of Columbia had authorized work release by 1966; this number had increased to forty jurisdictions by 1968. Work release laws eventually were extended during the 1950's and 1960's to apply to inmates in state institutions and by 1973, thirty-six states had authorized work release in state institution. In 1975, all fifty states in the United States had work release programs in operation.³¹

Work release is a community corrections program which allows an offender to maintain employment in the outside community and fulfill his sentenced obligation imposed by the criminal court. Atypical inmate on work release is allowed to leave the prison to attend to the duties of his employment and is required to return to the prison during the

evenings and weekends, Work release **has** advantages for the offender as well **as** the institution. The program benefits the offender by allowing **him/her** to serve a lighter and easier sentence. The inmate is able to maintain or establish employment through incarceration and **he/she** is able to earn money and **met** financial obligations. As a wage earner, the inmate becomes a responsible taxpaying citizen. From the institution's perspective, the inmate is able to **pay** court costs, fines and restitution. Money generated by the payment of **room** and board assists the institution with the cost associated with the administration of the work release builds an inmate's character and increases **his/her** sense of self esteem, . The inmate is able to see the fruits of his labor. The inmate is able to support **his/her** family, **meet** obligations and make some critical steps toward successful community reintegration.

Educational Release

Education release follows the **same** basic format which described the operation of **work** release. In place of **employment**, inmates are released **from** prison to attend classes in private sector schools, training academies or universities. Education release programs augment the educational services offered in the prison and allow a broader range of inmates to be serviced.

Home Furloughs

Furlough programs, **also** known as home visits, temporary leaves and temporary **community** releases have only existed since the late 1960's. **These** programs grew so rapidly in the early 1970's that at one point more than 30,000 furloughs were granted to adult prisoners. During the 1973-1974 fiscal year, more than 250,000 unescorted trips into the community **were** made by prisoners. Only Hawaii, **Montana**,

Oklahoma, West Virginia, Wisconsin, Wyoming and Texas do not have provisions for adult furloughs.³²

Furloughs are authorized unsupervised leaves from an institution which are granted to low risk inmates. These inmates are usually awaiting release from prison and need to develop formal residence and employment plans in the outside community. Furloughs allow an inmate to visit his family and re-establish ties; to seek employment; enroll in college or trade schools and be interviewed for substance abuse therapy programs. The average furloughs range from three to seven days.

Half-Way Houses

Many of the state-prisons throughout the nation are located in rural environments. Correctional theorists in the 1950's thought that the purpose of re-integration could be better accomplished if the inmate resided in or near his/her areas of origin. With this thought in mind, halfway houses were opened throughout the country.

There are approximately four hundred halfway houses in the United States today. This mix of private and public, large and small, co-ed and non-coed facilities houses 10,000 adults on an average day. The average length of stay at the houses ranges from eight to sixteen weeks with a mean of about twelve weeks. Combining these two findings, it can be estimated that all halfway houses have the potential capacity to serve 30,000 to 40,000 persons per year.³³

John Smykla in his book, Community Based Corrections, offered three major reasons to support the use of halfway houses for offenders. First, the treatment of offenders in the community setting is regarded as more humane than placement in prison. In addition to reducing the effects of prison overcrowding, idleness, poor sanitation and plant

facilities and inadequate health care, halfway houses allow the offenders to maintain family ties and complete in the job market. A second reason is that successful reintegration of the offender can only be accomplished in a community setting. A third justification for halfway houses is that reintegration within the community can be accomplished at a cost that is less than incarceration. The LEAA reported in 1974 that the average cost per adult felon per year in a halfway house in the United States was at least two thousand dollars cheaper than in prison.

Although the types of treatment programs vary from one halfway house to another, they tend to be structured on a phase re-entry approach.

With the emergence of these varying treatment approaches, classification has assumed a significant role in modern correctional management. Classification as a process issued by the prison system to identify the inmates who are best suited to participate in specific treatment programs. Classification insures that an institution's resources are utilized efficiently and effectively.

Through the initial classification process, early newly committed inmates are exposed to a variety of medical, aptitude and psychological examinations. The results of these examinations allow the prison staff to assess an inmate's level of risk, program needs, strengths and weaknesses. Upon a comprehensive review of each case, recommendations are made whereby an inmate's needs are matched with corresponding institutional programs and services.

The inmate is then placed in the least restrictive environment where resources are available to assist in his/her potential rehabilitation.

Dangerous, unstable and high risk cases are housed in maximum security institutions. Individual or group counseling may be recommended for these individuals. Emotionally stable inmates with substance abuse problems may be placed in functional treatment units. White collar or first offenders are likely to be incarcerated in minimum security therapeutic communities.

A process of re-classification is utilized to periodically review an inmate's progress in recommended programs. Modifications or changes in programming may be implemented. In addition, most prison systems have specific criteria which must be met before an inmate can be considered for community corrections program participation. Usually a minimum amount of time must be served free of conduct violations and with positive program participation. Through re-classification, inmates who are deemed eligible may be referred for the placement into pre-release community corrections.

For the past three decades, classification in American prisons has been carried out through one or any combination of three major delivery mechanisms: the Institutional Assessment/Classification Unit; the Classification Committee and the Centralized Reception & Diagnostic Center.

The Institutional Assessment and Classification Unit is a segregated section of a large institution where inmates are housed for the first three to four weeks following initial reception. This unit is primarily a diagnostic section administered by professional personnel whose functions are to make diagnostic studies and treatment recommendations. Upon admission a thorough study of the offender is made by competent staff. Differentiated treatment is prescribed based

on the needs of **the** inmate and the availability of **programs** within the institution. Essentially, the **inmate** is **programmed** from reception to release within the confines of one institution.

The Classification Committee is usually **composed** of staff representatives **from** major departments within the prison. Usually the treatment department is represented by the casework supervisor, the education **department** by the guidance counselor and the security department by a correctional officer, such as the Captain of the **Guard**. **The classification committee** meets to review each inmate at the end of the period of initial segregation. In this review, the Classification **Committee** collectively analyzes the inmate in various areas (overall physical condition, psychological stability, educational and vocational needs, substance abuse problems, etc.), **The committee** then determines appropriate institutional placement, custody level, **work** assignment, academic and therapy programming.

The Centralized Reception and Diagnostic Unit is the brainchild of the 1940's. It provides the *same* service that its **name** implies, namely inmates are received into the state prison system at a central location, Within **this** unit each case is thoroughly studied and a treatment diagnosis is determined. **A team** of clinicians determines all program **recommendations**.

In the 1960's and 1970's, a variety of treatment typologies were proposed by psychologists, sociologists and **criminologists** in an attempt to systematically develop a method of differential treatment for various groups of offenders.

my Gerard explains the operation classification in the therapeutic **community** concept within the Kennedy Youth Center in

Morgantown, West Virginia. All new commitments are exposed to three data gathering instruments. (1) A 100-item true/false questionnaire which is completed by the resident. (2) A behavior problem checklist which is completed by the counselor after observing the resident, (3) A checklist for analysis of case history data which is completed by the caseworker after reviewing the Pre-Sentence Report. These examinations are evaluations and residents receive objective scores which fall in one of four categories. A student is either classified as BC1, BC2, BC3 or BC4 depending on his rating in all three instruments. Varying degrees of staff supervision is then assigned to effect the best rehabilitative results.

BC-1 Inadequate/immature delinquent group.

A boy in this group would be characterized as lazy and unattentive. Type of staff supervision - staff must be tolerant, supportive, protective and instructive.

BC-2 Neurotic ist delinquent group.

A boy in this group would be characterized as timid, self-conscious and having feelings of inferiority. Type of staff supervision - staff must be willing to become personally involved with this youth and help him come out of his "shell".

BC 3 Unsocialized psychopathic delinquent gr

These youths are non-conformists who need to be controlled. Type of staff supervision - staff must be able to control behavior without being manipulated,

BC-4 Socialized subcultural delinquent group.

Youths in this group are gang members with intense peer group loyalty. Type of staff supervision - staff must be firm and cannot

tolerate even minor rule infractions.³⁴

The California Youth Authority's Community Treatment Project attempted to predict the type of treatment that would work best with juveniles. According to Marguerite Q Warren, the classification of delinquent youth is made in two steps. The individual is first diagnosed according to the level of perceptual differentiation or degree of complexity in his view of himself and others. This step identifies the individual's interpersonal maturity level (I-score). In the second classification step, individuals within each maturity level are further diagnosed according to the way they respond and perceive the world. There are four main groupings or maturity levels (I-scores). Under these groupings are subtypes, Youth are then classified first into a maturity level and then a subtype. Each level and subtype has a most effective treatment method and the youth is assigned accordingly.

Another typological scheme dealing with adult offenders was presented by Clarence C. Schrag. According to Schrag, prisoners exhibited patterns of social role behavior. He identified inmates as either "Square John", "Right Guy", "Ding", "Outlaw" and "Politician". Generally these roles centered around an inmate's loyalty and attachment to other prisoners. On opposite sides of the continuum, the "Right Guy" is loyal to the inmate subculture while the "Square John" was alien in that system. These role classifications served to categorize inmates and their potential for successful rehabilitation. According to the National Advisory Commission on Criminal Justice Standards and Goals: There is no single, obvious or proved way to classify offenders. The decisions to sort out deviance by means of variable X rather than variable Y can be made only in terms of some logic or

rationale, some **argument** in defense of a particular choice of variable, It is not possible to be certain in advance of research that a particular **system** is causally significant. **This** aspect of classification or typology justifies the use of the term "**calculated risk.**" It is out of this kind of risk taking by social scientists, theoreticians, practitioners and correctional administrators that knowledge and skills advance. Eventually, a classification scheme should be developed that **would** seek to explain the cause (or, more likely causes) of individual crime while hypothesizing programs that will reduce the potential for further illegal behavior by the inmate.³⁶

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FOOTNOTES

²²American Correctional Association, The American Prison From the Beginning, (Washington, D.C. : American Correctional Association, 1983), p. 207.

²³American Correctional Association, (1966), p. 422.

²⁴Richard W. Snarr and Bruce I. Wolford, Introduction to Corrections, (Dubuque, Iowa: Wm. C. Brown Company, 1985), p. 278.

²⁵Leonard Hippchen, p. 22.

²⁶Vernon Fox, Introduction to Corrections, (Englewood Cliffs, New Jersey, 1972), p. 208.

²⁷Roy Gerard and Robert Levinson, "Functional Units: A Different Correctional Approach, Federal Probation, 37 (December, 1973) p. 8.

²⁸Ron Ziegler, "Innovative Programming in a Penitentiary Setting: Report from a Functional Unit," Federal Probation, 40, (June, 1973), p. 46.

²⁹Ron Ziegler, p. 46.

³⁰Clemens Bartollas and Stuart Miller, Correctional Administration, (New York: McGraw Hill and Company, 1978), p. 208.

³¹John Ortiz Smykla, Community-Based Corrections: Principles and Practices, (New York: MacMillan Publishers, 1981), p. 159.

³²Clemens Bartollas and Stuart Miller, p. 210.

³³Much of the statistical and factual information in this section is taken from John Ortiz Smykla, pp. 159-161.

³⁴Roy Gerard's explanation on the operation of classification at the R.F.K. Youth Center is contained in Leonard Hippchen, pp. 94-103.

³⁵Don C. Gibbons, The Criminological Enterprise, (Englewood Cliffs, New Jersey: Prentice Hall Inc., 1939), p. 87.

³⁶Task Force Report : Corrections, (Washington, D.C. : U.S. Government Printing Office, 1973), p. 205.

CHAPTER VI

THE COURT AND ITS INFLUENCE ON CORRECTION CLASSIFICATION

If it is true, as Dostoevski wrote after his years in prison in Serbia, "the degree of civilization in a society can be judged by entering its prisons, then we are just emerging from the Dark Ages. Many of our correctional institutions are correctional in name only. They are antiquated, overcrowded, and they seem to produce tension and violence".³⁷

This condition was caused, in part, by the traditional "hands off" policy that was followed for years by the courts in regard to the internal operations of correctional institutions. Only recently have the courts been interested in the day-to-day workings of a correctional facility. This "hands off" policy has been replaced by a broadly based inquiry into virtually every aspect of correctional operation. The courts no longer view the prisoner as a "slave", but rather as an individual who retains all rights of an ordinary citizen, except those expressly or by necessary implication, taken from him by law. The Supreme Court in a 1974 decision declared that there is no iron curtain drawn between the Constitution and the persons in this country.³⁸

Correctional administrators now recognize the likelihood of judicial intervention as inmates, interested community groups, and social interest groups challenge many aspects of incarceration. Correctional administrators further recognize that litigation has

become an integral **part** of their administrative responsibilities. Knowledge of court practice **and** case law has become a necessary prerequisite for anyone planning on surviving in a criminal justice related field. Corrections **has** not been singled out for no apparent reason. **The** courts have expanded their role within society and have **worked** their way gradually into areas of social policy **development** and social policy implementation. **The** courts, especially on the Federal level, have become a **forum** for redress of grievance and problem solving across a broad **spectrum** of social issues. **The** courts seemed to begin this activity in the 1950's with decisions regarding education. In the 1960's and 70's, **the** ~~court~~ court intervened in areas in mental health, welfare, social administration, civil rights, and finally, correctional administration.

During the 1970's, there was an explosion in the **number** of court decisions affecting correctional policies **and** programs. To a person familiar with these **developments** only, it might appear that the courts have singled out corrections for **special** consideration. This is not true. **Developments** in the law of prisoners' rights runs almost **parallel** to the law of human rights. If anything, the rights of prisoners were established after the courts had, in fact, directed their attention to groups of persons directly affected by **government**. **The** United States Court decision in 1954 which found segregated schools unconstitutional triggered additional demands for judicial review of governmental actions on individuals. **The** Civil Rights **Movement** accustomed the courts to the consideration of such issues. It was inevitable **that** prisoners, as a class, **would command** similar attention. **The** traditional approach of the courts to **all governmental** program prior to the 1960's was basically

that these governmental programs were administered by experts in the field and that the courts would not interfere. Courts assumed that school administrators knew best how to administer welfare programs, and finally correctional administrators were better able than the courts to define correctional programs. Lawful incarceration must not withdraw or limit many of the individual rights to which an average person is entitled. Various basic personal liberties are not affected through incarceration. Preservation of the rights to which an inmate is entitled is the professional duty of the correctional administrator.

Since 1969, Federal Courts have been active in prison conditions suits which are directly related to prisoner classification. Prisons throughout the country have fought litigation at either the state or federal level over the aspect of the conditions of confinement. The history of this type of involvement begins with the Holt vs Sarver 300 F. Supp. 825 (1969) decision in Arkansas. In this case, inmates in the Arkansas prison system charged that conditions within the prison system amounted to cruel and unusual punishment. The court, in a land mark decision ruled that:

Concept of cruel and unusual punishment is not limited to instances in which particular prison inmate is subjected to punishment directed at him as an individual; confinement itself within given institution may amount to "cruel and unusual punishment" where confinement is characterized by conditions and practices so bad as to be shocking to the conscience of reasonably civilized people, even though particular inmate may never personally be subject to any disciplinary action.³⁹

The state was left to establish administrative procedures which would result in corrective action. In a second Holt vs Sarver suit, the judge again agreed with the plaintiff and advocated housing assignments based on the needs of the population in order to reduce the fear and violence within the prison. The judge, here, is referring to the development of

a classification **system** for the state of Arkansas.

The first decision to order the design and the implementation of a classification system came out of the state of Rhode Island in 1970. In the case of Morris vs. Travisono, 310, F. Supp, 857 (1970), the judge did determine that the only method by which inmates' **claims** of capricious assignments to the behavior control unit could be alleviated **was** through a functioning classification system. The judge in the Travisono case wrote:

" . . . I will tell you what I am thinking **perhaps** should be done. **These men** be placed in a B classification and remain in that classification with whatever rights and privileges go with **it** until this case is ultimately determined, that **the** warden will have the right to change this classification down to C or D, but that **would** have to be based on their conduct, their conduct from this day forward and not from the past conduct."⁴⁰

In 1976, Pugh vs. Locke, 406 F. Supp. 318, Alabama gave us the most detailed orders regarding classification. **Again**, recognizing that even though classification was not a constitutional right, **it** was recognized as a major means by which to elevate conditions to a standard acceptable under the constitution. The court ruled that:

1. **By April 15, 1976**, the defendants shall file with the court a plan for **the** classification of all inmates incarcerated in the Alabama penal system. The Board of Corrections shall contract with the University of Alabama Department of Correctional Psychological to aid the implementation of that plan. **The classification** shall be fully completed **by** no later than August 16, 1976,
2. **The plan** to be **submitted** to the court shall include:
 - a. due consideration to the age; offense; prior criminal record; vocational, educational **and work** needs; **and physical** and mental health care requirements of each inmate;
 - b. methods of identifying aged, infirm, and psychologically-disturbed or mentally retarded **inmates** who require transfer to a more appropriate facility, or **who** require a special treatment within the institution, and

Defendants shall, develop a written classification plan for each prisoner and implement said **plan** by assigning prisoners to suitable facilities and programs. **After nine months from** the entry of this order, no prisoner who has been classified as **minimum** or **medium** custody shall be confined in the maximum security facility, and all newly sentenced prisoners who are in **the** process of being oriented and classified (now housed in the admission or orientation unit) shall be as required by state law totally separated **from** other sentenced and classified **prisoners.**⁴³

As the preceding paragraphs have proven, **the** courts have taken an interest in the internal affairs of **American** prisons. **The** courts have ruled that offenders are incarcerated for both **punishment** and rehabilitation. **The punishment** cannot be cruel or inhumane and a variety of treatment and rehabilitative services must be available to relevant inmates. As this trend of increasing court involvement continues through present century, prison administrators must be able to prove that each offender's needs **were** identified and appropriate rehabilitative **programs were** prescribed. It is unlikely that the Courts will uphold any prison system lacking a **viable classification** procedure. **The** lack of an objective means of classifying inmates has been shown to be an important aspect of an unconstitutional prison system.

FOOTNOTES

³⁷Tom Railsback, "Corrections: A Long Way To Go," Federal Probation, 39 (June, 1975), p. 48.

³⁸Much of the background information regarding the court and its influence on Corrections has been obtained with the help of: M. Kay Harris and Dudley P. Spiller, Jr., After Decision: Implementation of Judicial Decrees in Correctional Settings, (Washington, D.C. : U.S. Government Printing Office, 1977), pp. 3-29.

³⁹Holt v. Sarver, 309, F. Supp. 362 (1970).

⁴⁰Morris v. Travisono, 310, F. Supp. 357 (1970).

⁴¹Pugh v. Locke, 406, F. Supp. 318 (1976).

⁴²Laaman v. Helgemoe, 437, F. Supp. 269 (1977).

⁴³Palmagiano v. Garrahy, 443, F. Supp. 988 (1977).

CHAPTER VII

HISTORICAL OVERVIEW OF CORRECTIONS AND CLASSIFICATION IN PENNSYLVANIA

William Penn sought to build a colony that would be a haven of peace, freedom and justice for all. In his great law of 1682, torture and mutilation were discarded as punishment for crimes. Crimes of violence were to be punished by hard labor in houses of correction and a system of fines in place of confinement was introduced. The system of justice remained firm with life imprisonment being the penalty for the second offense of a serious crime.⁴⁴ During this period the need for a mechanism to dispense justice was apparent. Realizing that many of the first citizens of Colonial Pennsylvania were English deportees and felons which were exported from England, William Penn wrote that "no place is more over-run with wickedness, sins so very scandalous openly committed in defiance with the Law of Virtue." In 1695 the Quaker Colony had erected a brick jail on High Street in Philadelphia, Pennsylvania, but in 1702 it was overcrowded and declared a public nuisance. In 1723, a new stone prison was built on High Street, but it too, soon became overcrowded.⁴⁵

Just before the war began in 1773, the Walnut Street Jail was completed. Its success was short lived. The British took it over and used it to house American prisoners of war; then Americans recaptured Philadelphia and used it to house British prisoners of war. Finally, by the Acts of 1789 and 1790, it was made to serve as a joint county and

state institution, with cells for separate and solitary confinement. **This** was something that the Philadelphia Society for Alleviating the Miseries of Public Prisons had been working for since its formation in 1787. For more than a century of its history, the **penal** reformatory **and** correctional institutions of Pennsylvania **were** limited to the county jails and the few and scattered **workhouses, which were** erected mainly in conjunction with **the** almshouses. In **the** jails there was no logical approach to handling prisoners. **The** jails crowded **individuals** imprisoned for debt, convicted of **crime** and those accused or held as witnesses along with those of all ages and both sexes. All mental states: the normal, **the feeble-minded, the** neurotic, the psychotic, and the epileptic **were** housed together. **The** few colonial **workhouses were** employed as little more than an agency for suppressing vagrancy.

By the beginning of the 1800's with the **overcrowding** on the **Walnut** Street Jail, the Pennsylvania Prison Society campaigned extensively for the **Commonwealth** to build a penitentiary. Keeping in mind that the Prison Society was influenced to a large extent by the **Quaker** philosophy **based** on solitary confinement and labor with strong religious overtones, work **was** not merely implemented for punishment, **it was** used as an agent for reform. Solitary **work** and living **would** contribute to **repentance**. On **February** 13, 1818, some inhabitants from Western Pennsylvania **came** to the General Assembly supported by the Philadelphia Prison Society, praying for **the** erection of a penitentiary in the **western** part of the state. An act mandating this (**and** also allowing for **the** creation of a penitentiary in Eastern Pennsylvania) **was** passed on **March** 3, 1818 and \$60,000 was allocated for that **purpose**. Western Penitentiary opened in Pittsburgh, Pennsylvania in 1826.

Eastern Penitentiary opened in Philadelphia, Pennsylvania in 1829.

During this time, subjective classification by segregation was practiced. The criteria for this segregation were based on the age, sex and mental ability of the inmate. Children were housed separate from adults, women in different sections from men, and the insane were isolated. Treatment services were limited to moral instruction and were usually administered to all incarcerated inmates. Various types of offenders, though separated were all housed in the same institution.

The first attempt at specialization in classification came with the erection of the Penn Hurst State Hospital for the insane in Harrisburg between 1841 and 1851. This institution was built primarily as a result of agitation initiated by Dorothea Dix. More state hospitals were opened which provided specialized treatment for inmates with varying mental disorders. In 1905, an act was passed which ordered the construction of a state hospital designed specifically for the criminally insane. This state hospital was opened in 1912 and continues to serve the Commonwealth to this day under the Department of Welfare. By 1880, Pennsylvania's two penitentiaries were filled to capacity. The success of specialized treatment of the mentally ill along with these crowded conditions caused penologists and legislators to attempt specialized treatment for juvenile offenders and a new institution was constructed following the reformatory philosophy implemented at Elmira, New York.

Pennsylvania was some ten years or more behind New York State in adopting the reformatory principle and embodying it in an institution for delinquents. In 1889, the Huntingdon Industrial Reformatory was opened, and provided an improved correctional

institution for the younger male offenders guilty of the less serious offenses. It had been recommended by Governor Henry M. Hoyt that a special commission be appointed to investigate the Elmira Reformatory, the Pennsylvania Prison Society and the State Board of Public Charities. Modeled directly after the Elmira System, the commission adopted in its administrative report nearly all of the great reforms in Nineteenth century penology, including the reformatory idea, the communication system, the classification methods, the indeterminate sentence, the parole system and the notion of the value of instructive labor.

The law provided that the institution should be built for the reformation of prisoners and that courts could sentence to the reformatory any male criminal between the ages of 15 and 25 years, not known to have been previously sentenced to a state prison in the state of Pennsylvania.

The Huntingdon Institution served as a separate institution specifically for the younger inmate and was the first attempt at a meaningful specialization classification of sane offenders. Instruction was combined with employment geared to developing skills which would assist the offender in securing gainful employment after release from incarceration. The State Correctional Institution at Huntingdon operated a tail~; shop, shoe shop, blacksmith shop, and a brush shop.

At the beginning of the twentieth century, the consensus of opinion among penologists in Pennsylvania was that the crowded, outdated conditions at Western Penitentiary created a poor environment for any type of rehabilitation. Legislation was introduced in the General Assembly in March of 1911 which authorized the construction of a new penitentiary in a more rural location. Part of the proposed

legislation reads:

"Whereas it appears that the Western Penitentiary is greatly overcrowded as well as otherwise inadequate and so unsanitary that numerous cases of tuberculosis exist among the prisoners confined therein as a direct result of their imprisonment...that for lack of a large tract of land, it is impossible to keep inmates sufficiently employed, by reason thereof a large number became insane and became permanent charges upon the State and said penitentiary is located in a congested city district where it is impossible to extend buildings and prison yard thereof at any reasonable cost. It is desirable that a new prison be of modern design and so constructed in a rural district so that prisoners may be provided with useful employment in tilling the soil or otherwise."⁴⁶

Originally the new prison, the State Correctional Facility at Rockview (SCI-Rockview) in central Pennsylvania which opened in 1920, was intended to replace Western Penitentiary. However, with the change in political ideology the philosophy of the prison was altered shortly after the first cellblock was constructed. Rockview was destined to become a medium security institution, operated as a branch of Western Penitentiary. At this time specialization in classification was broadened and the institutions were classified according to the types of offenders that they would house. Inmates requiring medium security, that is those who could be trusted to work both in and outside of the institution enclosure, were placed at SCI-Rockview.

A somewhat more modern institution for women of a comparable type was authorized by an Act of 1913 creating the State Industrial Home for Women, subsequently located at Muncy. Included among those most active in the campaign for the establishment of the institution were Mrs. Edward Biddle, Mrs. S. Gordon McCouch, Mrs. Franklin P. James, Mrs. Martha P. Falconer, the Pennsylvania Prison Society and the State Board of Public Charities. Here the self-government plan has made much greater headway than Huntingdon. Under the original Act, only

women between the ages of sixteen and twenty-five were admitted to Muncy on a general sentence of not more than three years unless the maximum term prescribed by law exceeded three years. In 1925, the Legislature appropriated \$100,000 to build a new department for older women. This Act also provided that these women over twenty-five years of age might be sent to Muncy for any term to which they were sentenced by the judge in accordance with the penal code. Muncy has, thus, become both an institution of the reformatory type for young women and a penal institution for older women who formerly had been sent to state penitentiaries. 47

By 1920, the Commonwealth of Pennsylvania was operating five state prisons. The area of specialization is designated below.

- Western Penitentiary in Pittsburgh, PA (Maximum Security)
- Eastern Penitentiary in Philadelphia, PA (Maximum Security)
- State Reformatory at Huntingdon, PA (Juvenile Offenders)
- The State Penitentiary at Rockview in Bellefonte, PA (Medium Security)
- The State Home for Women at Muncy, PA (Minimum - Women)

During this time, no true state wide prison system was in operation. Each institution was separately governed by independent trustees loosely administered by the Department of Public Welfare. The duties and specific powers of the board of trustees are contained in Section 346 of the Pennsylvania Statutes. The following paragraphs will briefly summarize and overview these duties as mandated by law.

The five trustees met once per month and authorized the reception and disbursement of all money in the institution. They were responsible for hiring a warden and did oversee all persons employed in the prison. The trustees were unpaid public servants. They visited

the institution at least once each month and insured that all operational procedures were consistent under Pennsylvania law. In addition, they attended to the religious instruction of the prisoners and procured suitable persons for this objective, who served as religious advisors for prisoners. They directed the manner in which all raw materials were manufactured by the inmates and insured that provisions and other supplies for the prison were purchased. The trustees also reviewed the sale of all articles manufactured in the prisons and required that accurate accounts were kept by the clerks of all expenditures and receipts in the Penitentiary. They examined any person for any abuse in the various places of confinement and listened to any complaints that were made of oppression or ill conduct of the persons employed in the prison.

In the 1920's, each institution in Pennsylvania first began to formally classify separate offenders for work and institutional management purposes. Classification served to sort out the inmate population and differentiate between dangerous and low risk, health and sick, weak and strong inmates. Initially the System of Classification was largely subjective and lacked an unbiased approach to classification determination. In the 1920's, three major categories of security classification were used. They included: --

Maximum - An offender needing constant cell confinement with little or no freedom of movement within the institution.

Medium - An average offender allowed free movement to programs within the facility enclosure with little or no restrictions.

Minimum - Allowed movement similar to medium security offenders along with access to work outside the enclosure on institutional grounds. --

During the 1920's, Eastern State Penitentiary had marked its 100th year of service to the Commonwealth. Designed to implement the Pennsylvania system of private penitence, Eastern Penitentiary had long outlived its usefulness. Many Legislators felt that the time had come to build a large modern maximum security institution to directly service the Philadelphia area. Construction began on Pennsylvania's sixth major correctional Institution at Graterford was completed in 1932. Graterford is located on a 1,726 acre reservation north of Philadelphia in Montgomery County. With sixty-two acres within the walls, the institution has a perimeter distance of 6,030 feet.

A new Pennsylvania Industrial School was established by an Act of the Pennsylvania legislature on June 21, 1937. The Institution at Huntingdon would be converted to an industrial school for young adults, and the new institution, the State Correctional Institution at Camp Hill near Harrisburg would serve juvenile and status offenders.

Through the 1940's, Pennsylvania's prisons had independently remained under the loose control of the Department of Welfare. Seven institutions were in operation functioning as separate entities. Only the State Industrial Home for Women at Muncy and the institution at Camp Hill were specifically geared to deal with specific types of prisoners. Women were housed in Muncy and juvenile males in Camp Hill.

Inter-institutional transfers were rarely if ever made and offenders were subjectively classified at each institution with little or no processing and received maximum, medium, or minimum security designations. Judges retained the right to sentence men throughout the Commonwealth and judges often sentenced inmates to institutions according to their respective vocational preference or need. Stamping

and machine operation was done at Western Penitentiary; weaving, clothing, and textiles were manufactured at Graterford. A large furniture factory was in place at SCI-Huntingdon; XI-Rockview specialized in farming and forestry products. As was previously stated a reform school for juveniles was in operation at Camp Hill and women who were sent to Muncy worked sewing institutional garments.

During the second World War, the State prison population had dropped dramatically and in anticipation of a post war prison influx, Governor Martin empaneled a study commission to investigate the penal and correctional system of the Commonwealth of Pennsylvania. This war time committee headed by Stanley P. Ashe offered many progressive recommendations.

The gist of their recommendation was to organize corrections on a state-wide basis with a classification program based on custody levels and programs. They recommended one single classification center which was to be located at Camp Hill, PA, with a capacity of 500 cells geared for maximum security. They planned 900 cells at Camp Hill to be used as a minimum security prison. Eastern Penitentiary was viewed as no longer fit for human habitation and was to be closed. Western penitentiary was to remain open temporarily, but later to be closed. Rockview was to be use; as a minimum security prison and Graterford as a medium security prison. Likewise, Huntingdon was to be converted into a medium security adult prison. A new facility was to be built in a rural area for defective delinquents. Eighteen million dollars was a suggested figure to finance new prison construction and it was also recommended that the Governor appoint a Commissioner of Corrections to oversee the State's prisons.⁴⁸

The Ashe Commission report was submitted on July 1, 1944, but the recommendations contained within the report were never implemented. Following the second World War it was felt that the state's mental hospitals needed financial assistance far more than the prisons. Thus, the Department of Welfare invested funds and resources in that direction and literally ignored the needs of the aging prisons in the Commonwealth. The much needed changes did not occur in Pennsylvania prisons until the early 1950's when serious riots broke out.

On Saturday, March 29, 1952, an uprising of fifty-two prisoners took place in the New Jersey State Prison at Trenton. This was followed by a more serious outbreak in the same institution on April 15, 1952, in which four hostages were seized and a third uprising occurred on Thursday, April 17, 1952, at the New Jersey Prison Farm at Rahway and involved 231 prisoners. Nine hostages were seized and damage was done totaling \$58,000.00.⁴⁹

While the above-mentioned disturbances were by no means the first of their kind in this country, they marked the beginning of a year which was to be characterized by violence, rioting and tumult within penal institutions in every quarter of the nation including the Federal Reformatory at Chillicothe, Ohio, and even in Canada, where, during the period May 4 to August 1, three serious riots broke out at the city prison of Montreal. The year 1953 did not bring an end to the trouble. On Sunday, January 18, 1953, the Western State Penitentiary at Pittsburgh was the scene of a riot which saw the capture of some guards as hostages and the burning of a portion of the tag shop. The following day a similar uprising occurred at the New Western Penitentiary at Rockview. Minor fires were started and six guards were seized. Early

in February, there were three disturbances in prisons in Arizona and one each in Oregon and Washington. In all, in the twelve months following the riot at Trenton, New Jersey, more than twenty prison riots and outbreaks occurred in all portions of the country.

Following the riots, Governor John S. Fine appointed a study committee headed by a native Pennsylvanian, retired General Jacob L. Devers; Joseph Ragen of Illinois and Warden John C. Burke of Wisconsin, both noted penologists; Pennsylvania Judge, Burton R. Laub and industrialist William Witherow were also included on this study commission. Edward C. Cass, a member of the New York State Commission on Correction, assisted in an advisory capacity. They were to examine the care and treatment of prisoners, critique the Pennsylvania System and offer suggestions for improvements where needed. The Devers Commission issued a report which called for sweeping changes in the management of Pennsylvania prisons and a wide variety of progressive recommendations were made. A sympathetic and cooperative state legislature approved many of the recommendations. As a result, steps were taken to prevent over crowding in the prisons and implement programs to insure against idleness. In essence, corrective measures were taken before riots again broke out. Legislative mandates based on the Commission report abolished inhumane solitary confinement holes and cells below main cell blocks were closed. Medieval punishment methods were curtailed.

Also, a low-paid staff in Pennsylvania was seen as the contributing factor in a large system wide morale problem. To overcome this problem, the Devers Commission Report recommended large increases in prison staff salaries. A uniform civil service method of payment and

staffing was implemented.

Perhaps two of the most important **recommendations** made by the Devers Commission involved organizing the state prison system and **implementing** a clinical approach to offender classification. The overall responsibility for supervision and control over the correctional institutions was transferred from the Department of **Welfare** to the Department of Justice. As a Department of Justice Division, the Bureau of Corrections, headed by a **Commissioner** would oversee the operation of all state prisons. Under the **Commissioner**, a managerial pyramid of authority was created, including a central office staff with headquarters at Camp Hill near Harrisburg and Superintendents and management staff for all institutions.

The Devers Commission summarizes its intention in the following paragraph:

"Our concern is with the efficient administration of penocorrectional affairs in the **Commonwealth**. It seems obvious that the combination of correctional function within the Welfare Department has contributed to an unfortunate situation. Furthermore, the removal of penal affairs to be the **Department** of Justice would entail no financial loss. It will, **however**, be necessary to **organize** the Department of Corrections from the ground up." 50

The legislature authorized the establishment of the Bureau of Correction in 1953.

The Devers **Commission Report** also called for the establishment of two central diagnostic and classification centers for men, one in the east at Graterford near Philadelphia and one in the **west** at the State Correctional Institution at Pittsburgh. A central state wide reception center for juveniles was established at Camp Hill. According to the **Devers Commission:**

"We believe there would be a loss of efficiency in mass classification. We see manifest advantages in breaking down the prison population to the lowest possible numerical groups, thus increasing the opportunity for personal observation, individual contacts, and the prescription of desired treatment. The prime consideration which crystalized our thinking was that of adequate staffing. Pittsburgh and Philadelphia are two large university centers, urban areas populated with highly trained and skilled technicians. In Pittsburgh, the Western Psychiatric Institute Clinic has already been established and a similar one is contemplated for Philadelphia. Both metropolitan areas constitute vast pools of technicians from which could be drawn permanent and part-time personnel."⁵¹

These central reception centers brought a new trend in classification to Pennsylvania. The clinical and diagnostic method analyzed each new commitment and designated an institutional placement based on treatment needs. Cross state transfers for programing purposes became common in the early 1960's. The newly established Bureau of Corrections had to accomplish many monumental tasks during the first several years of its existence. Reconstruction, construction and organization were all major areas of concern. The riots in the early 1950's nearly destroyed Western Penitentiary and the Institution at Rockview. Provisions were made for reconstruction of the damaged areas. The physical plant at each institution was revitalized.

Overcrowding was a major obstacle to effective prison management in the late 1950's. Realizing that more cell space was needed, the Bureau of Corrections authorized the construction of its first new prison. The State Correctional Institution at Dallas was designed by Clarence Litchfield as a model of the 1960's. Its concept was based on the educational or school model and mainly provided housing and care for male mentally retarded inmates. SCI-Dallas is located approximately ten miles from Wilkes-Barre in northeastern Pennsylvania, is set on 1,370

acres and holds 1,200 men.

As the **Devers Commission** reported, the Bureau of Correction needed to be organized. Central Office was organized into various divisions: the finance, industries, personnel, program and special divisions, (**see** Appendix A).

The finance division controls the purse strings for the Bureau. The annual budget is prepared and expenditures are monitored by this division. The industries division oversees the operation of the various industrial plants in operation throughout the system. The personnel division is responsible for human resource management, training and staff development. The program division is responsible for Bureau functions in the areas of health care, academic, vocational, educational, recreation, classification and treatment services. Finally special services insures that all institutions operate legally and humanely. 52

Each division has been required to develop operations manuals which detailed sanctioned methods of operation. Of particular concern is the program division which developed operations manual #102 in the mid 1960's. This manual was patterned after the Handbook of Classification which was originally issued by the American Correctional Association in 1947 and revised in 1966. O.M. 102 details steps in the classification process, assigned responsibilities to various staff members and organized procedures whereby the Classification Process would be carried out in various phases (data gathering phase, diagnostic phase and program assignment phase).

During the 1960's, the Bureau of Corrections policies were influenced by the correctional trends toward increased treatment

programs for inmates. During this time no true minimum security institutions were in operation in Pennsylvania. In theory it was felt that many of the state's large older institutions could be replaced by smaller minimum security functional unit prisons. The concept required the state to be divided into six regions from east to west. Within each region a minimum security regional correctional facility would be built. Each of these prisons would operate functional units, within a therapeutic community environment. Pennsylvania sought to combine these two treatment approaches through regionalization.

Public opinion in Pennsylvania during the 1960's was against new prison construction and citizens effectively stopped plans for four regional correctional prisons. The State Regional Correctional Facilities at Greensburg and Wrcer were the only two regional prisons built.

The State Regional Correctional Facility at Greensburg was built in 1966 as the Westmoreland County Prison. On April 9, 1969, the Commonwealth of Pennsylvania converted it for use as the first State Regional Correctional Facility serving the fifth region, which include nine counties in southwestern Pennsylvania.⁵³ At SRCF-Greensburg, classification is utilized to place inmates in a variety of educational/vocational training programs in an attempt to systematically prepare the inmate for return to the community. Pre-release programming and substance abuse units are also utilized.

The State Regional Correctional Facility at Wrcer was opened on September 5, 1978 and services the sixth region which includes fourteen northwestern Pennsylvania counties. The minimum security campus environment, free of bars, allows an inmate to participate in a variety

of self-improvement programs without experiencing the pressures associated with major prison confinement.

The Community Services Division of the Bureau of Corrections was established in 1968 under authority of Act 173, "The Pre-Release Act." The enabling legislation requires the provision of a wide range of social services in the correctional system leading to the re-integration of the offender with society. The division supervises residential treatment services to offenders housed in fifteen community service centers throughout the Commonwealth. With very few exceptions, the residents were previously incarcerated in State Correctional Institutions operated by the Bureau. All participants must meet stringent criteria established in pre-release legislation. All are required to seek employment and pay a part of their earnings as rent.⁵⁴ Classification is the vehicle through which the Correctional System places the most appropriate inmates in the community setting. At present, the Commonwealth operates ten state correctional facilities for adults. In 1985, based on the need for additional housing for women, the newest state prison opened at Waynesburg, PA in southwestern Pennsylvania near the West Virginia border. (see Appendix C).

The Pennsylvania prison system in the 1980's has responded to two major challenges. The first challenge is dealing with overcrowded conditions. The system has a capacity for approximately 8,000 men/women and is currently holding approximately 14,000 incarcerated individuals. With this overcrowding, classification becomes ineffective primarily because of a lack of programming resources. Pennsylvania attempts to remedy this situation by adding 2,380 new cells in four new institutions

to the state system by 1988.⁵⁵ when the construction is completed, the state will have ample facilities to meet the needs of inmates.

In response to the court's involvement in the operation of other state prison systems, Pennsylvania implemented an objective classification system in 1983. This system expanded the three phases of classification to include an objective profile of each inmate. Utilizing the correctional Classification profile, Pennsylvania attempts to objectively analyze each inmate's needs in eight categories and in this manner attempts to avoid traditional subjective classification methods which often have included staff bias which have resulted in prisoner rights litigation. The following chapters will provide a detailed overview of the process of classification.

FOOTNOTES

⁴⁴Negley Teeters, "Public Execution in Pennsylvania 1682-1834," Journal of the Lancaster Historical Society, 63, (Spring 1960) p. 87.

⁴⁵Much of the early historical background on the Pennsylvania System comes from Harry Barnes; The Evolution of Peneology in Pennsylvania.

⁴⁶Act of March 30, 1911. Laws of the General Assembly, (Harrisburg, Pennsylvania: Commonwealth of Pennsylvania, 1911) p. 1.

⁴⁷Harry Barnes, (1968) p. 402.

⁴⁸Report of the Committee to Survey the Penal and Correctional System of the Commonwealth of Pennsylvania (Harrisburg, PA: Commonwealth of Pennsylvania, 1944) p. 6.

⁴⁹Historical data on the formal development of the Pennsylvania Bureau of Correction is taken from Jacob Devers, Report of the Committee to Investigate the Peno-Correctional System of the Commonwealth of Pennsylvania, (Harrisburgh, PA: Commonwealth of Pennsylvania, 1953) pp. 1-17.

⁵⁰Jacob Devers, p. 17.

⁵¹Jacob Devers, p. 31.

⁵²Commonwealth of Pennsylvania, Bureau of Correction, Annual Report 1982, (Huntingdon, PA: Bureau of Correction Press, 1983) p. 51.

⁵³Commonwealth of Pennsylvania, Bureau of Correction, Annual Report 1984, (Huntingdon, PA: Bureau of Correction Press, 1985) p. 17.

⁵⁴Commonwealth of Pennsylvania, Bureau of Correction, (1985) p. 7.

⁵⁵Commonwealth of Pennsylvania, Bureau of Correction, (1985) p. 3.

CHAPTER VIII

PENNSYLVANIA CLASSIFICATION IN OPERATION - 3 PHASES

Classification is a process of discovery, whereby the institution **attempts**, through a variety of methods to identify a person's needs, strengths, and weaknesses. **Many** questions need to be answered. **What** are the inmate's **medical** needs? **Does** he/she require **immediate** or ongoing medical attention? **Is** the individual inmate a threat to himself or **others**? **Is** the individual inmate emotionally stable? **Is** there a need for a psychological or psychiatric intervention? **How** much education and vocational training does the inmate need? **Is** there a substance abuse or dependency problem? Classification **attempts** to identify these varying needs and an individual treatment program is then prescribed which is specifically geared to meet them.

Classification also determines the degree of custody necessary to safely house an inmate. Custody is a term used to describe the amount of employee supervision and control that is necessary to maintain an inmate. **The Commonwealth** of Pennsylvania attempts to house **inmates** in the least restrictive environment **possible**. Institutions are classified according to their respective capability to manage and control inmates and are classified as either maximum, medium or minimum security.

Maximum security prisons offer the greatest amount of control over the offender. All programs take place from within and there is

little movement outside the perimeter wall. ~~These~~ fortress type prisons house the most dangerous inmates or those who have been convicted of the most serious crimes. ~~Pennnsylvania~~ operates three ~~maximum~~ security prisons, They include: ~~The~~ State Correctional Institution at Pittsburgh, ~~The~~ State Correctional Institution at Graterford in ~~Philadelphia~~, and the State Correctional Institution at ~~Huntingdon~~ in South Central Pennsylvania.

In the medium security institutions, fences replace high ~~walls~~, the ~~environment~~ is less restrictive and there is ~~programming~~ outside the fence and a more relaxed environment inside the enclosure, Pennsylvania operates four ~~medium security~~ prisons. They include: ~~The~~ State Correctional Institution at ~~Rockview~~ in Centre County, ~~The~~ State Correctional Institution at ~~Camp~~ Hill near Harrisburg, ~~The~~ State Correctional Institution at ~~Dallas~~ in northeast Pennsylvania and the State Correctional Facility for ~~Women~~ at Muncy.

~~The newest~~ institutions in the state system are classified as ~~minimum~~ security, Within these institutions there is a minimal degree of physical containment. With an open campus environment the institution usually deals with first offenders who have ~~committed~~ offenses against property not persons. A variety of programs are offered to ~~the offender~~ both in and outside the institution such as work and educational release. Three minimum security institutions are in operation in Pennsylvania, They include: ~~The~~ State Regional Correctional Facility at ~~Mercer~~ and ~~The~~ State ~~Regional~~ Correctional Facility at Greensburg, located respectively in north and southwest Pennsylvania, and the State Correctional Facility for ~~Women~~ at ~~Waynesburg~~.

The following paragraphs will describe the process by which a newly committed inmate is exposed to the system of classification in the Commonwealth of Pennsylvania. Operating under the Diagnostic Classification System, three major points of entry accept inmates into the prison system according to region. They include: The Western Diagnostic & Classification Center at SCI-Pittsburgh, The Central Diagnostic & Classification Center at SCI-Camp Hill and the Eastern DCC at SCI-Graterford. The two regional correctional facilities at Mercer and Greensburg, along with the women's prison at Muncy also have assessment/diagnostic classification capabilities. The three phases of classification include: data gathering, assessment/diagnosis, along with program assignment.

Phase I - Data Gathering Phase - Week 1

The new commitment is usually transported to the State Correctional Institution by local sheriffs from the sentencing county. The transporting officer is required to present a sealed Court Order signed by the sentencing judge to the institutional records officer. The records officer will inspect the order to insure that the individual is legally committed to the institution. Following the approval of the Court Order, a Body Receipt is issued (see Appendix B, Figure #1) to the transporting officers-and the inmate formally enters custody of the Pennsylvania Department of Corrections.

The data gathering phase of classification actually begins at initial reception. Keeping in mind that classification is a process of identifying specific inmate needs, the transporting officers usually provide a report of the individual's prior institutional adjustment utilizing the form BC-7X, "Temporary Transfer Information." (see

Appendix B, Figure #2) Varying needs are then addressed. Also a copy of the Pre-Sentence Report **accompanies** the new **commitment**. **This** report provides a brief but complete **summary** including past and present problem areas,

The records officer assigns the inmate a Department of Corrections institutional **number** which is used for identification, count, security **and** record keeping purposes. At **this** point, initial processing of the new **commitment** begins. For security reasons, the new inmate is subjected to a thorough strip search, including an internal body cavity search which is usually conducted by the security officer in charge of initial **processing**. Following the search, the individual is showered using a medicated **shampoo** and a blue colored institutional uniform consisting of shirt and **pants** is issued. All new **commitments** are required to wear the blue uniform for the first four weeks of confinement in a State Correctional Institution. A personal property inventory is conducted and any unauthorized property items are **boxed and** mailed to the inmate's family. During the initial classification process only a **minimum** amount of personal item are permitted, **i.e., two** sets of clothing, personal hygiene items, religious and legal materials.

The new **commitment** is then given a brief initial **physical** examination by the medical department. An extensive battery of medical tests will later be administered as a **part** of the data gathering **phase**. Utilizing the Reception Checklist (see Appendix B, Figure #3) the medical department makes the following observations. Is the **man/women** in any obvious pain, is there any bleeding? Is the **commitment** wearing a medic-alert tag? **The** skin condition is assessed, any wounds, swelling,

or vermin. Is the individual wearing any artificial appliance, prostheses, etc.? Is the **commitment** on any regular medication? Are there any obvious signs of illness (**dialated** pupils, bloodshot, glassy eyes)? If the individual is not medically cleared, appropriate action is taken.

The next step in processing involves the Records Department. The record officer conducts an interview in order to provide data necessary to complete the **BC-150B, Reception Work Sheet** (see Appendix B, **Figure #4**). On the worksheet basic sociological data is entered and the inmate is then photographed and fingerprinted for identification purposes. **Any** separation, that is anyone that the inmate feels would threaten his peaceful existence within the institution is so designated on the form (**BC-186 Separation File**) (see Appendix B, **Figure #5**).

The inmate swears Power of Attorney to the State of Pennsylvania, designates a Guardian of Property and is advised of his right to communication. By swearing Power of Attorney, the offender **allows** the institution to deposit checks, money orders, receive mail in the man's name during the period of confinement (see **Appendix B, Figure #6**). In designating a Guardian of Personal Property, the inmate authorizes the release of his possessions in case of death to a particular relative or friend.

The inmate is advised of his right to **communication**. He/she is advised that **staff members** in the facility are available to assist with any problem which may arise during confinement. The inmate is also advised of his/her right to complain regarding any possible rights violations or **inhumane** treatment during incarceration.

At this point any specific questions are answered and the new

commitment is issued a **copy** of the Official Department of Corrections **Handbook** and the Specific Institution Supplement. The handbook contains Department of Corrections policy statements on a variety of institutional issues (**i.e.**, mail, telephone, dress code, **conduct** violations, etc.), **The** Specific Institutional Supplement provides an enumeration of the regulations applicable in the present correctional environment. In addition, each new **commitment** is provided with an assessment/classification schedule. **The** schedule enumerates the various steps involved in the process of classification. Various appointments and times are designated (see Appendix B, Figure #7).

The new **commitment** is then escorted to his designated room **assignment** within the Assessment/Classification Unit where all new **commitments** are housed for the first 28 **days** of confinement. The receiving Corrections Officer administers a brief orientation to the Assessment/Classification Unit and **answers** any relevant questions. Linen, **towels** and a packet of personal hygiene items are provided.

Usually during the first day of confinement **and** no longer than 24 hours after initial commitment, the inmate is seen by **his/her** Corrections Counselor. This **meeting** serves three purposes. First of all, the inmate is **introduced** to the individual who will **serve as** **his/her** advocate, counselor and advisor during incarceration. **He** learns **about** programs and services that are available to meet **his/her** particular needs. **The** counselor uses the initial session with the inmate as a starting point in the classification process and information is obtained which serves to provide a brief overall picture of the individual's history. This information documented on the initial BC-14 form (see Appendix B, Figure #8) includes sentence status information,

pending charges, criminal history, past incarcerations, emotional stability, past suicide history, substance abuse, problems, separation, along with educational/vocational achievement levels are all identified. The counselor offers a brief evaluation emphasizing any particular concerns and needs and provides a copy of this report to the Assessment/Classification Housing Unit.

During the first day of confinement, a critical component of the institutional classification process has taken place. A thorough screening has been performed regarding the individual's risk potential and a determination is made regarding the degree of initial security necessary to provide the least restrictive means of confinement. In determining risk potential, an assessment is made as to the degree of risk, the individual presents to either abscond or injure himself/herself or others. In determining the degree of security necessary, a decision is made based on the type/degree of risk involved -- and how much physical restraint is necessary in order to maintain the individual safely within the institution. Further testing administered -- during the four week assessment/classification period will greatly refine this determination.

At the conclusion of the initial interview, the counselor will prepare a letter to the inmate's family. This correspondence serves to provide an orientation for the inmate's family and answer many questions and concerns regarding visiting hours, philosophy of the institution and the procedures that are followed in forwarding money and personal property are addressed (see Appendix B, Figure #9).

The new commitment is given an orientation regarding the schedule of activities and examinations that will be taking place as a

part of the four week initial classification process. The data gathering phase will be accomplished in the first two weeks and will provide the staff with a clear picture of the total person.

It is commonly accepted among practitioners in the field of Criminal Justice that the identification of needs and liabilities requires the use of a wide assortment of tests and examinations. There is no single all-encompassing examination which will provide an accurate diagnosis for each client. During the first week of the data gathering phase, each individual committed to the Department of Corrections in the State of Pennsylvania is exposed to a variety of medical, psychological and educational/vocational tests. Each of these screening methods will be explained in the following paragraphs.

Medical Testing

According to the American Correctional Association,

"preventive health services at each institution should begin with a physical examination of each newly received inmate, including such laboratory and X-ray studies as may be indicated. Those inmates who are found in ill health upon admission are hospitalized for treatment. As a part of preventive health care, all new arrivals should receive indicated immunizations and vaccinations. Provisions must be made for the care of those inmates with chronic illnesses such as cardiacs, tuberculosis, and diabetics. Every prisoner who has a remediable physical condition should be offered suitable medical treatment, or surgical correction, to the end that he will be restored to the fullest measure of health prior to his release from the institution."⁵⁶

In keeping with the above stated objective, a licensed physician conducts a thorough medical examination of each new commitment. From this exam a diagnosis is made regarding the condition of the individual's physical capacity/stamina, upper extremities, lower

extremities, hearing, eyes, stability and teeth. (P.U.L.H.E.S.T.)

Psychological/Educational/Vocational Testing

To further quote the American Correctional Association,

"Experience has shown that from 15 to 20 percent of the prisoner population is found to have a diagnosable emotional or mental disorder including neurosis, personality and behavioral disorders and various types of prepsychotic and psychotic conditions. Suitable screening programs should be developed to insure that all prisoners in need of psychiatric attention are recognized and given individual treatment. 57

In addition, a large percentage of inmates are in need of basic education instruction in order to achieve the high school diploma. Many inmates lack marketable vocational skills. Testing must also be conducted to determine competency levels and I.Q. of inmates. The Department of Corrections accomplishes these objectives by administering and evaluating the following tests.

WRAT

The Wide Range Achievement Test is administered in order to provide a screening mechanism which gauges competence over a wide range of areas. The examination includes spelling, reading and mathematics sections. Achievement levels in each of these areas is identified. 58

Bennett Mechanical Comprehension Test

This exam provides mechanical information and assesses mechanical comprehension. The client is asked to make observations regarding mechanical objects. The test contains a variety of pictures involving every day life situations which evaluate the amount of technical knowledge that has been acquired during every day life.

An average question might picture two **men** carrying a pole between them on their right shoulder. A weight is attached to the pole closer to one of the men. In the exam, the question is asked which man **is** carrying more weight? The results of this exam are useful in determining the most appropriate education or specialized training program for each inmate.

TABE

The Test of **Adult** Basic Education is administered in order to further assess achievement levels in reading, mathematics, and language. The TABE is available in three forms: TABE E for grades 2-5 and **4-9**; TabE M for **gades 4-5 and 6-9**; and TABE D for grades **6-7** and 8-9. Appropriate tests are administered at various levels of proficiency. **This** test is usually administered to provide follow up information.

MMPI

The Minnesota **Multiphasic** Personality Inventory is an examination consisting of **566** statements which **the** examinee **responds** true, false or cannot say. Questions on the **MMPI** range in content **from** psychosomatic symptoms to sexual, religious and social attitudes. Family and **marital** questions are also included. This exam is **administered** by a **psychologist** in order to identify **pathological** deviation.

Data Gathering Phase - Week 2

During the second **week** of the data gathering phase a variety of orientation and interview sessions are administered to the new inmates.

General Orientation

A one hour standardized general orientation on the operation of the institution and the correctional system is given to all new inmates

by a designated staff member with a thorough knowledge of the institution and the Department of Corrections. The inmates are briefed on a variety of services that are available to them. Specific questions are answered and helpful suggestions are offered.

Recreation and Leisure Time Orientation

This orientation is conducted by the institutional Athletic and Activities Director who outlines a recreation program that has been designed to meet the needs and interests of most inmates. They are advised on the variety of physical fitness and athletic events that are open to participation and calendar of intramural and special programs are discussed.

Educational/Vocational Interview and Orientation

The institution has a variety of educational and vocational programs available for the inmates. Keeping in mind the first week test results, educational opportunities are discussed with the inmate. Following this session, the guidance counselor formulates program recommendations for each inmate.

Employment Officer Orientation and Interview

Each institution depends on inmate labor in order to operate and provide basic services. The employment of inmates, the procedures involved in requesting assignment, pay levels, job changes and types of available work opportunities are covered in this orientation session. The Employment Officer determines potential areas of job assignment based on the amount of skills that an inmate possess.

Chaplain Orientation and Interview

The institution provides chaplaincy services for members for all bona fide faith groups. In this session, the chaplain determines a man's

religious affiliation and contact is made with a specific religious advisor who can provide for an individual inmate's needs and rights.

Phase II - Assessment/Diagnostic Phase - Weeks 3-4

At the end of the second week of the classification process the various departments that participated in the first two phases of classification submit written evaluations and recommendations on each case to the Corrections Counselor who functions as the clearinghouse for these reports.

During week three of the classification process each case is assessed and a diagnosis for treatment is made. The case counselor assimilates the various evaluations into a comprehensive written case summary for each individual inmate. The following paragraphs provide a page by page explanation of the classification summary contained in Appendix D.

Page 1:

The first page or the "face sheet" is prepared by the institutional records office and contains basic identification such as: the Bureau of Correction identification number; the state identification number; the Pennsylvania Board of Probation & Parole identification number; the commitment name, race, sex, date of birth; height; weight; marital status; type of complexion; build; religion; specific types of marking; deformities; scars or tatoos; alias'; legal and arrest address; place of birth; social security number; occupation and military data.

The second half of the face sheet identifies confidential case data such as: the medical profile; past and present problem areas; medical limitations; intelligence ratings and separations. At the

bottom a name of the person to be notified in case of death or illness is listed.

Page 2:

On the second page of the initial classification **summary** section #5 lists all first blood relatives. Section #6 details the number of residences that an inmate has occupied in the past five years. Section #7 provides an **employment** background. The schools that the inmate attended are listed in Section #8. At the bottom of page 2, the name of the legal advisor along with the references used in the preparation of the **summary** are referenced.

Page 3:

The data contained in Section #8 is provided by the guidance counselor in the education department. This section contains data relevant to educational achievement and program **recommendations**. Included in this section are: grades repeated while in school; union affiliations; certifications; status of the driver's license; type of elementary and secondary school **placements**; age that the inmate entered or withdrew from school; and specific problem areas. The **education** department also **summarizes** the educational and vocational objectives for each individual. These objectives receive strong consideration **in** the Program Assignment Phase,

Section #9 includes the social history of the case including: parental status at birth; birth order; pre-natal status; birth condition and defects. The status of the inmate's parents is **reported**; critical incidents during **the** inmate's life are described; the family and **home** condition are analyzed and family relationships are detailed. The **Athletic/Activities** Director reports on the inmate's leisure time

interests and includes **recommendations** for free **time** activities.

Previous and current institutional adjustment is included in the next section. Finally the Chaplain's religious evaluation concludes page 3.

Page 4:

Section 10 on Page 4 analyzes the offender's legal history and offense pattern including: the age of first adult arrest; conviction and incarceration and total **number** of incarcerations. A breakdown is provided regarding **the** number of violent, property, **health/safety** and morale offenses and offenses against the state. A brief analysis of the offender's criminal history is also given along with a brief overview of any **juvenile** offenses. Section 11 provides the current offense for **which** the inmate is incarcerated. **The** official account of the court is reproduced from the Pre-Sentence **Report**. The inmate provides **his/her** version of the offense. A brief medical report is contained in Section 12. **This** report usually indicates **whether** an **inmate** is or is not cleared for institutional **work** assignment. **Inmates** displaying bizarre or unusual behavior during the assessment period are evaluated by the -- Psychiatrist. **If** the case requires this **type** of intervention, the Psychiatrist's report is included in Section 13. **The** results of psychological **and** educational tests are **summarized** in a **comprehensive** psychological report which is carried in Section 14.

Page 5:

On Page 5 is the **BC-16D**, Sentence Status **Summary** Form. Section one provides a **summary** of the sentence and includes: the class of the sentence (definite, indefinite, life, **commuted** life or execution); the - - date of sentence; the sentencing county; court **term** identification number; the **minimum** and **maximum** dates; the sentencing judge; the offense

tracking number; the plea; the total sentence; fines; costs and restitution.

Section two provides sentence dates; the date of reception; the **minimum** and maximum dates. Section three provides miscellaneous references and related identification. The sentence status **summary BC-16D** is prepared by the records department **and** is updated as court ordered changes require.

The **format** and substance of the classification **summary** has changed very little since the first casework administrative manual was issued in the 1960's. In 1982, after studying other classification systems in the nation, **the** Department of Corrections adopted the use of the Correctional Classification Profile. Prior to the classification profile, classification decisions were subjective and rather arbitrary. No impartial criteria existed. The classification profile allows the correctional practitioner to objectively analyze an inmate's needs in eight categories. The profile provides a graphic portrait of the individual inmate based on the results of the examinations and evaluations **which were** made during the data gathering **phase**.

After interpreting the results of the physical examination, the medical **department assigns** the new inmate a **medical needs score**. A public risk and institutional risk needs score is determined by the Corrections Counselor following a thorough case review which includes data contained in the Pre-Sentence Report. The psychologist assigns the mental health needs score based on displayed psychological stability and individual test results. Educational and vocational needs scores are established by the guidance counselor and are primarily based on aptitude tests results. **The** work skills and drugs and alcohol needs

scores are determined by the Corrections Counselor,

Specific criteria have been established by the Department for each level on the classification profile. Each practitioner is required to evaluate the individual inmate and determine a relevant rating level. The required criteria for each of the eight areas of need are detailed in the following paragraphs. 59

Medical Needs 'category

M-5 - Identifies an inmate with severely **limited** physical capacity.

This type of inmate is not capable of handling **work** assignments.

Specialized housing and medical care is mandatory. Inmates in this category include those who suffer from **paralysis**, deafness, blindness, or those requiring **urgent** treatment for acute medical or dental infection.

M-4 - Inmates in this category suffer limited **physical** capacity and stamina. Specialized employment or training assignments are needed.

Included in this level are those with the loss of a limb, partial deafness, loss of vision in one eye or those with an insufficient number of teeth for mastication.

M-3 - Inmates with limited capacity for hard **work** along with those who **can** only work for **moderate** periods are designated in this level.

Individuals included in this category have minimal hearing **impairment** (8-15 bilateral) or require the use of a hearing aid, limited vision which is better than the 20-200 range and **wear** glasses, and those with 5 to 7 teeth missing.

M-2 - **This** individual includes inmates capable of **most** training assignments. Inmates in this category require **regular** medication to maintain normal body functions, **Also** included are those with very short

term illnesses (i.e., cold, flu, etc.)

M-1 - These inmates are medically cleared for all program and institutional job assignments with no restriction. All bones, joints and muscles are normal. Vision, hearing and dental conditions are satisfactory.

Public Risk Category

The public risk score is determined following an extensive review of the social and criminal history. An inmate is rated in eight areas according to his/her particular degree of risk. The highest single score in any one area, then becomes the public risk score and is plotted on the Correctional Classification Profile: The eight rated areas are described in the following paragraphs.

1. Extent of Violence in Current Offense

A. Sex Offenses

1. None
2. Minor Sexual Offense (statutory rape)
3. Attempted Rape
4. Forcible Rape (child offense)
5. Rape which results in death or injury

B. Violence

1. None
2. Threat of violence or minor injury
3. Serious injury or death (provoked)
4. Serious injury or death (unprovoked)

weapon Used in the Current Offense

1. None
2. Weapon used (firearms, bladed instrument, explosive)
3. Weapon discharged

3. Escape History

- A. Non-Serious - walkoff from a nonsecure institution (outside detail, furlough or community based program not involving force or violence)

1. None
 2. Non-serious over one year ago
 3. Non-serious less than one year ago
- B. Serious - Escape from a closed environment with or without violence. Also includes escape from a non-secure environment with the use of violence.
4. Serious over six months ago
 5. Serious less than six months ago
4. Prior Commitments to State Correctional Institutions
1. None
 2. Two
 3. Three or more
5. Violent History - This rating reviews the inmate's entire background excluding the current offense.
1. No prior violent offenses
 2. One prior violent offense
 3. Two or more violent offenses
6. Detainers - A detainer is a notification from the court that further criminal charges are pending against the individual.
1. None
 2. Detainer which likely will not increase the sentence
 3. Detainer which will increase the sentence
 4. Detainer which would result in a death or life sentence
7. Time to Expected Release -
1. 0 to 12 months
 2. 13 to 60 months
 3. 61 + months
8. Community Stability - This score is determined through an analysis of an inmate's age, marital status, education, employment and military record.
1. Excellent
 2. Satisfactory
 3. Poor

i 1 Risk Categor

The institutional risk score is assigned on the basis of the amount of observation or control that is necessary to physically contain the inmate within the prison system. Four rated categories are

described below.

1. Current Adjustment

1. Clear conduct record.
2. One minor rule infraction since reception
3. One major rule infraction since reception
4. **Two** or more major rule **infractions** since reception

2. Prior Institutional Adjustment

1. Excellent - no conduct violations during prior incarcerations
2. Satisfactory - offender was disciplinary free during the last six **months** of a prior confinement
3. Marginal - offender was a continual disciplinary problem with **numerous** minor infractions.
4. Poor - serious disciplinary and management **problems**

3. Protection Considerations

1. None
2. Minor - **inmate** is vulnerable due to size, age, lack of sophistication
3. **Moderate** - inmate needs to be separated from general population and requires close observation
4. Major - **inmate** needs to be kept away from other inmates in particular Pennsylvania State Prisons

4. Psychological Stability - (same as the MH score)

The highest scores achieved in any category are then plotted on the Correctional Classification Profile. Utilizing the table on the following page, a custody classification is determined for each **inmate**.

For example: an inmate with an institutional risk needs score of (1) and a public **risk** needs score of (4) would receive a classification level of **III**. In turn, an inmate with a public risk needs score of (3) and an institutional risk needs score of (2) would be placed at classification level IV.

The Department of Corrections has designated five classification custody levels which require a specific degree of **freedom** or control. Program codes also provide additional specification of the specific programs permitted or special considerations that are to be applied.

TABLE 1

Custody Classification Table

	P ₁	P ₂	P ₃	P ₄	P ₅	
I ₁	V IV-M, R	V IV-M, R	IV	III	II III-L	I - MAXIMUM II - CLOSE III - MEDIUM IV - MINIMUM V - COMMUNITY
I ₂	V IV-M, R	IV	III	III	II III-L	
I ₃	IV	III	III	II III-L	II III-L	
I ₄	III	III	II III-L	II III-L	I III-L	
I ₅	II III-L	II III-L	II III-L	I III-L	I III-L	

Custody Level Codes

Custody Level I - This program level is assigned to inmates who, by virtue of unstable behavior, present a threat to the security of the institution. Inmates in this custody level are subject to maximum security and control. These inmates are usually housed in a maximum custody unit.

Custody Level II - (Close) - This level is assigned to inmates who require a high degree of supervision, but less than maximum custody. Work and program assignments, if permitted, are two areas where direct and constant supervision is provided. Movement within the institution requires direct correctional officer escort. At this facility, inmates assuming this status are those in administrative custody, disciplinary custody, or diagnostic cases.

Custody Level III - (Medium) - This level is assigned to inmates permitted reasonable freedom of movement and programming within the

institutional enclosure. **Work** and program assignments are limited to areas within the fence.

Custody Level IV - (Minimum) - This level is assigned to inmates permitted to leave the institutional enclosure for work and program assignments **which** are on the institution grounds or at sites under the control at the Department of Correction.

Custody Level V - (Community Pre-Release) - This level permits varying degrees of inmate procedures prescribed in **Administrative** Directive 805. Certain inmates under direct court order stipulating pre-release status shall be assigned to this level.

Program Codes

To review, there are five custody levels codes. **One** is the lowest and requires the greatest concern as regards security. Five is the highest and allows the most flexibility. In addition to these custody code levels there are program codes which may be placed after the custody code if further specification is necessary or desired.

C (Community Supervision) - This code **allows** an inmate to leave the institutional reservation with direct and constant supervision of a staff member for special activities, programs, **work** duties, or deliveries.

E (Educational/Vocational) - This code indicates that an inmate is eligible for **educational/vocational** release.

F (Furlough) - This code is used to indicate those inmates **who** are eligible for temporary home furloughs.

H (House Single Cell) - This code identifies an inmate that requires single cell housing.

L (Limited Privileges) - This code identifies an inmate that **has** limited general population privileges.

M - (Minimum supervision) - Allows an inmate to work on minimally supervised **assignments** outside the enclosure but on the reservation.

O (Observation) - This code means that an inmate needs to **be** observed **carefully**.

R (Regular Supervision) - This code calls for direct constant supervision **when** outside the enclosure.

V (Visiting Outside) - This code is given to inmates afforded visiting privileges outside **the** enclosure.

W (Work Release) - This code identifies an inmate eligible for **work** release.

Mental Health Needs

This score is determined by the staff Psychologist and is based on results of psychological **examination**.

MH1 - Emotionally stable.

M2 Minimal impairment - requires no special observation within the institution. This inmate may display minor **emotional** problems.

M3 - Mild impairment - inmates with a psychiatric condition requiring routine **psychological** counseling, psychotherapy or medication.

M4 - Moderate impairment - this type of inmate is in **need** of short term intensive psychological or psychiatric treatment.

M5 - Severe impairment - this inmate requires **commitment** to a mental hospital. Special handling is required.

Education Needs

This score is determined by the education department **based** on

the results of aptitude testing.

E1 - has **completed** high **school** or beyond.

E2 - has achieved **at least** grade level 8.

E3 - **has** achieved grade levels 4-7.

E4 - has **achieved** grade levels 1-3.

E5 - requires special education.

Vocational Needs

V1 - has a demonstrated vocational **skill** or has a **highly technical skill** and certification.

V2 - **employed** in a **skilled** occupation for at **least two years** and desires certification.

V3 - has **some skills** but no certification. **Employed** one year or less in a **skilled** capacity.

V4 - has no **skills** above the **general labor** category.

V5 - poor **overall** aptitude. Has **little** motivation and **poor** intellectual functioning.

Work Skills Category

W1 - has **specialized** trade and demonstrated **skills**.

W2 - has no certification but has a **stable** work history in **semi-skilled** jobs and is a **willing** worker.

W3 - has a sporadic work record with no **skills**. This **individual has** never occupied a job above that of a **general laborer**.

W4 - has a poor **work** record and requires step by step **instructions** in order to **accomplish** the simplest of tasks.

W5 - has a very poor work history and refuses to maintain a job.

Drug/Alcohol Needs Category

This score is assigned after a thorough review of the inmate's drug and alcohol use or dependency history.

D1 - never used drugs or alcohol.

D2 - mild alcoholic with periodic drug problems or drinking episodes.

D3 - has past incarcerations due to drugs or alcohol. This individual would not be incarcerated if drugs and alcohol did not exist.

D4 - has been involved in prior drug and alcohol treatment programs and needs further treatment.

Finally, the classification summary is concluded with a written evaluation of the Correctional Classification Profile. Prepared by the Corrections Counselor, this narrative provides an objective analysis of each inmate according to the categories in the profile. An inmate's strengths and weaknesses are mentioned along with program recommendations. In the initial classification summary the DC-45A form is used. For re-evaluation purposes the DC-45B is utilized.

Phase III - Program Assignment Phase

The culmination of the classification process involves a formal review of each case by a five member committee composed of administrators and professionals representing a cross-section of the institution's staff. Included in the Classification Committee are:

- The Corrections Counselor Supervisor (Chairman)
- The Captain of the Guard (Security Department Representative)
- The School Principal (Educational Department Representative)
- The Employment Coordinator (oversee's institutional inmate employment)
- The Corrections Case Counselor (Treatment Representative)

This Assessment/Classification Committee collectively develops a prescribed program for each individual inmate. Simply stated, prescriptive programming is the staff process of matching the inmate's specific needs with institutional resources available and planning individualized programs geared to meet these needs. The term Prescriptive Programming means that each inmate is evaluated by a team of correctional professionals with varied areas of expertise (treatment, custody, work, etc.), who assess strengths, weaknesses, and program needs of each inmate. Using all available resources, a plan is developed and discussed with the inmate which capitalizes on strengths and is designed to provide a program outline geared to the ultimate return of the inmate to the community. Based on strengths, weaknesses, problems and needs of the inmate, programs are recommended to the inmate which, in the best professional judgement of the staff, will help the inmate to grow and develop needed skills, techniques, strengths, etc., as a part of the overall goal of returning to the community as a law abiding citizen. Periodic reviews are made for the purpose of evaluating progress and suggesting changes or continuation of relevant programs. 60

Various decisions and recommendations are made by the committee in the development of a prescribed treatment program. They include: institutional assignment; custody/security classification level; educational/vocational program recommendation; institutional job assignment; suitability for community based programs; and recommendations for other miscellaneous programs. The following paragraphs will provide a detailed explanation regarding these decisions

and recommendations.

Custody Security Recommendations

The process of determining the inmate's custody and security classification was discussed at length in Phase Two of this report. To briefly summarize, the highest institutional risk and public risk scores are cross referenced utilizing the table below and the custody/security classification is determined.

TABLE 2

Custody/Security Classification Table

	P ₁	P ₂	P ₃	P ₄	P ₅
I ₁	5	5	4	3	2
I ₂	5	4	3	3	2
I ₃	4	3	3	2	2
I ₄	3	3	2	2	1
I ₅	2	2	2	1	1

Basically this classification assigns an inmate to a certain level of trust within the institution.

Educational/Vocational Program Assessment

A large majority of inmates in the Pennsylvania Correctional System lack a high school diploma. In the small minority are those who enter the system with any type of vocational or professional certification. With this in mind, educational program within the prison system are geared to meet basic education requirements, improve basic skills, functioning and assist in developing the expertise

required to successfully achieve the **General** Equivalency Diploma (**GED**). In turn, vocational programs are designed to offer entry level exposure to a variety of vocational career areas. assignments to all classes are **based** on educational and vocational aptitude **which** was displayed in the tests administered in the **Data** Gathering **Phase** of the classification **porocess**. Vocational **programs** offered in the Pennsylvania System include: auto and diesel mechanics, construction trades, electrical trades, business practices, computer classes, accounting, restaurant trades, and machine shop.

Institutional A

With the exception of the **two** regional prisons at **Mercer** and Greensburg and the **women's** institution at Muncy, the three diagnostic and classification centers in the state of Pennsylvania, the classification **committee recommends** assignment of an inmate to a prison within the institutional system. **This recommendation** is then forwarded to the Deputy **Commissioners** office **at** the department of Corrections Central Office **where** authorization is granted for an institutional placement which is **best** suited to **meet** an inmate's **security/custody** and training needs.

The table on **the** next page identifies the maximum degree of need **from** the Corrections Classification profile which can be met in the various Pennsylvania Prisons.

Assignment to an institution is also **made** on the basis of treatment needs. For example, an inmate with major medical problems and elevated medical needs scores may be placed in institutions with hospitals such as SCI-Pittsburgh or **SCI-Graterford**. Inmates identified as significant threats to other inmates or staff are usually housed in

one of three walled, maximum security institutions such as SCI-Pittsburgh, SCI Graterford, or SCI-Huntingdon. Those in need of psychiatric or psychological treatment on an ongoing basis may be placed at either SCI-Camp Hill or SCI-Pittsburgh. Each institution has a variety of educational and vocational training which can deal with all need levels. Finally, those in need of drug and alcohol treatment may be transferred to SCI-Camp Hill in order to participate in the New Values Drug Program.

Department of Corrections Capabilities⁶¹

<u>FACILITIES</u>	<u>MEDICAL AND HEALTH CARE NEEDS</u>	<u>PUBLIC RISK (SECURITY) NEEDS</u>	<u>INSTITUTIONAL RISK (CUSTODY) NEEDS</u>	<u>WEMAL HEALTH NEEDS</u>	<u>EDUCATIONAL NEEDS</u>	<u>VOCATIONAL NEEDS</u>	<u>WORK SKILLS</u>	<u>DRUG AND ALCOHOL NEEDS</u>
SCIC	3	3	3	4	5	5	*	4
SCID	3	3	3	3	4	4	*	3
SCIG	4	5	5	3	4	4	*	3
SCIH	3	5	6	3	4	4	*	3
SCIM	2	2	3	3	2	3	*	3
SCIP	4	5	5	4	4	3	*	3
SCIR	3	3	3	2	5	5	*	3
SRCFG	2	2	2	2	5	5	*	3
SRCFM	2	2	2	2	5	4	*	2

Institutional Job Assignment

All prisons within the Commonwealth depend heavily on inmate manpower in order to function. Correctional Industries operate, at various prisons and attempt to make the correctional system as-self sufficient as possible. Furniture factories, steel fabricating, garment, weaving, soapmattress, canning and meat processing plants are in production daily throughout the Pennsylvania system. Inmate workers are used to prepare food, accomplish janitorial, laundry and institutional maintenance functions. Inmates are employed as barbers, carpenters, plumbers and brick masons. In addition, assignments are made to farm and forestry products processing.

The institution is largely dependent on inmate labor in order to provide services and maintain normal operations. At some point in their sentence, most inmates will be required to work. At the classification meeting, the institutional employment coordinator further evaluates an inmate with respect to future job assignments.

Suitability for Community Based Programs

Various community related programs were established by authority of Act 173 of 1968. These programs include: work release, education release, furloughs, and community service center halfway house placement.

Work release allows an inmate to be employed in the community during the day and return to the institution at night or after the work day.

Education release allows an inmate to attend classes outside the institution in colleges or trade schools.

Furloughs allow an inmate to return to his home town for a specified period either monthly or bi-monthly in order to develop release plans. Fifteen community service centers are in operation throughout the commonwealth. These homes assist an offender with re-integration into the community. (The various locations of community service centers are located in Appendix C, Figure #1). The classification committee makes an initial determination as to an inmate's suitability for possible community corrections program participation.

According to legislative requirements an inmate may apply for program consideration after four major criteria are satisfied. The inmate must have completed at least one half of the minimum sentence;

have no **Class I** (major) misconducts in the last nine months before application; have served at **least** nine consecutive **months** in a State Correctional Institution **and** have no detainers or pending charges.

To **summarize**, an **inmate** is scheduled for a classification committee review on either the **Tuesday** or Wednesday following **the** 28th day of placement in the reception unit. **The** counselor for the inmate distributes copies of **the** classification **summary** to the **committee members** and presents an oral overview of the case.

Utilizing the form DC-43, the chairman of **the** classification **committee documents** any relevant areas of concern, **i.e.**, mental health, **assaultiveness**, academic, etc. **The committee** then collectively **recommends programs** that may assist the inmate in working on the areas of concern. **The recommendations** are also recorded on the DC-43 form. A **custody/security** program level and job are assigned **and** suitability for **community programming** is determined. All **recommendations** are discussed with the **inmate including** an appropriate rationale. **The inmate** is advised that **his/her** level of program **participation, work performance, conduct** record and attitude will be re-evaluated periodically during the sentence and prior to release **determination**. **The inmate** is advised that he may **ask** for a case ye-review and custody classification **re-evaluation** after 90 **days** have transpired. **The** appropriate facility departments are then notified of the **committee's** decision and a **copy** of the DC-43 form are provided for the counselor and the **inmate (see Appendix B, Figure 10)**.

Re-CI fi

The study a . observation of an inmate must be a continuous process if a program of treatment is to be kept realistic and effective.

First, must be the assurance that the program is not only placed into operation **but** also changed **when circumstances** warrant. Routinely scheduled re-classification is necessary to make possible the continued integration of the individual's program with all the institutional departments involved. Because the **human** personality is dynamic and changing, re-classification is necessary to guarantee that there will be neither forgotten **men** in prison or "dead end" placements. **The inmate's** efforts and accomplishment are officially recognized the the re-classification **committee**. **At** these times the **committee may** recommend a change in the type of **program**.⁶²

Pennsylvania, **in following** the lead of the retraining group at **Amarillo** Air Force Base in **Texas** adopted a support team method of treatment **team** unit management in the prison system in the late 1960's. Following initial classification a **team** of five staff **members** from varying departments monitor an inmate's program involvement and level of participation in **recommended** treatment programs. **These** staff **members** function as a **team** in providing support for the inmate whenever **it is** -- needed. The support **team** is composed of three posted corrections officers assigned to the **inmate's** living quarters on each **work** shift, **the** inmate's work supervisor, the educational or vocational **class** instructor and the inmate's corrections counselor. **The** corrections counselor coordinates the re-classification process.

An inmate may be re-classified at various **times** throughout incarceration in the **Pennsylvania** System. For short term cases these re-classification reviews are held at the inmate's request, no sooner than 90 days following **the** initial classification hearing. &-classification for long term offenders takes place at least

annually. Inmates applying for community based programs are reviewed by the re-classification committee. Similar case reviews are conducted for inmates approximately 60 days prior to parole. The re-classification process in each of these situations is explained further in the following paragraphs.

No sooner than 90 days after the initial classification committee review, an inmate may submit a request for re-classification to the respective corrections counselor. The counselor will forward an application for re-classification upgrade form to the inmate (see Appendix B, Figure 11). The counselor then requests written votes on the inmate's institutional adjustment on a vote sheet (see Appendix B, Figure 12). After a two week period, the votes are tabulated and summarized on a master vote sheet. Various changes in the inmate's program may be proposed. Utilizing the re-classification score sheet (see Appendix, Figure 13) an inmate's progress is monitored. Changes in the initial I (institutional risk) and P (public risk) scores may be proposed. The case is then formally reviewed by the Deputy Superintendent's for Treatment and Operations. Changes in custody level or in the prescriptive treatment program are then formally reviewed and authorized by the institution Superintendent.

With long term cases, a re-classification review is conducted at least annually. This case review insures that no inmate's progress is unnoticed. Variations in program participation may be suggested and at this time inmates over 40 years of age are thoroughly examined by the medical department.

Inmates eligible for community corrections programs are subjected to the re-classification process. After the corrections

FOOTNOTES

⁵⁶American Correctional Association, Manual of Correctional Standards. (Washington, D.C. : American Correctional Association, 1966) p. 440.

⁵⁷American Correctional Association, (1966), p. 441.

⁵⁸General Principles of the Educational/Psychological Tests described in the following paragraphs have been prepared with the use of: Frederick Brown, Principles of Educational and Psychological Testing, (New York: Holt, Rinehart and Winston, 1983).

⁵⁹Criteria used in the preparation of the Classification Summary and Corrections Classification Profile as described in this chapter have been taken from Pennsylvania Bureau of Correction, rations Manual for Preparation of the Correctional Classification file, (Camp Hill, PA: Bureau of Correction Printing, 1983).

⁶⁰Pennsylvania Bureau of Corrections: Memorandum on Prescriptive Programming, June, 1983, p. 1

⁶¹This table lists the various Bureau of Corrections Institutions:

- SCIC is the State Correctional Institution at Camp Hill, PA
- SCIG is the State Correctional Institution at Graterford, PA
- SCID is the State **Correctional** Institution at Dallas, PA
- SCIH is the State Correctional Institution at Huntingdon, PA
- SCIM is the State **Correctional** Institution at **Muncy**, PA
- SCIP is the State Correctional Institution at Pittsburgh, PA
- SCIR is the State Correctional Institution at **Rockview**, PA
- SRCFG is the State Regional Correctional Facility at Greensburg PA
- SRCFM is the State Regional Correctional Facility at Mercer, PA
- SCIW is the State Correctional Institution at Waynesburg, PA

⁶²American Correctional Association, (1966), p. 2=362

CHAPTER IX

CONCLUSION

The Commonwealth of Pennsylvania has made important contributions to the history of Penology in the United States. Traditionally during the colonial period, the British employed barbaric means of corporal punishment as a penalty for criminal violations. Thanks to the efforts of the Philadelphia Society for Alleviating the Miseries of Public Prisons a more humane approach to handling offenders was implemented with the Walnut Street Jail opened in Philadelphia, Pennsylvania. At this time the Commonwealth was the primary initiator of imprisonment as a sanction imposed upon those found guilty of social transgression.

The practice of classification originated in Eastern Penitentiary. At its beginning stages, classification was little more than a broad separation of offenders, one from another. At Eastern, the sexes were segregated, the hardened criminal was separated from the novice and the debtor from the ordinary criminal. Inspired by the Quakers, the Pennsylvania system of prison administration proved to be the dominant ideology of the nineteenth century. The roots of individualized treatment of the offender can be traced to Pennsylvania's Eastern Penitentiary. Prisoners were classified and separated one from another in order to allow ample time for personal reparation. Religious meditation was thought to be an excellent method of rehabilitation. In addition to classification for separation purposes, Pennsylvania

pioneered the practice of specialization in classification,

In theory, this method of classification resulted in the placement of inmates into institutions which provided, specialized treatment. The first attempt at specialization in classification resulted in the erection of the Penn Hurst State Hospital for the insane in Harrisburg. Inmates with severe mental disorders were removed from prison and received individualized treatment in a hospital setting.

The preceding paragraphs have credited Pennsylvania with the establishment of more humane methods of handling offenders through classification for separation and specialization. Since the mid 1800's, Pennsylvania has discontinued its role as a trend setter in the field of Penology. The Commonwealth has become a trend follower, content to sit back and after the method of handling offenders in accordance with national trends which were developed elsewhere.

The Pennsylvania system of total solitary confinement was eventually abandoned in favor of a more liberal system of prison discipline which originated in Auburn, New York. Classification was mainly practiced as a means to determine which inmates are capable of manual labor.

The practice of specialized classification was further-refined in the reformatory philosophy which originated in Elmira, New York. Elmira was a special institution which dealt exclusively with first offenders between the ages of 16 and 30. A classification grading system, the indeterminate sentence and parole supervision were implemented in order to reform the offender. Pennsylvania was some ten- years behind New York in adopting the reformatory principle in an attempt to rehabilitate juvenile and first offenders. The Huntingdon

Industrial Reformatory opened in 1889 and adopted all of the reformatory principles which were developed at Elmira, New York.

History reveals that women were usually housed in separate wings of male institutions. Beginning in 1873 and in response to ever increasing numbers of female offenders many states opened special institutions for women. Some thirty years after the national trend to house women in separate institutions began, Pennsylvania finally authorized the construction of the State Industrial Home for Women in 1913.

In the early twentieth century, the social sciences proposed varying scientific and pseudo-scientific explanations for criminality. One of the dominant explanations is offered by the Positivists who view the criminal as an individual suffering from a type of social sickness. The prisons must attempt to analytically determine, through scientific means, the cause of the sickness, prescribe an appropriate treatment and thus effect a cure. In 1918, the state of New Jersey is credited with developing a scientific method of inmate classification. New Jersey -- began the trend toward individualized treatment of the offender. Through scientific diagnostic means an individualized program was implemented. Inmates were assigned to one of six general -- classifications which provided appropriate treatment services. From the mid 19th century through the great depression, the Commonwealth of Pennsylvania operated independent prisons serving specific geographic areas with a heavy emphasis on industry. In the 1920's, Pennsylvania adopted a crude classification system which mainly served to identify -- inmates for employment purposes. Following the passage of the Hawes-Cooper Act and the Ashurst-Summers Act which prevented the sale

of goods on the open market, the federal government and various states implemented programs which filled the time void created by a lack of prison industry. Industrial prisons shifted direction and the trend toward correctional treatment utilizing a scientific method of classification began. In the 1930's under the leadership of Sanford Bates, the federal government established a classification system, patterned after the New Jersey System which focused on individual treatment of offenders. A Federal Prison System was established and specific rehabilitative needs of the offender were scientifically determined. Institutional resources were, then targeted to meet these needs. Other trend setters included New York which developed a systems approach to offender classification. Each prison within the New York System was classified according to their degree of security and the types of rehabilitative services which were available. Inmates were then assigned to an environment best suited to their individual needs. -- Massachusetts expanded the role of the correctional officer and identified him as an important actor in the classification process. The states of Minnesota and Illinois pioneered the trend toward centralized reception and classification. In 1947, the American Correctional Association consolidated the various classification techniques into a standardized model of classification. Pennsylvania ignored many of the national trends in offender classification. As this paper has revealed, through the 1940's, seven prisons functioned as separate entities under the loose control of the Department of Welfare. Interinstitutional transfers were rarely made. Offenders were subjectively classified at each institution with very little processing and received maximum, medium, or minimum security designations. The first attempt to change

the Pennsylvania system took place in 1944 when Governor Martin empaneled a study commission to review the operation of the states prisons. Under Chairman, Stanley Ashe, the commission did propose some progressive recommendations for change. The suggested improvements were not made. Rather, the Legislature and the Department of Welfare channeled additional funding into the state mental hospital system, where it was felt a greater need existed.

The early 1950's were a period of violent unrest within American prisons. In 1953, following destructive riots at Western Penitentiary and at the State Prison at Rockview, Governor Fine appointed a committee under the direction of retired General Jacob L. Devers to study the causes and to recommend changes in the method of handling offenders. The recommendations of the Devers commission effectively changed the course of Peneology and led the Commonwealth of Pennsylvania out of the Dark Ages. Governor Fine with unanimous legislative support implemented many sweeping changes, including: higher pay for prison employees; the organization of seven state prisons into a centralized system controlled by the State Bureau of Corrections; the implementation of uniform clinical approach to individualized offender classification and rehabilitation; and the establishment of three central reception/classification centers to service the state.

National trends during the 1950's resulted in the expansion of treatment programs and the use of classification to identify inmates who could potentially benefit from exposure to them. Included among the innovative treatment programs introduced during this period were: individual and group counseling, therapeutic communities, treatment teams, functional units and community corrections programs.

During the late 1950's, the Pennsylvania prison system was occupied with the task of organizing the states prisons into a cohesive unit. It was not until the mid 1960's that Pennsylvania had finally made a significant response to the variety of national trends that had taken place in the United States. Since the depression, a comprehensive classification manual was published. Patterned after the American Correctional Association Handbook on Classification, this manual established a standardized method of offender classification and assigned duties to staff members involved in the various phases of the classification process. The Bureau of Correction designated the Programs Division at the control authority charged with overseeing the uniform, systematic operation of classification procedures. The prisons within the Commonwealth were classified according to the varying levels of security and program services that were available. Transfer of inmates among prisons within the system for security and program purposes was initiated. Also during this period, skilled clinicians such as Corrections Counselors and Psychologists were added to the staff of all prisons. These clinicians introduced individual and group counseling programs.

During the late 1960's through the following decade, the Bureau of Corrections further expanded treatment programs in response to national trends. Passage of the Pre-Release Act of 1968 authorized the state prisons to offer a variety of community corrections programs to eligible inmates. Classification committees were responsible for determining eligibility for participation in home furlough, education/work release and community based halfway house programs. In the 1970's, two functional units were established. The B-Block

Central Program was initiated at XI-Rockview and was intended to teach improved social skills within a controlled environment. The New Values Drug Rehabilitation Program offered substance abuse therapy within a semi-autonomous unit at SCI-Camp Hill. The Bureau of Corrections experimented in creating functional treatment units within the therapeutic community settings offered in two small regional correctional facilities at Greensburg and Mercer. Problems associated with overcrowding swiftly ended this treatment endeavor.

In recent years, the trend toward court involvement in prison classification has significantly influenced the Pennsylvania Prison System. The federal courts have required states to initiate objective methods of individual offender classification in order to assure an equitable allocation of treatment program opportunities for inmates. Although not directly involved in adverse court decisions regarding classification, Pennsylvania Correctional System Administrators re-evaluated the state's classification system and implemented sweeping changes. In 1982, a revised method of inmate classification utilizing the Corrections Classification Profile was implemented. As described in Chapter Eight, the profile provides an objective and graphic portrait of an individual inmate's needs based on the results of examinations and evaluations. Individual treatment programs developed by the classification committee, are then geared to meet an offender's needs. This position follows the recommendations of the National Advisory Commission report on Criminal Justice Standards and Goals.

1. Classification should be designed to operate on a practical level and should be guided by realistic principles to insure that no offender receives more surveillance than he requires and

no offender should be kept in a more secure status than his potential risk dictates.

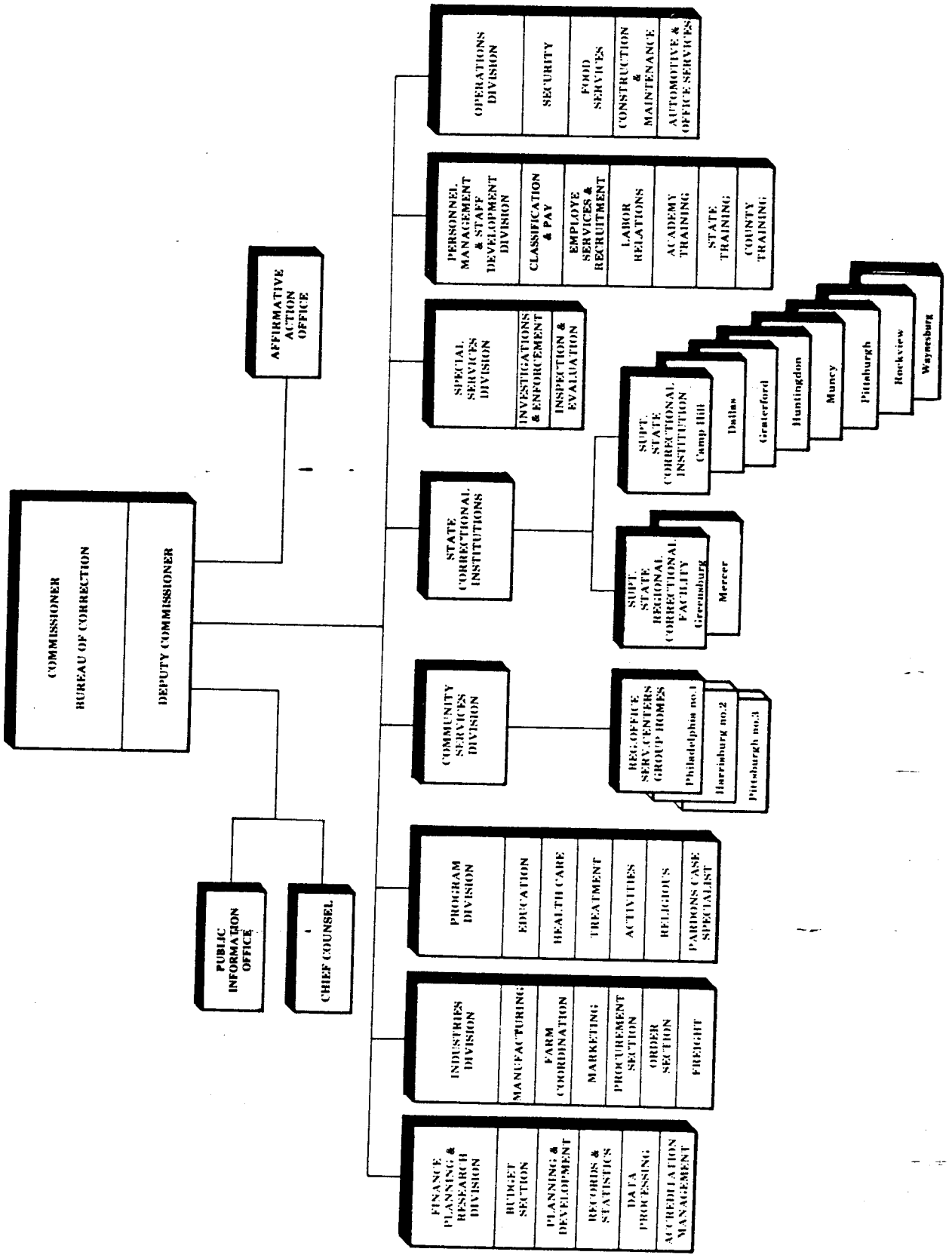
2. The objectives of the classification system must be based on a hypothesis for the social re-integration of offenders, including detailed methods for achieving the objectives and a monitoring and evaluation mechanism to insure that the objectives of classification are being met.
3. The classification system should deal with all offenders committed to the system in a fair objective way, devoid of personal prejudices.
4. The classification system should provide for maximum involvement of the individual inmate in determining the nature and direction of his goals.
5. The system should be sufficiently objective and quantifiable to facilitate research and intrasystem comparisons.
6. All staff members in the prison should receive training on the process of offender classification.⁶³

Recently, Pennsylvania has made great advances in classification and is currently managing a system which is in line with national trends. In the future, faced with the problem associated with overcrowding and the ever present watchful eye of the court, the prison administrators in the Commonwealth cannot sit on their hands, content with the present system of operation. Rather, classification of offenders must be a dynamic process which is periodically re-evaluated to insure compliance with the principles of effective classification advocated by the National Advisory Commission on Criminal Justice Standards and Goals.

FOOTNOTES

⁶³Task Force Report: Corrections, (1973), p. 210.

APPENDIX A
ORGANIZATIONAL CHART OF THE PENNSYLVANIA
BUREAU OF CORRECTION



APPENDIX B

FORMS USED IN THE CLASSIFICATION PROCESS

Figure 1

FORM BC-151A <small>R-15M-10/77</small>		COMMONWEALTH OF PENNSYLVANIA BUREAU OF CORRECTION REPLACES FORM BC-181 WHICH MAY BE USED	
BODY RECEIPT			
DATE	TIME	<small>A.M. P.M.</small>	INSTITUTION
RECEIVED FROM		TITLE	AGENCY
PRISONER (\$)			
<input type="checkbox"/> CONFINEMENT PAPERS	<input type="checkbox"/> TO DETAINER	<input type="checkbox"/> COURT WRIT-ATA	<input type="checkbox"/> BC-16A PHOTO <input type="checkbox"/> RA
OTHER (SPECIFY)			
RECEIVED BY - SIGNATURE		TITLE	AGENCY

<p>FORM JBC-7X Figure 2</p> <p style="text-align: center;">TEMPORARY TRANSFER INFORMATION</p> <p>(THIS FORM IS TO BE FORWARDED TO AUTHORITIES ACCEPTING TEMPORARY CUSTODY OF RESIDENTS)</p>	<p>COMMONWEALTH OF PENNSYLVANIA</p> <p>DEPARTMENT OF JUSTICE BUREAU OF CORRECTION</p>	
TO:	FROM: (SEE INSTRUCTIONS BELOW)	
<p>RE: Name: _____ AGE: _____</p> <p> Home Address: _____</p> <p> Charge: _____</p> <p> Sentence: _____ Bill & Term No. _____</p> <p> Minimum Date: _____ Maximum Date: _____</p> <p> Detainer (s): _____</p>		
<p>The above named person is being transferred on _____ for the purpose of _____</p>		
<p>To assist in supervising this resident while in your custody, the following information is furnished:</p> <p> Custodial Classification:</p> <p> Special Problems:</p> <p> Medical Information:</p> <p> Recommendations:</p>		
DATE:	SIGNATURE:	TITLE: RECORD OFFICER

INSTRUCTIONS: THIS FORM IS TO BE GIVEN TO THE OFFICERS ASSUMING CUSTODY OF RESIDENT FOR DELIVERY TO THE COGNIZANT AUTHORITY. PREPARE IN DUPLICATE. RETAIN COPY FOR RECORD JACKET.

FORM BC-2A DIAGNOSTIC-CLASSIFICATION REPORT Rev. 8/82 Figure 3 RECEPTION CHECKLIST		COMMONWEALTH OF PENNSYLVANIA BUREAU OF CORRECTION				
BC NUMBER	NAME	LOCATION	RECEIVED FROM	DATE	TIME	
OBSERVATION AND COMMITMENT INFORMATION					Yes	No
1. Obvious pain, bleeding?					_____	_____
2. Wearing medical tag?					_____	_____
3. Skin in poor condition (wounds, rash, vermin, swelling)?					_____	_____
4. Wearing prostheses (artificial limb)?					_____	_____
5. Carrying medication?					_____	_____
6. Signs of illness (eyes glassy, bloodshot, pupils dilated or constricted)?					_____	_____
7. Signs of possible mental disturbance (confused, anxious, disoriented, fearful, exaggerated body movements, slow or rapid , rigidity, unusually tense or suspicious)?					_____	_____
8. Signs of possible intoxication (alcohol or drugs (rapid, shallow breathing, staggering, dizziness, tremors, thick, slurred speech)?					_____	_____
9. Signs of possible suicide (depression, fear, scars suggesting suicide attempts, history of suicide attempts/threats , expressed intent)?					_____	_____
10. Signs of assaultiveness (verbally abusive, uncooperative, threatening, history of violence)?					_____	_____
11. Escape history, including attempts or threats?					_____	_____
12. Separations necessary?					_____	_____
13. Any other problems?					_____	_____
Prev. BC #s _____						
Observation concerning the inmate during reception processing.			KEEP INMATE SEPARATED FROM _____			
MEDICAL OFFICER: Perform medical screening. If not medically cleared, take appropriate action . If cleared for other housing, indicate restrictions by checking the appropriate spaces below and list any special observations to be made by officers.						
Preliminary Medical Screening Remarks						
Indicate recommended housing for initial placement following medical clearance:						
	Receiving Officer	Medical Officer				
General DDC	_____	_____				
Administrative Custody	_____	_____	Signature - Receiving Officer: _____			
Ground Floor (medical recommendation)	N/A	_____				
Close Observation (Behavior/Medical)	_____	_____				
Protective Custody	_____	N/A	Signature - Medical Officer: _____			
Self-Confine	_____	N/A				
If yes is answered to the following questions, make immediate referral as indicated:			Special Observation Instructions:			
Question Numbers	Who		Immediate referral to _____			
1 through 6	Medical Department					
7 through 11	Psychiatrist/Psychologist					
12	Counselor/Ranking Officer					
13	Personnel Appropriate for Stated Problem					

FORM BC-150B Figure 4 RECEPTION WORKSHEET				COMMONWEALTH OF PENNSYLVANIA BUREAU OF CORRECTION REPLACES FORM BC-150A WHICH MAY BE USED			
BC NUMBER	PBP NUMBER	Commitment Name			<input type="checkbox"/> TN	Institution	Date
Aliases						Race	Sex
Age	Date of Birth	Place of Birth			Religion		Marital Status
Height		Weight		Build	Color Eyes	Color Hair	Complexion
Legal Address				Arrest Address			
Military service			Serial No.		Dates of Service		Type of Discharge
Social Security No.		USINS No.		Selective Service No.	FBI No.		BCI No.
Marks and Scars						Fingerprint Classification	
Method of Reception		Committing County		Fees	Prosecuting Police Dept.		Quarters Assignment
RECEPTION STEPS					DATE	OFFICIAL'S SIGNATURE	
1. Delivrance of prisoners; examination of confinement papers; BC-151 issued.							
2. BC-150 issued; assignment of institutional number							
3. Removal of valuables; monies; personal property; BC-152 issued.							
4. Removal of personal clothing; contraband examination; BC-153 (4) issued.							
a. Haircut.							
6. Showering.							
7. Preliminary Medical Inspection.							
8. ID Body Inspection.							
9. Photographing.							
10. Fingerprinting.							
11. Inmate Clothing Issuance.							
12. Quarters Assignment							
13. Reception Interview; BC-155 issued.							
14. Delivrance to Initial Quarters.							
15.							
16.							
17.							
18.							
19.							
20. BC-156 issued.							

Figure 5

Form BC-186 SEPARATION FILE	COMMONWEALTH OF PENNSYLVANIA Bureau of Correction
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IDENTIFICATION OF INMATE

SID Number	BC Number	PBYP Number	Name
County		Aliases	
Sentence and Charge			Previous BC Numbe rr
Min.	Max.	Tentative Release Date	Detainers

SEPARATED FROM:

SID Number	BC Number	PBPP Number	Name
SCI	Date of Incident		Alias
Previous BC Numberr			Present SCI
Min.	Max.	Tentative Release Date	
REASON:			

SID Number	BC Number	PUPP Number	Name
SCI	Date of Incident		Alias
Previous BC Numbers			Present SCI
Min.	Max.	Tentative Release Date	
REASON:			

Figure 6

<p>FORM JEC-155C</p> <p style="text-align: center;">LEGAL DISPOSITIONS</p> <p style="text-align: center;">----- (INSTITUTION)</p>	<p><small>REPLACES JRC-155B WHICH IS TO BE DISCONTINUED</small></p> <p>COMMONWEALTH OF PENNSYLVANIA</p> <p>DEPARTMENT OF JUSTICE</p> <p>BUREAU OF CORRECTION</p>
---	---

1. POWER OF ATTORNEY

KNOWN ALL MEN BY THESE PRESENTS, that I do make, constitute, and appoint the Superintendent/Director of this institution, or his/her authorized representative or the Superintendent/Director of any institution within the Bureau of Correction to which I may be subsequently transferred or his/her authorized representative, my true and lawful attorney for me and in my name to sign my name as endorsement on all checks money orders, or bank drafts for deposit to my credit in the Prisoner's Trust Fund and to receive and document receipt of mail on my behalf. This power to continue so long as I am a prisoner in any institution under the Bureau of Correction, unless sooner revoked, with power of attorney or attorneys under them for that purpose to make and substitute, and do all lawful acts requisite for effecting the premises; hereby ratifying and confirming all that the said attorneys or substitute or substitutes shall do therein by virtue of these presents.

IN WITNESS WHEREOF I have hereunto set my hand and seal this _____ day of _____ 19_____ Inmate's Signature _____

Witnessed by: _____

Witnessed by: _____

2. DESIGNATION OF GUARDIAN OF PROPERTY

I hereby designate _____, who lives at _____, in the county of _____ as the guardian of all property which is in my personal possession at the time of my death or in one of the facilities or accounts of the Bureau of Correction to hold until they may be disposed of according to law. This designation shall be null and void upon my release from the jurisdiction of the Bureau of Correction.

Name: _____

Date: _____

Witnessed by: _____

Witnessed by: _____

3. ADVISEMENT OF RIGHT OF COMMUNICATION

If any problem arises within the institution concerning your confinement, you may bring the matter to the attention of the appropriate staff members for assistance. In addition, it is your privilege to address a communication at any time to the Superintendent, the Executive Deputy Commissioner of Correction, the Commissioner of Correction, the Attorney General, the Governor, or any other appointed or elected local, state, or federal official. This is not to be construed as limiting your access to the Courts in any way.

Inmate's Signature	Witness	Date

Figure '7

COMMONWEALTH OF PENNSYLVANIA

DATE _____

SUBJECT: ASSESSMENT/CLASSIFICATION SCHEDULE

APPENDIX B; Revised 01/01/85 From 04/28/83

TO: Inmate _____ Number _____

FROM: Deputy Superintendent for Treatment SRCF-Mercer

YOUR SCHEDULE FOR THE CLASSIFICATION PROCESS AT SRCF-MERCER IS AS FOLLOWS:

	TIME:	DATE:	PLACE:	CONTACT:
Medical Examination	9:00 AM	_____	Bldg. #3 Infirmary	Mrs. _____ Dr. _____
Educational Testing - WRAT (Wide Range Achievement Test) & Revised Beta II Examination	9:00 AM	_____	Bldg. #2 Room 106	Dr. _____
Chaplain Orientation	10:00 AM	_____	H.U. 118 Dayroom	Father _____ Rev. _____
Orientation to SRCF-Mercer	1:00 PM	_____	Bldg. #5 Education	Mr. _____
Educational/Vocational Testing (TABE)	9:00 AM	_____	Bldg. #5 Education	Mr. _____
Educational/Vocational Testing (Bennett Mechanical; Revised Minnesota)	1:00 PM	_____	Bldg. #5 Education	Mr. _____
Educational/Vocational Interview	10:00 AM	_____	Bldg. #5 Education	Mr. _____
Recreation Interview & Leisure Interests	2:00 PM	_____	H.U. #18 Dayroom	Mr. _____
Psychological Testing	8:00 AM	_____	Bldg. #2 Room 106	Dr. _____
Psychological Interview	1:00 PM	_____	Bldg. #2 Room 111	Dr. _____
Employment Officer Orientation	10:00 AM	_____	H.U. #18 Dayroom	Mr. _____
Dental Examination	1:30 PM	_____	Bldg. #3 Infirmary	Dr. _____
Assessment/Classification Meeting	1:00 PM	_____	Bldg. #2 Room 106	Mr. _____

Please keep this schedule so that you will know where, when, and who to see during your Assessment process. Your Counselor will see you periodically during the Assessment process. If you have any questions about your schedule, please talk this over with him.

ETB:VHS:bav

cc: Counselor; _____, H.U.; BC-15.

ICAM BC-14

COMMONWEALTH OF PENNSYLVANIA
BUREAU OF CORRECTION

Initial Interview
Data Sheet

Figure 8

S.R.C.F. Mercer

Institution

RECEPTION DATE

Inmate Name	Number	Age	Race
Sentence	Offense	County	
MINIMUM DATE	MAXIMUM DATE		
Detainers	Marital Status	Assessment Date	

Education History: Years of school completed _____ Skills: _____
Vocational History: _____

Problem Areas: **Suicide History/Pot.** _____
Escape History/Pot. _____
Assault History/Pot. _____
Drug Use/Abuse _____
Alcohol Use/Abuse: _____

Offense History: Past Convictions: _____
Past Incarcerations: _____

Counselor Comments: _____

Separations: _____

DATE

Corrections Counselor

Figure 9

DATE: _____

Dear _____

This letter has been prepared for me by the Facility for the purpose of letting you know about the State Regional Correctional Facility at Mercer (SRCFM). SRCFM is a medium security Facility with a population of approximately 500 inmates. An attempt is made to design a program for each inmate which will help him make a successful reentry into the community.

I arrived here on _____ and went through an initial processing procedure consisting of fingerprinting, getting photographed, a medical checkup, receiving clothing, and receiving a housing assignment in the Assessment Unit. I will stay in the Assessment Unit for a period of approximately 4 weeks before being moved to the main housing units. Please see the reverse side of this letter for the guidelines to be followed to visit me. While in the Assessment Unit I must wear clothing provided by the Facility, so please do not bring any personal clothing from home. After I am moved to the main housing area, I may have 2 shirts, 3 pants (no blue jeans), and 1 pair of shoes (low quarter, no boots), mailed into the Facility after I have had them approved by _____.

I am not allowed a radio or a TV for the first 4 weeks. At no time during my stay at SRCFM am I allowed to have a tape deck or tapes and cassettes. After being placed in the main housing unit I will be permitted, on a privilege basis, to have a TV (13" or less, black & white or color, 40 watt) and a radio (AM or FM only, battery operated)—they must have earplugs. These items are acceptable only if they are purchased through the SRCFM Commissary or if they are shipped directly from a Vendor after being approved by _____.

_____ is my counselor and can be reached at (412) 748-3000 if you want to discuss anything concerning me. There are a number of programs available to inmates if they are not transferred to another institution—Adult Basic Education Classes; GED Classes; Group & Individual Counseling, and Vocational Training at the Facility. Community Based Programs include Work/School Release and Furloughs.

My first 4 weeks here will involve the counselor organizing my Classification Summary. The Classification Summary is my life history and includes psychological and educational test results, an interview with me, and information from outside sources such as schools, the military, you, previous employers, etc. After my Classification Summary has been completed, I will see the Assessment Committee which looks over my Classification Summary, my housing supervisor's reports, my work reports, and interviews me. The Committee then decides if I will stay at SRCFM or be recommended for transfer to another institution. If I am to be kept at SRCFM, the Assessment Committee then recommends a treatment plan.

If members of the Facility Staff decide that I am ready for community based programming, they will make a recommendation to the Community Reentry Committee (CRC) which has the final approval concerning community based programming, but this will not be done prior to 1/2 completion of my minimum sentence. --

I will write later concerning my stay here. My address is: State Regional Correctional Facility, 801 Butler Pike, Mercer, PA 16137.

NAME AND NUMBER _____

DC-43 Figure 10
PRESCRIPTIVE PROGRAM PLAN

COMMONWEALTH OF PENNSYLVANIA
 Department of Corrections

DC NUMBER	NAME	INSTITUTION	DATE INITIATED
-----------	------	-------------	----------------

AREAS OF CONCERN

- | | | |
|--|---|---|
| <input type="checkbox"/> Mental Health | <input type="checkbox"/> Physical | <input type="checkbox"/> Assaultiveness |
| <input type="checkbox"/> Vocational | <input checked="" type="checkbox"/> Drug | <input type="checkbox"/> Sexual |
| <input type="checkbox"/> Academic | <input type="checkbox"/> Alcohol | <input type="checkbox"/> Escape |
| <input type="checkbox"/> Other | | |

RECOMMENDED ACTIONS

(The following is a list of suggested programs and/or kinds of behavior which may help you with the weakness and/or problem areas):

 Signature of Staff Member

 Signature of Inmate

Progress Review (date) _____
 RESULTS ACHIEVED or reasons for lack of results

 Signature of Staff Member

 Signature of Inmate

The two lists are not all inclusive and may change over time. Additional weaknesses and/or problem areas may be uncovered. Weaknesses and/or problem areas may be overcome or reduced in importance. Programs may be completed or additional programs may be indicated. These lists can and should be reviewed periodically to account for any progress or lack of progress. You should request a review through your Counselor to discuss any changes and to keep your prescriptive program current.

While all participation in all programs is strictly voluntary, progress or lack of progress in dealing with weaknesses and/or problem areas will be one of the factors taken into consideration for all actions requiring staff support such as recommendations for program level changes, job changes, pre-release, commutation, and parole.

WHITE - BC-1E

YELLOW - Inmate After Progress Review

PINK - Inmate When Initiated

GOLDENROD - Other

Figure 11

APPLICATION FOR UPGRADE

Date _____

Inmate Name _____ Number _____

Housing Unit _____ Counselor _____ Status Requested _____

1. Has it been three (3) calendar months (approximately 90 days) since your Assessment or last upgrade review?
 Yes No

Last Review Date _____

2. Have you been without Class I Misconducts for the last six (6) months?
 Yes No

Explain _____

Date released from Maximum or Close Disciplinary Custody _____

3. If **Drug/Alcohol Substance Abuse** Therapy Group participation was recommended, do you attend?
 Yes No

What Programs do you attend? _____

How often? _____

4. Do you work on any crew other than the General Labor Pool?
 Yes No

Where _____ Starting Date _____

Work Supervisor _____

5. Do you participate in Education or Vocational Programs?
 Yes No

Which Programs _____

6. Why do you want a n upgrade _____

Staff Support Team Member requesting review for this upgrade:

Signature _____

Date _____

Figure 12

BC - 46 (Rev. 4-77)			VOTE SHEET			COMMONWEALTH OF PENNSYLVANIA BUREAU OF CORRECTION		
INSTITUTION FACILITY	DATE	NUMBER	NAME			Program Level		
PURPOSE			COMMENT					
			YES	NO				
COUNSELOR								
WORK SUPERVISOR								
CORRECTIONS OFFICER								
HOUSING OFFICER AM <input type="checkbox"/> PM <input type="checkbox"/>								
COUNSELOR SUPERVISOR OR CSC DIRECTOR								
PSYCHOLOGIST								
CLASSIFICATION TREATMENT MANAGER								
VOTES RECORDED								
STAFF RECOMMENDATIONS								
DEPUTY FOR TREATMENT YES <input type="checkbox"/> NO <input type="checkbox"/>			DEPUTY FOR OPERATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>					
SIGNATURE OF SUPERINTENDENT, REGIONAL DIRECTOR, OR DIAGNOSTIC CENTER DIRECTOR.			APPROVED		DISAPPROVED			
COMMENTS								

Figure 13

BC-45B Rev. 8/83	RECLASSIFICATION SCORE SHEET						Commonwealth Of Pennsylvania Bureau Of Correction		
BC NUMBER	COMMITMENT NAME					INSTITUTION	DATE		
MEDICAL PROFILE		Correctional Classification Profile							
PULHEST		Medical Needs	Public Risk Needs	Institutional Risk Needs	Mental Health Needs	Educational Needs	Vocational Needs	Work Skills	Drug and Alcohol Needs
INITIAL P ___ I ___ C ___		M	P	I	MH	E	V	W	D
CURRENT P ___ I ___ C ___		CCP SCORE	5	5	5	5	5	5	5
PROGRAM LEVEL _____			4	4	4	4	4	4	4
RECOMMENDED P ___ I ___ C ___			3	3	3	3	3	3	3
PROGRAM LEVEL _____			2	2	2	2	2	2	2
Code			1	1	1	1	1	1	1
ADJUSTMENT SINCE LAST PROFILE									
SERIOUS INCIDENTS					0	-15	I	P	
1. Escape/Attempted Escape					None	1 or more			
2. Assault on Staff					None	1 or more			
3. Assault on Inmate					None	1 or more			
4. Possession of dangerous Contraband					None	1 or more			XXXX
5. Involvement in Serious Disturbance					None	1 or more			XXXX
INSTITUTIONAL ADJUSTMENT					+2	+1	0	-1	-2
1. Program Involvement					A Recommended	Partial	Nonr	xxx	xxx
2. Work Performance					Above Average	Average	Below Adv.	Disruption	xxx
3. Housing Performance					Above Average	Average	Below Adv.	Disruption	xxx
4. Time to Serve					Less than 1 yr	1-3yrs	Over 3 yrs	New Sent.	Life or Death
5. Class I Misconducts					None	xxx	1 or more	xxx	Numerous
6. Class II Misconducts					None	One	2 or more	Numerous	xxx
STRESS FACTORS					0	-1			
1. Death/Serious Illness in Family					No	Yes			XXXX
2. Recent Marital Problem					No	Yes			XXXX
3. Financial Problem					No	Yes			XXXX
4. Parole Denied/Delayed					No	Yes			XXXX
5. Adverse Court Decision					No	Yes			XXXX
6. Psychological Instability					No	Yes			XXXX
7. Recent Loss of Close Friend					No	Yes			XXXX
8. Involvement in Pending Investigation					No	Yes			XXXX
9. Inmate/Institutional Pressure					No	Yes			XXXX
10. Other						Yes			XXXX
11. Other						Yes			XXXX
12. Other						Yes			XXXX
TOTALS									
1. Should be Considered for Less need.							0-12	3-4	
2. May be Considered for Less need.							5-8	1-2	
3. May be Considered for Greater need or No Change.							1-4	0	
4. Should be Considered for Greater need.							Off Less Than 0		

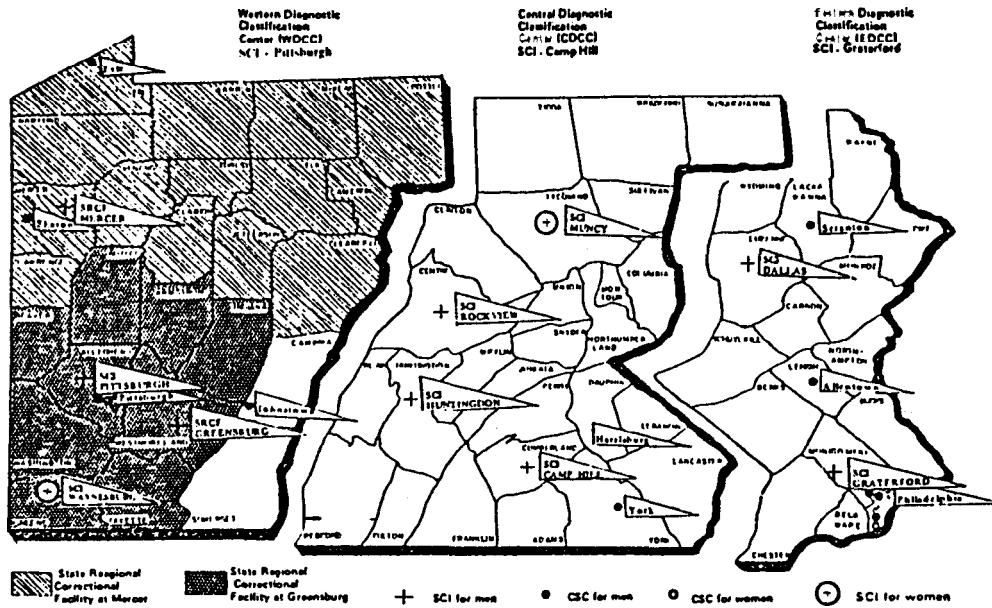
APPENDIX C
BUREAU OF CORRECTION FACILITIES
AND CATCHMENT AREAS

THE INSTITUTIONS

Figure 1

BUREAU OF CORRECTION FACILITIES AND CATCHMENT AREAS

(As of July 1, 1984)



CSC REGIONAL OFFICES, STATE CORRECTIONAL INSTITUTIONS AND FACILITIES

(Eastern) Region 1
219 East High Street
Germantown, Pa. 19144
Mamie J. Fains, Director
(215) 848-4838

(Central) Region 2
1101.4 Green Street
Harrisburg, Pa. 17102
Thomas A. Rogosky, Director
(717) 787-4427

(Western) Region 3
535 South Aiken Avenue
Pittsburgh, Pa. 15232
James P. Murphy, Director
(412) 681-1202

**State Correctional Institution
at Camp Hill**
P.O. Box 200, Camp Hill, Pa. 17011
Robert Freeman, Superintendent
Raymond Clymer, Dir. for Operations
Dennis Erhard, Dir. for Treatment
(717) 737-4531

**State Correctional Institution at Dallas
Dallas, Pa. 18612**
Joseph Ryan, Superintendent (Acting)
David Larkins, Dep. for Treatment
(717) 675-1101

State Correctional Institution at Graterford,
P.O. Box 244, Graterford, Pa. 19428
Charles H. Zimmerman, Superintendent
Donald T. Vaughn, Dir. for Operations
Thomas D. Siachelek, Dep. for Treatment
(215) 489-4151

State Correctional Institution at Huntingdon
Huntingdon, Pa. 16652
Thomas A. Fulcomer, Superintendent
Emanuel C. Wicker, Dep. for Operations
A.W. Zumpetta, Dep. for Treatment
(814) 643-2400

State Correctional Institution at Muncy
P.O. Box 180, Muncy, Pa. 17756
Ann M. Goolsby, Superintendent
Carolyn Hill, Dep. for Operations
J. Harvey Bell
Dep. for Treatment
(717) 5463171

State Correctional Institution at Pittsburgh
P.O. Box 99901, Pittsburgh, Pa. 15233
George Pyszock, Superintendent
Lawrence J. Weyandt, Dep. for Operations
James A. Wigton, Dep. for Treatment
(412) 761-1955

State Correctional Institution at Rockview
Box A, Bellefonte, Pa. 16623
Dr. Joseph Mazurkiewicz, Superintendent
Gerald Wilson, Dep. for Operations
Dr. Jeffrey Beard, Dir. for Treatment
(814) 355-4874

State Correctional Institution at Waynesburg
R. D. I. P.O. Box 67
Waynesburg, Pa. 15370
Margaret A. Moore, Superintendent
Frederic Rosemeyer, Dir. for Operations
Martin Dragovich, Dep. for Treatment
(412) 627-6185

State Regional Facility at Greensburg
R. D. I. Box 10, Greensburg, Pa. 15601
Laurence J. Reid, Superintendent
Clarence Markle, Dep. for Operations
William Wolf, Dep. for Treatment
(412) 837-4397

State Regional Facility at Mercer
P.O. Box 530, Mercer, Pa. 16137
Gilbert Walters, Superintendent
Edward J. Krall, Dep. for Operations
Edward T. Brennan, Dir. for Treatment
(412) 746-3000

APPENDIX D
FORM BC-1 *SAMPLE* OF THE
INITIAL CLASSIFICATION SUMMARY

FORM BC-1 CLASSIFICATION SUMMARY Rev. 9'62		<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Parole Violator <input type="checkbox"/> Continuation		CONFIDENTIAL		COMMONWEALTH OF PENNSYLVANIA BUREAU OF CORRECTION	
EC NUMBER	SID NUMBER	PBPP NUMBER	COMMITMENT NAME	<input checked="" type="checkbox"/> TN	INSTITUTION	DATE	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]		SRCFM	6/18/65	
				RACE	SEX	DATE OF BIRTH	
				Caucasian	Male	[REDACTED]	
				HEIGHT	WEIGHT	MARITAL STATUS	
				5'8"	145	Divorced	
				EYES	HAIR	CITIZENSHIP	
				Blue	Brown	U.S.A.	
				COMPLEXION	BUILD	RELIGION	
				Medium	Medium	Protestant	
MARKINGS, DEFORMITIES, TATTOOS, SCARS, ETC.							
No tattoos. No scars.							
ALIAS (TNI)							
None							
ADDRESS							
[REDACTED]							
PLACE OF BIRTH		SOC. SEC. NUMBER		OCCUPATIONAL TITLE		TRANSFER FROM	
[REDACTED]		[REDACTED]		Mechanic			
MILITARY SERVICE		DATES OF SERVICE		TYPE OF DISCHARGE			
None							

CONFIDENTIAL CASE DATA

MEDICAL PROFILE PULHEST 1 1 1 1 1 2 2	PAST OR PRESENT PROBLEM AREAS: <input checked="" type="checkbox"/> ALCOHOL <input checked="" type="checkbox"/> DRUGS <input type="checkbox"/> SEXUAL <input type="checkbox"/> ASSAULT <input type="checkbox"/> ESCAPE <input type="checkbox"/> SUICIDE <input type="checkbox"/> PSYCHIATRIC						
	MEDICAL LIMITATIONS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	INTELLIGENCE RATING Low-Average	ED. ACHIEVEMENT GRADE WRAT: [REDACTED]	GRADE COMPLETED 10th			
REMARKS		KEEP INMATE SEPARATED FROM					
NOTIFY IN EVENT OF ILLNESS OR DEATH		NAME: [REDACTED]		RELATIONSHIP: Fa		ADDRESS: [REDACTED]	
						TELEPHONE: [REDACTED]	

5. RELATIVE ET AL * Indicates who to notify in case of necessity

NAME	RELATIONSHIP	BORN	MARRIED	EDUCATION	OCCUPATION	ADDRESS
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

6. RESIDENCES

FROM	TO	ADDRESS	WITH WHOM
1979	1962	[REDACTED]	Self
1982	1985	[REDACTED]	Grandmother

7. EMPLOYMENT RECORD

FROM	TO	EMPLOYER AND ADDRESS	TYPE OF WORK	WAGES	REASON LEFT	REEMPLOY?
1977	Present	Self Employed	Farmer Auto Mech.	low	----	----

8. SCHOOLS

FROM	TO	SCHOOL	ADDRESS	LAST GRADE COMPLETED	REASON LEFT
1966	1976	[REDACTED]	[REDACTED]	10th	

ATTORNEY OF RECORD

[REDACTED]

INFORMATION SOURCES

PS1 [REDACTED] Personal Data Quest.

JDC - 1B Classification Summary
Page 3

GRADES REPEATED 2nd	UNION MEMBERSHIP none	OTHER CERTIFICATION none	DRIVER'S LICENSE none
SCHOOL PLACEMENT ELEMENTARY regular	SECONDARY vocational	AGE ENTERED 6	LEFT 17
PROBLEM AREAS: [redacted] claims to have experienced no problems during the time he was enrolled in school.			
EDUCATIONAL OBJECTIVE: Educational records indicate that Mr. [redacted] withdrew from Sr. High School near [redacted] after completing the 10th grade. His main educational objective should be to [redacted]. As a part of his present sentence from Lawrence [redacted] has received court order for work release and will not have sufficient time to participate in GED programming.			
VOCATIONAL OBJECTIVE: [redacted] has no type of marketable vocational skills. He plans to spend his time working on the family farm. He has no plans to further his vocational education during his present incarceration.			

9. Social Data

PARENTAL STATUS AT BIRTH married	BIRTH ORDER [redacted]	PRENATAL STATUS Full Term	BIRTH CONDITION Norcal	DEFECTS None Indicated.
PARENTAL STATUS CHANGE [redacted]'s parents were divorced when he was very young. His father resides in [redacted] which is located in rural [redacted]. His mother resides at the [redacted] Hotel located in [redacted].				
CRITICAL INCIDENTS DURING LIFE [redacted] recalls the most critical incident in his life to date occurred in 1980 when his son was born. [redacted] recalls welcoming the responsibility associated with raising the child. Unfortunately, the marriage ended in divorce and his ex-wife has retained custody of the child.				
FAMILY AND HOME CONDITION [redacted] was born on 1/21/61 and is a life long resident of the New Castle, PA area. He attended New Castle Area Schools through the 10th grade and quit in 1980 in order to be married. Throughout the years [redacted] has resided with his grandmother and works on the family farm in return for room and board. [redacted] has come to depend on the low wages that his grandmother is able to pay. [redacted] occupies a two story frame home in fair repair which is located in a rural area east of New Castle.				
FAMILY RELATIONSHIPS [redacted] claims to maintain no contact with his mother. He works with his father on the family's farm and claims to maintain a healthy relationship with him. One younger sister is deceased. [redacted] claims to maintain a healthy relationship with each of his siblings and step-siblings. [redacted] has been married on two occasions. In 1978 he was united in marriage to the former [redacted]. One child was produced through this union which ended in divorce in 1980. [redacted] went on to marry for the second time in 1982. This marriage to the former [redacted] ended in divorce in the same year. [redacted] currently maintains no steady female companion.				
LEISURE INTERESTS During his leisure time as a civilian [redacted] claims to enjoy spending time with his son, fishing and riding motorcycles. Throughout his incarceration, primarily due to his extended work release schedule it is unlikely that [redacted] will be able to participate in any of the leisure time activities that are available. It is anticipated that he will attend movies and other regularly scheduled special events. As a part of the prescribed treatment plan it has been suggested that [redacted] participate in AA Substance Abuse Therapy Groups.				
INSTITUTIONAL ADJUSTMENT (PREVIOUS & CURRENT) This is his first incarceration in a State Correctional Institution. [redacted] reportedly displayed a poor adjustment in the [redacted] Prison prior to [redacted] following sentencing. In the present offense, Mr. [redacted] has been found guilty of bringing 3 marijuana cigarettes into the Lawrence, PA Jail in work release. Since his recent arrival at SRCPM [redacted] adjusted well with no misconducts to date. Housing unit officers describe him as [redacted] and [redacted] [redacted] who causes no problems in the living unit. As a part of the [redacted] release program and has been employed on the family farm since his reception. [redacted] describes himself as a Protestant but claims no formal affiliation with any organized religious group. It is unlikely that he will participate in any religious programming at SRCPM.				

10. LEGAL HISTORY AND OFFENSE PATTERN

ADULT	Age Of First	Total No.	NUMBER OF OFFENSES					See Official Arrest Record For Further Details
			Violent	Property	Health Safety Morals	State	Misc.	
Arrests	22	4						
Convictions	22	4			3			
Incarcerations	22	3	ANALYSIS This is his first incarceration in a State Correctional Institution.					
JUVENILE PATTERN								
None Indicated.								

CURRENT OFFENSE: Contraband 11 1/2-23 months SRCM, \$127.50 Court Cost.

OFFICIAL ACCOUNT: [redacted] returned to the [redacted] County Jail [redacted] PA fro work release. He was strip searched by [redacted] Deputy Warden and observed by this Officer. Found in the crouch of his underwear was three marijuana cigarettes.

Marijuana cigarettes were then sent to the State Police Crime Lab in Greensburg, PA and tested by the Crininalist II, [redacted] who reported that the cigarettes did contain 3/4 grams of Marijuana a schedule I drug.

INMATE ACCOUNT: [redacted] a d m i t s quilt to the offense because he vas under pressure and needed to relax.

MEDICAL ACCOUNT: [redacted] was examined by the Medical Dept. of the SRCFM under the supervision of [redacted], M.D. on 6/12/85. He is [redacted] age with a blood pressure of 120/70. His overall physical condition is good. He claims abuse of "uppers", "downers", LSD, and marijuana. He is presently taking no medication. It was determined from his examination that he was clear for routine institutional processing and employment with no restrictions.

PSYCHIATSIC HISTORY: None indicated.

PSYCHOLOGICAL REPORT: See attached Sheet.

CORRECTIONAL CLASSIFICATIOX PROFILE: Medically, [redacted] is in good overall physical condition with no obvious limitations or pending medical problems. He has been cleared for routine processing and employment with no restrictions. Psychologically, the results of recant testing indicate that he is an emotionally stable individual. [redacted] doer not rank high in any of the public or institutional risk needs catagories as of tne date of this report. Educational records indicate that [redacted] withdrew from Laurel Area Sr. High School in New Castle. PA i n . Main educational objective should be to achieve his CED. As a part of the sentencing order from [redacted], [redacted] has been ordered to participate in the court ordered furlough program. Primarily due to his work schedule, it is unlikely that [redacted] will have sufficient time to achieve his CED. Vocationally, [redacted] has no type of marketable vocational skills. Again due to his work release schedule it not anticipated that he will participate in vocational programming at SRCFM. [redacted] has serious

[REDACTED]

Page 5

CCP CONT'D:

substance abuse problems. Has prior convictions for alcohol related offenses. Throughout his incarceration it is **strongly** suggested that he participate in **the weekly** AA Substance Abuse Therapy Groups. [REDACTED] is currently on Work Release Status and it is unlikely that he will have sufficient time to participate in any further pre-release programs as **specified** in Administrative 805.

[REDACTED] Corrections Counselor II

RJS/raj

[REDACTED]

Deputy Superintendent For Treatment

FORM BC-16D SENTENCE STATUS SUMMARY	COMMONWEALTH OF PENNSYLVANIA BUREAU OF CORRECTION Replaces form JBC-16C which may be used
--	--

I. SENTENCE SUMMARY

Class of <input type="checkbox"/> DEFINITE <input type="checkbox"/> INDEFINITE <input type="checkbox"/> GENERAL <input type="checkbox"/> LIFE <input type="checkbox"/> COMMUTED LIFE <input type="checkbox"/> EXECUTION												
Date	County	Number, Term Court, Indictment	Type Sent	Minimum			Maximum			Judge	Offense	Offense Tracking Number
				Y	M	D	Y	M	D			
5-5-35	Lawrence	CP 1984		11	15	1	11				Contraband	
Continued From BC#		Plea		Total Sentence:			Commitment Credit					
Fines		Costs		5127.50			Restitution					
Summary or Remarks on Sentence [REDACTED]												

2. DATES SECTION

Item	Original	Change #1	Change #2	Change #3	Change #4	Change #5	
DATE OF RECEPTION	[REDACTED]						
EFFECTIVE DATE	[REDACTED]						
EXPIRATION OF MINIMUM	5-20-86						
EXPIRATION OF MAXIMUM	5-5-87						
EFFECTIVE DATE - PV	X X X X X						
DELINQUENT TIME	X X X X X						
BACKTIME	X X X X X						
NEW MAXIMUM - PV	X X X X X						
SENTENCE CHANGE	X X X X X						
BASIS FOR CHANGE	X X X X S						
NEW SENTENCE	X X X X X						
1st Release Method—Inst.—Date		2nd Release: Method—Inst.—Date		3rd Release: Method—Inst.—Date		4th Release: Method—Inst.—Date	

3. REFERENCES AND IDENTIFICATION

1st Admission: Inst.—Date SRCFM - 6-11-85		2nd Admission: Inst.—Date		3rd Admission: Inst.—Date		4th Admission: Inst.—Date		
Prosecuting Police Department New Castle PSP			Place of Birth [REDACTED]		Date of Birth 1-[REDACTED]		Marital Status: R-S Divorced W/M	
PP Number		PSP Number		SID Number		Name		
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		
						<input checked="" type="checkbox"/> TN <input type="checkbox"/> ALIAS		

BC-45A Rev. 8/83		INITIAL CLASSIFICATION SCORE SHEET				Commonwealth Of Pennsylvania Bureau Of Correction			
BC NUMBER	COMMITMENT NAME	INSTITUTION			DATE				
		SRCFM			6/28/85				
MEDICAL PROFILE	PUBLIC RISK SCORE	INSTITUTIONAL RISK SCORE				CUSTODY SCORE			
PULHEST 1111122	Correctional Classification Profile								
FACTOR	Medical Needs	Public Risk Needs	Institutional Risk Needs	Mental Health Needs	Educational Needs	Vocational Needs	Work Skills	Drug and Alcohol Needs	P ₁ P ₂ P ₃ P ₄ P ₅
	M	P	I	MH	E	V	W	D	
CCP SCORE	5	5	5	5	5	5	5	5	
	4	4	4	4	4	4	4	4	
	3	3	3	3	3	3	3	3	
	2	2	2	2	2	2	2	2	
	1	1	1	1	1	1	1	1	
CODE				H	N	N			
									INITIAL PROGRAM LEVEL <u>V-W</u>
PUBLIC RISK SCORE					INSTITUTIONAL RISK SCORE				
1. Extent of Violence in Current Offense: <u>1</u>					1. Current Adjustment: <u>1</u>				
2. Use of Weapon In Current Offense: <u>1</u>					2. Prior Institutional Adjustment: <u>1</u>				
3. Ewpe History: <u>1</u>					3. Protection Consideration: <u>1</u>				
4. Prior Commitments: <u>1</u>					4. Psychological Stability: <u>-I-</u>				
5. Violence History: <u>1</u>									
6. Detainers: <u>1</u>									
7. Time to Expected Release: <u>1</u>									
8. Community Stability: <u>2</u>									
COMMUNITY SENSITIVITY <u>none</u>									
Other Considerations:					Prison Preference Profile:				
Notoriety of Crime(s) or Criminal: _____					Privacy _____ Emotional Feedback _____				
Sophistication of Crime(s) or Criminal: _____					Safety _____ Social Stimulation _____				
Gang Affiliation: _____					Structure _____ Activity _____				
Separations: _____					Support _____ Freedom _____				
Suicidal: _____					Need Scores				
Other: _____					• = Low o = Average + = High				
INITIAL CLASSIFICATION STAFF ACTION									

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