

August 30, 1967.

To: See list below.<sup>1</sup>

From: Surg. on General.

Subject: PHS policy for intramural programs and for contracts when investigations involving human subjects are included.

## I. INTRODUCTION

Advances in health depend on the creation of new knowledge. The Public Health Service conducts and supports research in medicine, in the health sciences and in the sciences related to health to obtain 'his knowledge. Some of this research can be done in the test tube and laboratory animals, but man himself is the ultimate necessary subject of study in the clinical phases of medical research, in most social and behavioral research and in epidemiologic and other public health research. The use of human beings as subjects in research poses problems for the investigator and his institution. The principles which follow reflect the present position of the Public Health Service and apply to intramural programs and to contracts (a statement of policy applicable to extramural programs was issued in PHS Policy and Procedure Order No. 129, revised July 1, 1966, supplemented December 12, 1966, and January 24, 1967).

Each Bureau Director shall file with the Surgeon General a description of the policy and procedure that his Bureau will follow in adhering to these principles. The Bureau Director shall report to the Surgeon General all subsequent changes in this policy and procedure.

## II. INTRAMURAL PROGRAMS

## A. THE SUBJECT

The welfare of the individual is paramount.

1. *Health and Safety*.—a. The subject must have available to him the facilities and professional attention necessary for the protection of his health and safety; b. The health and safety of persons other than the subject, if endangered by the research procedures, must be protected; and c. Concern for the subject's comfort is essential.

2. *Rights*.—a. Respect for the subject's privacy, dignity and legal rights is essential; and b. The individual must be free to make his own choice whether to be a subject in research. His participation shall be accepted only after he has received an explanation, suited to his comprehension, of the reasons for the study and its general objectives, procedures, benefits, hazards and discomforts. An explanation so detailed as to bias his response or otherwise to invalidate findings may not be necessary in those behavioral, social, epidemiologic and demographic procedures that involve no risk of harm to the subject. He must, however, be informed of his right to withdraw from the study at any time.

[Item II.B.2]

## PROJECT START

[Item II.B.2.a]

## BUREAU OF PRISONS—OPERATIONS MEMORANDUM

Subject: Procedure for processing participants into project START (special treatment and rehabilitative training), October 25, 1972.

1. *Purpose*.—a. To provide the criteria for selection of inmates for participation in Project START; b. To transmit procedures for processing inmates from home institution to Project START.

<sup>1</sup> Addressees:

Director, Office of Comprehensive Health Planning and Development, OSG.  
 Director, Bureau of Disease Prevention and Environmental Control.  
 Director, Bureau of Health Manpower.  
 Director, Bureau of Health Services.  
 Director, National Institute of Mental Health.  
 Director, National Institutes of Health.  
 Director, National Library of Medicine.  
 Assistant General Counsel (Public Health Division).

2. *Background.*—In an attempt to develop behavioral and attitudinal changes in offenders who have not adjusted satisfactorily to institutional settings, the Bureau has recently initiated a Special Treatment and Rehabilitative Training (START) Program at Springfield. The Program is designed to provide care, custody, and correction of the long term adult offender in a setting separated from his home institution.

3. *Selection Criteria.*—The START Program will be for 30-35 inmates and those who complete the program will not be eligible for return to START. When an institution is screening an inmate for participation in the program, it is necessary that the inmate meet the following selection criteria:

(a) Will have shown repeated inability to adjust to regular institutional programs—not just minor offenses.

(b) Will be transferred from the sending institution's segregation unit.

(c) Generally, will have a minimum of two years remaining on his sentence.

(d) Will not be overtly psychotic (overtly psychotic inmates are appropriate referrals to the regular medical center psychiatric program).

(e) Will have had experience in an adult penitentiary.

(f) Will not be a continuous escape risk, a id in terms of personality characteristics, shall be aggressive, manipulative, resistive to authority, etc.

4. *Referral procedures.*—Institutions wishing to refer inmates to START will request transfer authorization from the Office of the Coordinator of Mental Health Services. This request, submitted by the Warden, should contain a thorough narrative justification supporting such a transfer and documenting how an inmate fulfills selection criteria.

All transfers, in and out of this program, will go through the Office of the Coordinator of Mental Health Services.

5. This operations memorandum is cancelled effective October 31, 1973.

NORMAN A. CARLSON, *Director.*

[Item II.B.2.b]

#### MEDICAL CENTER FOR FEDERAL PRISONERS START PROGRAM

##### INTRODUCTION

The START Program at the Medical Center for Federal Prisoners is designed to assist you in changing your current way of living within the Federal prison system. To be eligible for the program you must have spent considerable time in segregation for one reason or another. This is a miserable existence and the Federal Government is the first to recognize this situation. We, in the Federal Government, have not sent you to prison but we have been given the responsibility of your custody by the Federal courts. We have also been given the responsibility to establish a program in which you can still live by your principles and beliefs, but learn to express them in a manner more acceptable to society than you have in the past.

The enclosed information will serve to introduce you to the START Program. It will attempt to explain the benefits you can expect to gain, and the personal cooperation and effort required of you to earn a favorable recommendation for transfer back to a regular institution. First of all you must understand that you have been designated for placement on this unit by the Bureau of Prisons due to adjustment problems at previous institutions. Likewise Bureau approval must be obtained before you can be transferred to another institution.

The START Program is designed to employ rigid controls and at the same time provide you the opportunity for participation in work, recreation, and areas of self-improvement. All of your needs will be provided within the unit including meals, work, play, sick call, education, visits, etc. The unit is self contained which simply means you will not be permitted to visit other areas of the Medical Center.

Immediate change in one's behavior is an unrealistic objective. For this reason the START Program consists of three levels of privileges, responsibilities, and opportunities. Every new inmate starts at Level I and progresses to Level III. Promotions from one level to another are earned or awarded on

the basis of your conduct, cooperation, acceptance of responsibility for your own behavior, and achievement towards Treatment Team established goals.

You are initially assigned to Level I until the Treatment Team recommends promotion to Level II. Level I has a minimum of privileges and responsibilities with requirements for promotion to Level II also being minimal. In Level II your privileges and responsibilities are increased and you will be required to participate in more activities such as work and self-improvement.

Satisfactory performance in Level II must be maintained for at least six months before you can be promoted to Level III. Here again, your privileges and responsibilities will be increased and more will be expected of you. There is no minimum or maximum time limit for this level. The Treatment Team will evaluate your accomplishments with you and will make recommendation for transfer to another institution when deemed appropriate. Although you can earn more benefits and privileges in the START Program than you could have in a locked segregation unit, you can never benefit as well or receive as much in this unit as in a regular institution population.

Some of the benefits available in the START Program are as follows:

1. You will have the opportunity for educational achievement.
2. You will have an opportunity to earn Industrial Good Time and pay.
3. You can work toward restoration of forfeited Statutory Good Time.
4. You will have the opportunity to seek personal counseling and understanding.

The operational philosophy of the START Program simply says that you are a man and you will be treated as a man. However, if you behave as a child, you will be treated as a child.

The following specific paragraphs will help to explain many of your questions. If there is an area you still do not understand after reading the entire brochure, the Treatment Team will assist you.

#### ADMISSION

Upon admission you will be placed on Level I for orientation and admission procedures. During this period you will be given time to understand the program and learn what is expected of you. With a minimal amount of cooperation and satisfactory conduct, you can be promoted to Level II. Also during this initial period, the Treatment Team will establish program goals and will explain what will be required of you to attain these goals.

#### MEALS

In Level I, depending upon your conduct, you will be released from your cell to serve yourself from the food cart and then return to your cell to eat. The Officer will collect and account for your eating utensils when you have had sufficient time to finish your meal.

In Level II, you will be released from your cell to serve yourself from the food cart. In most cases you will be required to eat with the group at the unit's dining area. However, at the Treatment Team's option other arrangements for eating may be designated.

In Level III, you will be released from your cell to serve yourself from the food cart and eat with the group at the unit's dining area. You are not required to eat; but if you do, you must eat at the tables in the dining area.

#### BATHING, CLOTHING EXCHANGE, AND SHAVING

Level I will bathe twice weekly and an exchange of clothing will be provided at shower time. You will be issued a razor to shave during your shower period which must be returned after use. Extra clothing will not be permitted in your cell.

Level II will bathe three times weekly and clothing exchange will be provided at shower time. You will be issued a razor daily for use in shaving as it is policy to be clean shaven at all times. You must return the razor to the Officer immediately after use. You will be permitted to keep one extra suit of clothing in your cell.

Level III will be permitted to bathe daily during your off duty hours, and exchange clothing when available. Three suits are standard issue and special

arrangements will not be made to provide extra clothing. You will be issued a razor to keep in your cell and will be required to be clean shaven at all times.

#### YARD AND RECREATION

In Level I you will be provided a one hour period in the yard for exercise and fresh air twice weekly, weather permitting. Recreation within the unit will be available during inclement weather.

Level II will be allowed a one hour yard period three times weekly, weather permitting. Recreation within the unit will be available during inclement weather.

Level III will be permitted daily yard privileges during evenings, weekends, and on holidays within the unit, or on the yard when daylight and weather will permit. Recreation in the 10 Building yard or the unit's yard is at the discretion of the Treatment Team.

#### PERSONAL PROPERTY

While in Level I you will not have access to your personal property beyond that provided for in the Bureau Policy Statement. With satisfactory cooperation on your part, you will be in Level I only a minimum amount of time, so do not request special consideration.

In Level II and III the Treatment Team will approve for you to have some of your personal property. You most likely will not be allowed to have all of your property, as you will not be allowed to accumulate items to the extent the Officers can not routinely and efficiently check your cell.

#### MAIL AND CORRESPONDENCE

Men at all levels will have regular correspondence privileges in accordance with the Medical Center Policy Statement governing "Inmate Correspondence Procedures." You will be allowed to subscribe to a limited number of publications at the upper levels.

#### COMMISSARY

Depending upon your level, you will be permitted to spend a limited amount of money for approved commissary items. You will submit an order list to the Unit Officer who will check it for approved items and forward it to the sales unit. The commissary supervisor will deliver the filled order to you in the unit. Level I will not have commissary spending privilege.

#### VISITING

Visiting will be in the designated unit's visiting area. All visits will be in accordance with the Medical Center Policy Statement governing "Inmate Visiting Privileges." However, the number of visits and length will be dependent upon the number of Officers available, space, and current condition you are in at the time. Because of these limitations, you are requested to contact all potential visitors and request that they write to the Warden designating the date and time of a visit so arrangements can be made.

Attorney visits will be granted as the need arises and will not be charged against your regular visiting.

#### SICK CALL

A member of the medical staff will visit the unit daily. You should make your medical problems known to him and he will make the proper disposition. If you are seriously ill, you will be transferred to a locked ward in the medical hospital area and returned to the STAR unit when you have made satisfactory recovery.

#### RELIGION

If you need assistance in the area of religion, you may request help by submitting a request to one of the staff chaplains who visit the unit several times weekly.

#### EDUCATION

You will have the opportunity to further yourself and your education through use of individual study courses. The Education Department Staff will evaluate

your educational needs and make recommendations to the Treatment Team. The Team will then present educational goals which you are urged to complete.

#### WORK ASSIGNMENTS

Your work assignments will consist of orderly work within the unit, or an industrial assignment making "sweep brushes," or both. The Treatment Team will discuss and designate your work classification.

When assigned to industry, you will earn extra good time and pay at a standard rate proportionate to the hours you work.

#### CASE MANAGER

A Case Manager is assigned and will be available on request. He is a member of Treatment Team and will periodically come to the unit for notarization of correspondence and legal material. If you have a problem outside the unit or Medical Center, he will assist you in its resolution.

#### CORRECTIONAL COUNSELOR

Correctional Counselor will be available daily to discuss any area of concern you may have. He is a member of the Treatment Team and can be called upon to speak for you if you are not present. He is trained in various counseling methods and can be helpful when you need someone to talk with on a personal and private level.

You will gain as much from the START Program as you put into it. If segregation is the way you choose to do your time, you have a right to this choice. However, each staff member is here to help you change those aspects of your life which resulted in your continual placement in a segregation unit. Everyone finds himself in situations in which he would prefer not be in, but this is life. He is a MAN who can make the best of a situation and profit from the experience. This is true not only for inside a prison but also in the community. If you feel you can make it in the community, you must first demonstrate that you can adjust in a general population. The man who says that he can make it in the community but can not make it in the general population is only fooling himself and copping out from life. You are now given the opportunity to start over again. Are you man enough to accept this challenge?



OCTOBER 13, 1972.

Memorandum to: James Pearsley, Correctional Supervisor.  
 From: A. R. Ellard, Supervisor of Education.  
 Subject: Availability of Staff and Programs to the Participants in the  
 S.T.A.R.T. Project.

This is to inform you that the Education Department will furnish personnel on Tuesday, Wednesday and Friday mornings from 9:00 A.M. to 11:30 A.M. when and if they are needed for that period of time to assist any members of this project that might wish to participate in the education program. The Education Department will set up a mini-Learning Center on the premises that will contain the following programs:

G.E.D. Preparation, Complete Program, Lesson 1-124.  
 Programmed College English.  
 Vocabulary Growth.  
 Spelling 1500.  
 How to Research & Write a Report.  
 Area & Volume of Common Figures.  
 Using Tables of Squares & Square Roots.  
 Numerical Prefix & Power of Ten.  
 Positive & Negative Numbers.  
 Ration & Proportion.  
 Right Angle Trigonometry.  
 Whole Numbers.  
 Fractions.  
 Reading & Preparing Simple Graphs.  
 Decimals & Per Cent.  
 Using Fractions.  
 How to Read a Rule.  
 Understanding the Metric System.  
 First Year Algebra.  
 Second Year Algebra.  
 Sets & Symbols.  
 The Arithmetic of Computers.  
 The Bill of Rights.  
 World History Study Lessons.  
 Study Lessons in Civics.  
 Study Lessons in General Science.  
 General Science: Work & Machines.  
 General Science: Biology & Chemistry.  
 Understanding Maps.  
 Maps: How We Read Them.  
 Fundamentals of Electricity.  
 Using the V.O.M.  
 Guide to the V.O.M.  
 The V.O.M. Practice Book.  
 Systematic Trouble Shooting for A/C & Refrigeration System.  
 Blueprint Reading & Sketching.  
 Alphabetic Filing.  
 Stenospeed.  
 Reading Engineering Drawings.  
 Safety Training Observation Program.  
 Arc Welding Symbols.  
 Choosing Your Career.  
 Applying For a Job.  
 Good Job Habits.  
 Body Structure & Functions.  
 Your Heart & Circulation.  
 Therapy With Oxygen & Other Gases.  
 Prevention of Communicable Disease.  
 Body Structure & Function.  
 Personal Health.  
 Safety.  
 First Aid.  
 Nutrition.  
 Artificial Respiration.

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In addition to the above listed programs, the attached list contains all of the programs available to the inmates at the Medical Center. These programs are also available to the members of the S.T.A.R.T. project providing there is a need or a desire for them.

If we can be of any further help or assistance in this project, do not hesitate to let us know.

OCTOBER 17, 1972.

Memorandum to: All Concerned.

From: J. E. Pearsley, Acting Unit Manager, START Program.

Subject: START Program revisions.

Effective immediately, the following program policy is revised.

(1) *Visiting* privileges are changed to conform with local regulations regarding visits for regular population inmates. However, due to limited staff and facilities, it will be necessary to establish specific controls as to times and numbers.

(2) *Level II* will be graduated into six steps within the level. The Treatment Team will review the individual's progress and make recommendation for promotion to the next step. Satisfactory progress for one month will normally result in promotion to the next step.

Situations which indicate demotion is in order will be handled by the officer at the time the incident occurs. He will also prepare a memo for the Treatment Team indicating the circumstances. The team will review the incident and make recommendations for continuance in Level demoted to, or, reinstatement to an appropriate Level or Step. Each case will be evaluated on an individual basis.

This revision will provide flexibility for the team to extend consideration to the individual who has maintained himself in Level II for an extended time and not necessarily demote him all the way down the ladder for a relatively minor offense.

(3) Inmates of this program who have newspaper or magazine subscriptions in effect will be permitted to have them at the time they are forwarded from the mail room. They should be informed that they must be discarded after reading and they will not be permitted to accumulate in the cell.

NOVEMBER 15, 1972.

Memorandum to: All concerned.

From: J. E. Pearsley, Unit Manager, START Program.

Subject: Program changes.

Commissary spending has been extended to allow purchases of stock food items, and several miscellaneous items. (See adjusted commissary list).

Spending limitations have been extended as follows:

Level II, Steps 1 and 2—\$ 5.00 per month.

Level II, Steps 3 and 4—\$10.00 per month.

Level II, Steps 5 and 6—\$15.00 per month.

Level III, —\$25.00 per month.

NOVEMBER 15, 1972.

Memorandum to: All Concerned.

From: J. E. Pearsley, Unit Manager, START Program.

Subject: Loan of radios to START Program inmates.

Government owned transistor radios are being loaned to the inmates of the START Program who can maintain their conduct well enough to remain on Level II or higher. This is a privilege extended to them and may be withdrawn by any staff member. The radio is to be played in the cell only. There are no earphones and the volume must be controlled so as to not disturb others in the unit. The day shift OIC will be responsible for issuing and accounting of the radios.



## BEHAVIORAL CHECK SHEET

Each Behavioral Category will have one of the following marks placed in the appropriate square:

- ✓—Acceptable Performance.
- O—Unacceptable Performance.
- N—No Opportunity To Perform Designated Response.
- R—Refused To Perform Designated Response.

*Description of Behavioral Categories*

## GENERAL BEHAVIOR

1. Breakfast: Retrieve food from food cart and eat in designated area.
2. Dinner: Retrieve food from food cart and eat in designated area.
3. Supper: Retrieve food from food cart and eat in designated area.
4. Industrial Task: Reports to industry and stays for assigned period.
5. Shower: Take a shower in the shower stall.
6. Shave: Accepts a razor and blade; shave according to Medical Center Policy H-7300.26D.
7. Clothing Exchange: Accepts clean clothes at designated exchange times.
8. Yard: Exercises in either recreation yard, when available.
9. Unit Recreation: Leaves cell and exercises out in the unit.
10. Commissary Ordered: Orders commissary according to appropriate level and step in the program.

## DAILY RESPONSES

1. Personal Appearance: according to Medical Center Policy Statement.
2. Room Appearance: according to Medical Center Policy Statement H-7300.14A Paragraph 4.
3. Performs Designated Unit Work Assignments: Performs acceptably in work task(s) on the unit as assigned by Staff.
4. Participated in Educational Programs: Inmate, who is enrolled in educational program, worked on program during the day.
5. Responsible or Non-Disruptive Behavior:
  - a. No fighting.
  - b. Works without close supervision.
  - c. Uses reasonable care in use and handling of Federal property.
  - d. Refrains from agitating others.
6. Cooperative or Non-Argumentative Behavior:
  - a. Accepts and performs assignments or duties without needing persuasion.
  - b. Reasonable cooperation with Staff and other inmates.
  - c. Follows instructions.
  - d. Not demanding.
7. Communicates With Others In A Positive Manner:
  - a. Does not use abusive language.
  - b. Not irritable or angry.
  - c. Communicates freely with others.
8. Overall Participation For The Day: This designation should be marked at 4:00 PM daily. This encompasses all categories of behaviors and those which are not listed. A judgmental response is made and labeled:  
Good (G), Average (A), and Poor (P)

## VISITS

A check (✓) mark is to be placed in the designated square whenever the inmate has a visit from one of the following:

1. Chaplain or his representative.
2. Medical Department or rounds made by the Doctor.
3. Legal Department in regards to a Public Defender or Federal Attorney.
4. Education Department representative.
5. Family or relative.

START PROGRAM

Date	
Level	

GENERAL BEHAVIOR	
Breakfast	
Dinner	
Supper	
Industrial task	
Shower	
Shave	
Clothing exchange	
Unit recreation	
Yard	
Commissary ordered	

DAILY RESPONSES	
Personal appearance	
Room appearance	
Unit work assignment	
Participation in edc. program	
Responsible behavior	
Cooperative behavior	
Communicates in positive manner	
Total participation for the day	

VISITS	
Chaplin	
Medical	
Legal	
Education department	
Family or relative	

COMMENTS:

- ✓ - Acceptable performance
- o - Unacceptable performance
- N - No opportunity
- R - Refused

Name \_\_\_\_\_

Number \_\_\_\_\_

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## START PROGRAM

## Level I

## LENGTH OF STAY ON LEVEL I

*New admission*—One week

*Demotion from higher level*—One week, unless otherwise specified by Team. All exceptions will be specified in writing with a specific period of time designated.

## BEHAVIORAL REQUIREMENTS FOR MOVEMENT FROM LEVEL I TO LEVEL II

1. Cooperate with all rules, regulations, policies, and procedures of the program and Medical Center.
2. Maintain neat and clean personal appearance.
3. Maintain neat and clean room appearance.
4. Shower and shave according to established schedule.
5. Perform designated work assignments as indicated by staff, i.e., orderly tasks.
6. Refrain from use of verbally abusive language toward staff and other inmates.
7. Refrain from threatening behavior toward staff and other inmates.
8. No fighting.
9. Appropriate care and maintenance of Federal property.
10. Eating scheduled meals and appropriate use of food and eating utensils. Only variation accepted pertain to prescribed diets and religious beliefs.

## ITEMS &amp; PRIVILEGES ON LEVEL I

Bed, comb, locker, soap, mattress, towel, pillow, set of linen, blankets (2), toilet tissue, tooth brush, cup (1), tooth powder.  
 Institutional tobacco pouch (1) : per day.  
 Cigarette rolling papers (2) : per day.  
 Book of matches (2) : per day.  
 Religious Material: Bible of recognized religious belief.  
 Legal material.  
 Shower: twice weekly as scheduled accompanied by clothing exchange.  
 Shave: Twice weekly as scheduled.  
 Recreation: one hour of exercise twice weekly outside cell.  
 Unlimited correspondence in the form of letters.  
 Visits: Medical Center policy in Program's visiting area.  
 No commissary ordering.  
 No academic material whether from institution or outside.  
 No books, except Bible and law books.  
 Lights out at 8:00 P.M.  
 All personal effects and property are stored, except that stated above.  
 All other items and exceptions will be presented to the Team for final decision and disposition according to START Program Rules.

U.S. DEPARTMENT OF JUSTICE,  
 BUREAU OF PRISONS,  
 Springfield, Mo.

A Government owned radio is being loaned to you as a reward for your continued good conduct and cooperation. This is a privilege extended to you which may be withdrawn by any staff member. You may play the radio in your room only. Earphones will not be furnished and the volume must be controlled so as not disturb others in the unit. You will be expected to furnish your own batteries.

I hereby acknowledge receipt of Government owned radio #\_\_\_\_\_ and agree to properly care for it. I agree to surrender it to any staff member

upon request and further agree to pay the cost of replacement in the event it becomes damaged or unserviceable through any form of misuse.

Signature

Reg. Number

Date

Issued by

Noted defects at time of issue:

Date issued.

Date Returned.

#### START PROGRAM—RECORDS AND DATA COLLECTION

The implementation of the daily marking of relevant Behavioral Categories is suggested to replace the many and varied methods of record keeping presently in operation. Basically, only three records need to be kept, namely: Unit Log Book, Nursing Notes, and the Behavioral Check Sheet. The Unit Log Book should include all policy and procedure changes, transmission of relevant information to all Staff Members, instructions and guidelines to be followed, and other areas of general communication. The Nursing Notes should pertain to elaborating on the occurrence of incidents, special remarks about an inmate's behavior, special program formulation, and unusual reports of both acceptable and unacceptable behavior. The remaining needed information is included on the Behavioral Check Sheet. A record is kept on the daily performance or participation of each inmate in regards to general behavioral categories, specific individual responses, and visits.

[Item II.B.2.c]

START PROGRAM—REVISION, MAY 1973

ALBERT F. SCHECKENBACH, PH. D.

The inception of the START Program was an initial step in the direction of providing a form of training and treatment for that segment of the prison population which is considered severe management problems and incorrigibles. The Program's objective continues to be to change those aspects of a man's behavior which are maladapted to living in a prison environment, as well as society. These behaviors include aggressive, assaultive acts; disruptive to rehabilitative or treatment programs; excessive use of verbally abusive language; inciting riotous conditions; agitation of others including staff; manipulative responses for self gain only, and general disregard for order, rules, procedures, requests and/or suggestions. However, this does not mean that these individuals do not demonstrate some adaptive behaviors. It simply indicates that their maladaptive behaviors far exceed their appropriate responses. The task which has been presented to the START staff is to develop a program to establish and/or increase what the institution and society deems as adaptive, appropriate behavior. Two basic questions the program is striving to answer are:

- (1) How to more effectively change behavior in a control unit environment and,
- (2) How to better generate high levels of adaptive performance.

As with every new program changes and modifications in the program's format are dictated by pragmatic experience and increased information. The START Program is no different and after eight months of operation several areas of program modification are quite evident. However, the initial program format can not be excessively criticized as circumstances outside the program hampered adequate development and evaluation. Nevertheless, certain areas are weak and others need development. Expanded staff training in behavior modification principles and techniques is required. The system of behavioral feedback is ineffective for reasons similar to those heavily documented in the field of mental health. Operational definition of criteria behaviors proved lacking in clarity and usage. A man's advancement upward in the level system with accompanying qualifying limits was not specified in sufficient detail to promote behavioral motivation. Other segments of the program have been re-

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vised, but still seem ineffectual to provide the type of program desired by the staff and the Bureau of Prisons. The following is an explanation and summary of corrective measures to remediate the Program's deficiencies and to provide more clearly outlined criteria in respect to what is available and expected of each individual as he progresses through the Program.

#### TRADITIONAL TREATMENT AND CONTINGENCY MANAGEMENT

Each man has demonstrated a long history of opposition to authority figures and lack of impulsive controls. In addition, each has experienced environmental consequences which have primarily been negative in nature. In order to cope with this type of environmental stress and consequences each man has developed an elaborate system of compensation by learning to manipulate his environment, but in ways unacceptable to normal standards of behavior adaptable in prison as well as in society. He has also learned to make life "miserable" for those who are forced to care and deal with him in every day custodial situations. He seeks immediate gratification of his wants, desires, and needs without regard for others around him. His repertoire of responses are manipulative in nature and often self-destructive. In general, his responses are more in keeping with the "convict code", rather than developing an adaptive repertoire of behaviors.

Effective means of dealing with these individuals has been fruitless because the problem has been attacked from the position of attempting to rationalize behavior and verbally setting up situations which are thought to be beneficial; however, this has done nothing more than "fed" his continuing system of rationalization and intellectualizing his behavior and thus reinforcing an over compensating defense mechanism. It is the usual course of events that he will promise or say one thing and react or respond in an entirely different manner. Talk and verbal therapy with this group is foolish and highly ineffective. In some respects talk therapy is nothing more than "playing in the man's own ball park" and not really inducing or influencing behavioral change for more than a short period of time. Thus, any form of treatment, therapy, training, or corrections must deal directly with his overt or observable behaviors and not his verbal responses.

Traditional modes of therapy and corrections with this population have not been effective because it is not as important what a man says as much as how he responds to the situations and events occurring around him. Traditional approaches have stressed the adaptability of the man's thought processes and have emphasized his overt behavior in only a disciplinary paradigm. A divergent point of view has received serious attention during the last several decades by placing almost total emphasis on a man's overt actions. Several basic assumptions have been demonstrated to be credible in other areas of human behavior and should thus be applicable in a penal environment.

1. Deviant behavior is learned and can be altered. The development and maintenance of maladaptive behavior is no different from the development and maintenance of any other behavior.

2. Desirable behavior change can occur within an institution. This change occurs primarily in terms of interactions with other individuals, especially with correctional workers in realistic, action situations within the institutional environment.

3. Offenders are not mentally ill or psychotic. Their actions are not a result of a dysfunction of the psyche, but rather from a failure to learn adaptive responses, i.e., internalize the values, norms, and controls of the majority of American society.

With these assumptions accepted as feasible, a programmatic format is needed employing behavioral analysis leading to intervention and behavioral change. The behavioral analysis to be applicable to intervention must be specified in the basic parameters of behavior, namely, frequency, latency, rate, intensity, variety, conditions, directions, and quality. By this type of behavioral evaluation, effective tools to generate and maintain adaptive, desirable behavior can be provided for many population groups. In addition, it can facilitate the efficiency with which those who have responsibilities for guiding, directing and teaching others to achieve the objective of providing something other than the norms and ways of the "convict subculture". To return the individual to general population with the same maladaptive behaviors and the added reinforcer of

withstanding attempts to help him is to sentence him to the same environmental conditions which contributed greatly to his institutionalization and membership in the subculture. However, the use of behaviorally contingent techniques which observe, analyze, and modify behavior have been demonstrated to be effective in arranging environmental conditions where a man can understand the contingencies of the "real" world and develop a repertoire of responses which are both adaptive and acceptable. Behavioral feedback systems have been effective in changing behavior when the feedback is consistent and contingent upon a response. The use of social approval, praise, and attention for acceptable responses is the traditional method, but it is difficult to administer without elaborate training, experience, and self control. However, a system of reinforcement or feedback using material or tangible items provides the opportunity for the individual to totally distrust those around him and still function appropriately. Material reinforcements offer the individual the opportunity to continue his facade of being a "tough guy" without sacrificing his image. At the same time expectations or contingencies are operationally defined which remove the individual from those opportunities to verbalize opposition and rationalization which naturally lead to coming into verbal conflict with those in authority. One of the most effective means of controlling behavior is contingency management in the form of a token economy or point system.

#### CONTINGENCIES AND CONSEQUENCES

The use of tokens, points, or material reinforcers enables the individual to initially continue his previous verbal rationalizations of a "corrupt" system but at the same time respond appropriately within the same system. He is then in the role of the man on the street who constantly complains about everything around him, but responds to situations and events in ways deemed appropriate or adaptive by society. In addition, the individual is forced to make decisions and choices which he has demonstrated from his past behavior that he is unable to do in the areas of living with the consequences of his actions. He has the opportunity to refuse to participate with a choice to get involved. If he selects the former it is of his own "free-will" without coercion or pressure; but he will also realize that he is determining his own future and not having it determined by someone else.

The selections and consequences which the individual come into contact with in a token economy program are specifically designed to be positive. These opportunities are arranged to maximize his exposure to the positive aspects of consequences. Since he has a history of negative consequences it is important to provide as many opportunities for positive responses in order to change his negative behavioral repertoire of self defeat and pessimism for a more optimistic outlook. At the same time the use of a token reinforcement paradigm arranges behavioral conditions where the individual interacts with his environment for his personal gain without violation of the "convict code." His behavioral history comes primarily from experiences and imitation of others around him. To change his history a concerted effort over a long period of time is needed to realize the effects of positive consequences and recognize that they are just as enduring as negative ones. Since behavior is strengthened and more durable on a variable schedule of consequences than on a fixed schedule he must have time to feel the effects of contingencies and consequences which are often contradictory but weighted in the positive direction. For these reasons the present arrangement of Levels and Steps will remain unchanged but simplified to just Levels.

An individual with an extended behavioral history of negative aggression cannot be expected to reverse direction as a function of a program unless the program is devised in such a fashion as to develop responses in that direction. The initial Levels System of training attempted to provide feedback to the individual by gradually increasing the level of acceptable behaviors in exchange for increasing levels of privileges. Behaviors condoned at the lower levels were unacceptable at the higher levels if these behaviors had not shown improvement and adaptability. In this way the individual's behavior upon admission was accepted at face value, but had to increase proportionately in the acceptable direction to progress to higher levels. Pragmatically, there were two areas of deficiency. First, the behaviors at the various levels could not be operationally defined to provide the necessary limits needed to distinguish the

levels. This became quite evident in attempting to establish a differentiation in behavioral refinement to the extent that the individual understood that those behaviors which were once tolerated were not acceptable at a higher level. Second, the system of verbal feedback lacked consistency where it was needed the most, namely at the lower levels. Positive behaviors were often missed for either lack of responsiveness or ambiguity about limits. The lack of consistency and absence of sufficient contingency management rendered the feedback system inadequate and ineffective in establishing behavioral control and change. The proposed correction of the situation is implementation of a behavior modification token reinforcement system of feedback at the lower levels of the program with a gradual removal of tokens to the type of contingencies normally found in a prison environment.

#### PROGRAM RENOVATIONS AND RATIONAL

The proposed changes or renovations in the START Program are basically designed to shape the desired behavior in a successive number of phases. The Program presently has no established limits which clearly outline the successive phases of behavioral control or change which a man must pass to reach the criteria of adaptive behavior. Even though the phases of behavioral change are individualistic, overall levels of responsiveness can be developed to basically assist a man in formulating those responses which are deemed adaptive.

Shaping of behavior is accomplished by differentially reinforcing successive approximations of a desired behavior in a step by step program. Each consecutive step approximates the desired or terminal behavior. Just as it is impossible for someone with a baseball swing to successfully adapt to golf the first time, the same can be said of other behaviors. There are a number of fundamental responses in golf which must be shaped or developed in order to achieve an accurate shot. However, each response in approximating the ultimate swing and resulting distance. For those men in the START Program their maladaptive behaviors must be shifted in the opposite direction. To expect complete adaptive behavior at the beginning is unrealistic and negates their need for such a program. Their behaviors must be shaped from maladaptive to adaptive, but over a course of time with each response developed approximating terminal adaptive behavior.

The proposed change in the program can be best viewed as a series of steps or phases with each approximating the ultimate behavior of adaptive responding in a penal environment under the direction of correctional workers. The basic adaptive responses are three, namely personal care and hygiene, work performance, and social interaction. It is readily recognized that these are identical to the basic behaviors shaped in the developmental growth of every individual. Without exception these three behaviors are the foundation for adaptive, acceptable performance in prison as well as society.

To develop these behaviors a number of programmatic changes must be arranged. At the same time the basic needed ingredient in the initial phase of the program is behavioral control. Each man has a history of being a management problem which means emphasis on security and custody. This is the traditional reaction to these individuals and it is essential. However, it creates an atmosphere of animosity, suspicion, and mistrust which does not lend itself to developing a therapeutic or counseling relationship. The constant flow of demands and manipulations forces the correctional staff to attempt to defensively rationalize every move which results in the Program operating in the opposite direction from shaping desired behavior.

Accepting responsibility for the consequences of one's actions is the first phase of adaptive training. Each individual has demonstrated a behavioral history of shifting or projecting his responsibility to others, including staff. By arranging verbal confrontation the man has the opportunity to shift his responsibility and thus defeat the purpose of the Program. However, the use of token reinforcement system prevents this shifting and projecting. The points or tokens are contingent upon his behavior. They are exchangeable for various items or activities desired by the man. Since he is controlling whether he earns points or not, he is accepting responsibility for his actions. In other words, acceptable behavior affords opportunities to receive desired items, whereas unacceptable behavior or no behavior renders the individual at a static position. He also loses the opportunity to engage in his usual manipulative behavior be-

cause there is no one to manipulate but himself and no one is negating or stopping him from earning but he himself. In this way the consequences for his actions are his responsibility. These consequences can not be shifted or projected as the staff is only an intermediary in the process. The staff controls the contingencies but the man controls his consequences.

Presenting desired consequences contingent upon behavior is identical to behavioral control. When an individual is responding to acquire something desired, he cannot at the same time respond in a negative manner as long as the contingent behavior is defined in an adaptive direction. Since adaptive and maladaptive types of behavior are incompatible and opposite, behavioral control is manifested as long as the contingency is met. Thus by the use of a token system of reinforcement two areas of programmatic deficiency are remediated, namely, accepting responsibility for personal behavior and behavioral control.

The initial phase of the program affords behavioral control and places the individual in a position of accepting responsibility for his own behavior. The ultimate test for acceptance of responsibility is demonstrated by the individual purchasing the privilege of progressing to the next higher level. This purchase indicates that he has performed at an adaptive level for a considerable period of time and refrained from maladaptive behaviors. In this way the individual is almost completely determining his responsiveness to his environment. This is the usual manner of responding for the individual in question. However, the main difference is that little determination or specification was previously defined as to the adaptability or maladaptability of his behavior. With addition of points contingent upon appropriate behavior, progress is contingent upon adaptive behavior. In this way the individual is still dictating and manipulating his environment but it has been shifted from one of inappropriateness to adaptive responding.

Since a token reinforcement system for adaptive responding is insufficient to reach the desired terminal behavior and can not be maintained in the "real" world, the consequences of responding for the individual must be altered to those naturally occurring in his environment around him. Initially the man dictates his behavior and the staff reinforces those aspects which are adaptive. This is satisfactory but it is only the initial phase. The individual must progress to compromising his maladaptive responses to those dictated as adaptive by society. In other words, the man must be totally removed from the token system of reinforcement and have it replaced with natural consequences while maintaining the same level of performance and participation. The second phase of the program gradually removes token reinforcement and substitutes contingent social controls which are the naturally occurring consequences in a correctional environment.

In phase two the individual continues to respond to a token reinforcement system but the points are in some respect valueless to him in that the opportunity to exchange them for desired items and activities is discontinued. The major behavioral requirement is that he continues to respond as he had in the initial phase and in turn receives corresponding privileges. In this way two very important measurements of evaluation of his behavior are in effect. First, the level of earning without the opportunity to spend provides the opportunity to equate the level of performance with that of the initial phase. Second, it examines the behavior under more natural consequences than previously. As in the initial phase the individual will have pre-arranged a minimal level of performance to be afforded the opportunity to be completely removed from the token reinforcement system. This gradual shifting away from token reinforcement to the more natural occurring consequences in the environment will wean the individual from the addictive effects of responding under a token system. At the same time additional behavioral requirements will be programmed in the form of the individual completing self-improvement programs which have been determined as appropriate for him by a joint contractual agreement of the staff and individual in question. The behavioral contract will emphasize those aspects of an individual's behavior observed from his point of admission to that date. The fading of a token reinforcement system and shifting to natural occurring events is the preparation for the final and preparatory stage of progress for the individual.

After a contractual period of time the individual has the opportunity to progress to the final phase in the program. This phase is very similar to that



which is occurring under normal conditions in a regular penal environment. He will be afforded many of the privileges and opportunities which are available in "population" but with some limitations. At the same time the individual will be required to meet with his treatment team and determine what responses he needs to further improve and outline a course of events which he must complete prior to the Team recommending transfer to a regular prison population. This final phase is very similar to any man in prison approaching his Team and jointly establishing goals and aims for his self improvement while in confinement. These goals will be somewhat pre-determined from the classes of behavior he has demonstrated in the two earlier phases of the program. No startling new developments will occur at this stage but it will primarily be a continuation of earlier performance with refinement emphasized.

The overall program format is designed to operate in various stages to change a man's maladaptive responses to appropriate behavior. Phase one is primarily designed to develop behavioral control and force the individual into a position to accept responsibility for his own behavior. Phase two incorporates methods to shift an individual from a very structured pattern of responding to that more normally occurring in the natural environment. Phase three is the final step in approximating conditions as similar as possible to those existing in a regular penal institution. By designing a program with these three phases of behavioral development under consideration it can be readily observed that each phase emphasizes aspects of adaptive behaviors with behavioral controls decreasing proportionally as one advances through the various levels in the program.

#### DEMOTIONS AND DISCIPLINE

One of the basic renovations in the new proposal which has not been mentioned involves the policy of not demoting an individual under normal conditions. At this point there are three events or circumstances which would force the staff into a position of requesting demotion after considering circumstances and other qualifying variables. The three events are as follows: overt physical attack toward staff, use of a weapon in an overt physical act, and destruction of federal property. These three will be dealt with by demotion and the possibility of forfeiture of statutory good time and even criminal prosecution. Other infractions as to rules, regulations, and procedures will be met with immediate action. In the initial phase of the program in which token reinforcement is used the consequences for violations will amount to confinement in one's room for a predetermined period of time, no loss of points, no availability of earning points, and no availability for spending points. In the second and third phase violation of rules, regulations, and procedures will be administered by confinement and/or the assignment of an additional task as to the frequency of the violation over a period of time. The program will not be without its negative consequences, but these will be held to a minimum in respect to those violations which are currently everyday occurrences in the START Program.

#### NATURALLY OCCURRING CONTINGENCIES

Many references have been made to "naturally occurring contingencies in the environment." These contingencies are everyday social interactive events between the correctional worker and the inmate. However, these events in the START Program occur at such a low frequency that their consequence has little effect if any. At the same time the allegiance to the "convict code" and opposition to all authority figures negates any attempted counseling, help, or normal social interaction. The token reinforcement system in the initial phase of the program arranges conditions conducive to fostering a helper-helpee relationship. Each time the correctional worker dispenses a token or points, he is relating to the individual in a positive manner without infringing upon the individual's beliefs, subculture norms, or attitudes. At the same time it is impossible to continue presenting points and the usual accompanying socially reinforcing comments without breaching the barrier of the correctional worker versus the inmate. Since the correctional worker becomes a reinforcing agent, this reinforcing situation naturally generalizes to other aspects of the forced contact between the two as a result of continual, close proximity to each other. When the officer acquires the role of a reinforcing agent, he then has the opportunity to utilize his personal and learned counseling skills. Since this

is the normal means of corrections in dealing with problem behaviors, the use of token reinforcement and the eventual shift to socially reinforcing actions achieves one of the major goals of the program. At the same time it arranges conditions exactly or very similar to those conditions and contingencies existing in a regular prison environment. Instead of the individual strictly adhering to the "convict code," he is influenced by those around him who were formerly "pigs." Conversely, without establishing the correctional worker as a reinforcing agent, little actual progress will be made in arranging programmatic conditions analogous to a regular prison setting and in establishing adaptive social interaction or naturally occurring contingencies.

#### TEAM CONCEPT APPLICATION

The team approach is perhaps much more broadly conceptualized in the START Program than it may be in other units or institutions. All members of the Team are considered part of the treatment staff. However, the treatment staff is more inclusive and defined as any correctional worker who comes in direct contact with a START member on a daily basis, or otherwise basis, and is, therefore, in a position to influence and/or modify the individual's behavior.

In phase one the Team arranges the conditions, contingencies, and selection of reinforcers. The individual determines his participation, performance, and the consequences. In this way the Team is only the intermediary in the process. However, the Team begins to take a more active role in phase two on Level IV. The reinforcing effectiveness of the points is gradually shifted to the naturally occurring consequences of social interaction. These natural consequences have been occurring in phase one, but the overriding factor is usually the points. The team now has experienced the particular positive manner of responding in presenting points and can continue without the use of points to "break the ice." The joint action of the Team and individual in contractual meetings sets the stage for a combined effort on both parties to refine or improve contractual behaviors. Finally, in the last phase or Level V, the environmental conditions are similar to a regular correctional setting without the animosity and suspicion of both parties. The Team determines with the cooperation of the individual areas of progress, refinement, and continued self improvement.

The Team is shaping the behavior of each individual and must be attuned to the individual's needs. At the same time the stoic relationships of the individual and correctional worker is changed to a joint effort towards improvement. In this way the individual's behavior is changed and the correctional worker's reactions to the individual concurrently improves. However, this is only valid if consistency in application is the mainstay of the program. For this reason the Team concept is heavily emphasized and stressed.

#### DIFFERENTIATION OF LEVELS

Within the proposed reorganization of the START Program, a realignment of the levels is also necessary for simplicity. The following is the proposed alteration:

##### PRESENT

- Level I.
- Level II: Step 1, Step 2, Step 3, Step 4, Step 5, and Step 6.
- Level III.

##### PROPOSED

- Level I.
- Level II.
- Level III.
- Level IV.
- Level V.

The use of a five level system within the same living area presents problems, but these are minimal with addition of a physical annex for Level I. Basically, each individual will be performing similar tasks and behaviors with only differentiation of whether points are available or not. The following is a delineation of the new levels as to program, criteria for advancement, areas of concentration and programmatic conditions. (See Appendix)

*Level I*--Level I remains unchanged from the current program description. Basically, this Level provides the individual with those basic items designated

as minimal by Bureau Policy statement. The duration is one week with the program emphasizing admission and orientation procedures with the opportunity for the individual to observe the program prior to participation. Privileges for Level I and criteria for advancement to Level II are unchanged. The areas of major emphasis are personal hygiene and responsibility for own behavior.

*Level II.*—After a minimum of one week on Level I and minimal adherence to criteria, the individual advances to Level II. He is immediately placed on the point system.

Points will be delivered according to pre-arranged criteria in multiples of 10. Each individual will have a card with the total number of possible points being 500. Additional cards are available when one's card is completely filled or the card is lost. Whenever the individual earns points, his card will be stamped the appropriate number of times according to the pay scale. Exchanging of points will be in the form of punching a hole through the number.

Points will be earned for the following areas: personal hygiene, work performance, responsibility for own behavior, and self-improvement courses. Points can be spent on various general items as listed, and personal items from the individual's personal property not ordinarily permitted in a control unit setting. Each man will have the opportunity to purchase items or activities and rent other items. The areas of major emphasis are personal hygiene, work performance, and responsibility for one's behavior. Self-improvement courses will be available, but staff will not emphasize their importance.

Level II is a crucial level in that each individual is capable of maintaining adaptive behavior but not for any appreciable period of time. The transitory nature of their behavior should be brought under sufficient control by motivating them to earn and spend points. Presently, this seems to be the time period which has been the most difficult to cross without serious management problems.

A dual criteria for progression will be in effect. The individual must have earned a set number of total points before requesting the Team to approve promotion. His requesting promotion is in the form of paying the Team a predetermined number of points. In this way the individual is dictating how fast he progress through the initial phase of the program, but the Team has arranged the earning of points to equal approximately two months performance before the minimum total number can be reached. Thereby, the staff still retains some measure of control over the contingencies for promotion. Nevertheless, the individual determines how rapidly he progresses to the next Level by the rapidity of earning points.

Violations of rules and procedures result in a specified minimum period of confinement to one's room. Any extension of this period is dependent upon the man's responses while in his room and upon being permitted to return to the program. While in this position the individual will not have the opportunity to earn or spend points, but also will not lose points.

*Level III.*—Following the earning of a minimum number of total points and paying the base price for advancement, the individual will be promoted to Level III. This Level is operationally the same as Level II with the addition of emphasis of being removed from the personal hygiene behaviors and shifted to increased involvement in self-improvement courses. Personal hygiene behaviors are deemphasized but expected to be maintained at the same degree as in Level II.

The role of the correctional worker as a punishing stimulus should begin to generalize more as a reinforcing agent. This will come about as a function of dispensing points. At the same time the program will begin to arrange more complete prescription plans for each individual.

The duration is approximately two months and the conditions for promotion is identical to Level II with the exception that the points total and cost is increased. Violation of rules and procedures is handled in the same manner as Level II.

*Level IV.*—Meeting Level III criteria results in progressing to phase two or Level IV and the phasing out of the point system. As in phase one the individual will earn points, but the opportunity to exchange them will be nonexistent. This will start the process of removing the additive effect of functioning on a point system and provide a measure of evaluation of continued performance and participation. The individual will receive those items and activities

formerly purchased but without spending points. A minimum total number of points for advancement will still exist and be the only transactional use of points. After earning the minimum total number of points, the man will be removed from the point system altogether. He will not have the availability of earning or spending, but continue to receive his reinforcers. However, the individual will meet with the Team and a joint contract will be drawn up specifying those aspects of the individual's behavior which need reinforcement as determined by his behavior in Level I through his present status. It will also specify the conditions and criteria for promotion to Level V. The contract will be written and signed by the Team and the individual. Following completion of the contractual agreement the individual will advance to the final Level.

This is the first Level where major emphasis is placed upon correctional and psychological counseling. Regularly scheduled meetings with the individual on a one to one basis will attempt to provide the individual a framework of communication which he can use upon returning to open population. The contractual agreement stresses individualized programs and thus the greater need for counseling to prevent misconceptions and provide further guidance similar to that found in population.

The areas of importance continues to be work performance, responsibility for own behavior, and self-improvement courses. Where appropriate the completion of a self-improvement course will be one of the conditions of the contract.

Violations of rules and procedures will be acted upon on a frequency and severity basis before necessitating more than disciplinary action of a confinement nature. Since the duration for both segments of Level IV is approximately one month the frequency will be adjusted accordingly.

*Level V.*—The final Level remains unchanged as to what is currently offered to the individual. However, additional behavioral requirements will be established on a contractual basis in terms of self-improvement responses. The contract established in Level IV will be rewritten to further refine behaviors. Realistic plans for relocation in a regular population will begin with traditional counseling used to discuss various aspects of the individual's past, present, and future behavior. After approximately three months of acceptable behavior and fulfillment of the contractual agreements, it will be recommended to the Bureau that the individual be transferred to a regular population at an institution other than Springfield.

During the final phase conditions and contingencies will be similar to those found in any general population. With acceptable behavior at this phase, the individual is behaviorally prepared for open population. There may be a transition problem since each has spent considerable time in a control unit prior to the START Program. These problems will be individualistic and handled as such.

Violations of rules and procedures extends the Level V duration dependent upon the individual's general behavior and frequency of occurrence of the particular behavior. Since the majority of Level V conditions are almost identical to open population, disciplinary matter will operationally be handled in a similar manner as in population.

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# START PROGRAM REVISION

Program Phases	<u>CONDITION</u>				<u>AREAS OF CONCENTRATION</u>			
	Old Level System,	New Level System	Approx. Time Duration	Points Available	Personal Hygiene	Work Behavior	Responsible Behavior	Self-Improvement
	Level I	Level I	1 week	No Points	X		X	
Phase 1	Level II Step 1 Step 2	Level II	2 months	Points	X	X	X	
	Step 3 Step 4	Level III	2 months	Points		X	X	X
Phase 2	Step 5 Step 6	Level IV	2 months	Points (earning only) No points		X	X	X
Phase 3	Level III	Level V	3 months	No points	X	X	X	X

## Characteristic of Conditions

### 1. Phase emphasis

#### Phase 1

Behavioral control

Responsibility for own behavior

#### Phase 2

Shifting contingencies

#### Phase 3

Correctional management

Self-improvement

### 2. No demotions except serious disciplinary matters.

### 3. Minimum number of points to progress

Level II

Level III

Level IV ( first portion of Level IV)
















### 4. Requirement in the last portion of Level IV and Level V dependent upon prior behavior in Level I through first portion of Level IV.

Team designation

Individual behavioral contract

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EXCHANGE MEDIUM

									
									
		NAME <u>John Doe</u>							
		DATE <u>May 10, 1973</u>							

500 points per card

## Color code

Level II	white
Level III	green
Level IV	red

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# REINFORCERS ACQUIRED THROUGH POINTS

## REINFORCERS

Commissary ordering (10 pts. = \$.10).  
 Ordering subscription to hometown newspaper.  
 Tobacco and paper.  
 Matches.  
 Rent own radio for week.  
 Rent institution radio for week.  
 Notarizing by casemanager outside of regular day and time.  
 Pencil.  
 Paper (5 sheets).  
 Collect telephone call home.  
 Rent own musical instrument for week.  
 Acquisition of paint by numbers set in room.  
 Outside recreation equipment for the entire recreation period.  
 Keeping library books in room for week.  
 Ordering subscription to magazine or periodical.  
 Coffee or juice per cup.  
 Photograph of self.  
 Shower and shave more than twice a week (cost per day).  
 Written contract with Team.  
 Day off from industry with pay.  
 Cereal.  
 Ball point pen.  
 Calendar.  
 Mirrors.  
 Models (planes, cars, ships, etc.).  
 Leather work.  
 Rent other personal property.

## RESPONSES WHICH EARN POINTS

### BEHAVIOR

Room appearance.  
 Personal appearance.  
 Shower on assigned day.  
 Shave on assigned day.  
 Orderly assignment.  
 Industry per ½ day.  
 Special assignment.  
 Haircut.  
 Physical exercise.  
 Overall behavior for the (4:00 P.M.) (Notes in file).  
 1. Refrained from use of abusive language both in and out of room.  
 2. Not irritable or angry in a negative manner.  
 3. Refrained from agitating others both in and out of room.  
 4. Not demanding.  
 5. Accepted and performed assignments, duties, and tasks without needing persuasion.

### POINT EARNING ON A CONTRACTUAL BASIS

Performance on educational course.  
 Performance on preparation for GED.  
 Paper written on specific topic.  
 Acquiring typing skills.  
 Performance on self-improvement course.  
 Performance on written contract with Team.

[Item H.B.2.d]

## START—REVISED PROGRAM DESCRIPTION, NOVEMBER, 1973

### Introduction

Of the 23,000 plus offenders currently confined in the Federal Prison System, 98% will eventually be released to the community. The vast majority of these individuals will have participated in programs designed to better equip them

to make a successful free world adjustment. However, there is a small group of offenders who will have had another type of prison experience.

People who cannot bring their behavior into minimal conformity with society's demands—who break its laws—are the group which the community segregates by placing them in prison. Among those offenders who are incarcerated, there is an aggressive sub-group which continually violates institutional rules and regulations. These inmates must be separated from the prison population and periodically placed in the segregation unit. There is still a further sub-set—perhaps 1% of the Federal offender population—who assault staff, aggress against other inmates, and continually act-out in an uncontrolled way while in the segregation unit.

For this latter group there appears to be only two alternatives: either continue to let them vegetate while they remain in virtual continuous segregation status, or try an alternative approach. Regardless of which choice is made—and regardless of the success or lack of success of that approach—when their sentence expires, these offenders will also be released to the community. Individuals who may have caused fights, stabbings, assaults, and even murder, have been released into the free world at the end of their sentence. In an effort to decrease the frequency of this type occurrence, a different treatment alternative was developed on a demonstration basis.

Project START (Special Treatment and Rehabilitative Training) is a developing program. It has evolved from a realistic and immediate need to promote change in the behavior of a sub-group of the Federal prison population which has chronically demonstrated hostile, anti-social behavior while in regular penal institutions. START incorporates suggestions, ideas, and hypotheses based on past institutional work experience of a professional task force selected to develop a program which would realize the desired goal: motivating highly aggressive, continuously disruptive offenders to gain more effective control over their destructive behavior.

The first 20 inmates admitted into the START program had: an average of 5 institutional transfers (range 2-13) because of disciplinary problems; had received an average of 21 disciplinary reports (range 4-66), of which an average of 12 were for major incidents (range 3-24) including: arson, assault, possession of a weapon, violence, etc.; had spent an average of 49% of their institutional time in segregation status (range 21-92%) where they continued to be destructive of property, assaultive towards other inmates, and verbally and physically abusive towards staff, including throwing food, urine, and feces at them. The offenses for which these men were incarcerated were: Forgery (1), Kidnapping (1), Heroin Possession (1), Threatening the Life of the President (1), Murder (2), Assault (3), Assault and Robbery (4), Bank Robbery (7). While incarcerated, eleven of these men received additional sentences for offenses committed while in prison: Possession of a Weapon (1), Assault (4), Murder (6).

The definition of the special correctional needs of these offenders and the search for effective ways to meet them has been a continuing concern. Efforts to resolve these concerns have been in the direction of developing approaches for START which avoid "de-humanizing" the program participants. Despite their frequently uncontrolled behavior, these men will eventually be released to the community: the intent is to help bring about positive changes in their behavior without further alienating these individuals.

The foundation and structure of Project START can be found in established correctional treatment programs developed at the State Reformatory, Yardville, and the Federal Youth Center in Morgantown, West Virginia, effective procedures of which have been incorporated into this program. A great deal of pre-established material from other programs has been utilized in the formulation of Project START at the Medical Center for Federal Prisoners in Springfield, Missouri.

#### *Rationale*

There exists among the Federal Prison population, a small group of individuals who characteristically cut out in a belligerent fashion. They have a history of out-of-control behavior in the community. This behavior persists while they are in prison; even while in the institution's segregation unit. They utilize their aggressive acting-out tendencies to manipulate situations in order



to gain their own ends. Frequently, this results in verbal attacks and physical assaults on both staff and other offenders. Because of its life-threatening potential, this behavior is highly disruptive of efforts to implement rehabilitative programs for those who wish to participate. Not only must a disproportionate amount of staff time be devoted to coping with the disturbances created by these individuals, but their threats and assaults on others further serves to undermine rehabilitative efforts. Typically, the usual remedial techniques (such as loss of privileges, segregation, etc.) have no ameliorative effect on these offenders.

On occasion, these highly manipulative individuals may resort to almost bizarre extremes to achieve their goals (e.g., self-mutilation, swallowing razor blades, etc.). Consequently, they frequently receive diagnoses of severe mental illness, and are transferred to a psychiatric setting. While it is recognized that these offenders suffer from emotional pathology, their personality disorganization is not of psychotic proportions. They are not helped by a milieu and medication program designed for the psychotic patient. Therefore, they are transferred back to a correctional setting where they initiate the process all over again. Generally, this type of offender has a history of having been transferred between regular and hospital settings (or of many transfers between regular institutional programs) without any real benefit accruing to the individual involved. START was initiated to intervene in this "treatment-by-transfer" cycle; it is an effort to develop a positive program to help these most-difficult-to-manage offenders.

Bureau of Prisons preliminary studies indicate that for any releasee the prognosis for a successful return to society is directly related to his level of adjustment while incarcerated.

### *Goals and Objectives*

The primary goal of Project START is the care, control, and correction of the long term, disruptive adult offender. The major objective is to help these individuals gain better control over their behavior so that they can be returned to regular institutions where they can then participate in programs designed to help them make a successful community adjustment. START, then, can be viewed as a type of "pre-rehabilitation;" a necessary first step for that small subset of inmates who consistently undermine training programs that the majority of offenders find useful in contributing to post-release success.

Pertinent sub-goals of Project START are those which will enable the individual to participate in programs in regular institutions. There are three such sub-goals:

1. Maintain an appropriate level of personal hygiene.
2. Develop an ability to engage positively in inter-personal relationships.
3. Learn productive work habits.

### *The Participants*

The type of individual eligible for selection in the START program represented less than 1% of the total Federal Prison System's population. Nevertheless, he does much to disrupt normal operation of any institution. He consumes a disproportionate share of staff time by destructive behavior and does not respond to disciplinary or other external controls. Most counseling efforts fail. He is assaultive and maliciously schemes to demonstrate his physical prowess, usually by pressuring the weaker, more passive inmates. Feelings of genuine guilt are non-existent as he readily rationalizes his own maladaptive behavior, displacing responsibility for his actions onto others. Usually, he is verbally facile and quite clever in being able to mask his deceitful intent. Thus, he is manipulative, egotistical in the extreme and verbally and physically assaultive. He threatens the successful rehabilitation of other offenders, continually indoctrinating those less sophisticated than he with the idea that "crime does pay."

The START participants are heterogeneous relative to age, type of offense, race, area of residency, etc. The major common element is that they all have repeatedly demonstrated their inability to live in regular penal facilities.

### *Selection Criteria*

Referrals for placement in the START program are initiated at the offender's current institution. A summary of the individual's prior history and level of institutional adjustment is prepared upon which is based a recommendation for consideration. This is reviewed by the Warden at the institution and then forwarded to the Central Office for a further review and final decision. Placement in, and removal from the START program is controlled at the Central Office level.

Selection criteria for placing an offender in the START program are:

1. Will have shown repeated inability to adjust to regular institutional programs—not just minor offenses.
2. While he may have an escape history, will have repeatedly displayed other maladaptive behavior.
3. In terms of personality characteristics, will be aggressive, manipulative, resistive to authority, etc.
4. Will have had experience in an adult penitentiary.
5. Will be transferred from the sending institution's segregation unit.
6. Generally, will have a minimum of two years remaining on sentence.
7. Will *not* be overtly psychotic (such individuals are appropriate referrals to the Medical Center's psychiatric program).
8. Will not have participated in START program in past.

The narrative justification in support of the transfer into the START program is reviewed in terms of the degree to which the offender fulfills the selection criteria. In making this judgment, additional material is reviewed (such as that contained in the offender's Central Office folder) in order to gain as clear a picture as possible of the individual being considered.

### *Physical Characteristics of Unit*

The START Program is located physically and operates functionally, as a semi-autonomous section of the Springfield Medical Center. It is situated at the end of a maximum security building within the general psychiatric hospital. The living quarters consist of a double tier of cells along the east and west walls. There are 40 individual rooms; however, in order for the unit to function at maximum efficiency, no more than 30-35 will be used at any one time.

The cell block housing the START unit is in the extreme west end of the building. It is reached by passing through two locked corridor grills, one of which is electrically operated. A third grill can be locked if it is deemed necessary. The corridor area in front of the unit contains two adequately sized rooms (on the south side) which can be used for recreation day room activities. Immediately south of the unit entrance is a large room which houses the START industrial operation: a brush factory. This affords START participants not only the opportunity to learn and display good work habits, but also each individual can earn industrial pay and industrial "good time" (time off his sentence) which is in addition to statutory good time.

Outdoor recreation activities occur in a yard area immediately east of the unit or in a larger area to the north. This latter area is separated by a wall from the area used by the psychiatric patients. Although the Medical Center's psychiatric units are immediately east (off the same corridor) of the START unit, the psychiatric patients are restricted to their wards and there is no interaction between the two types of individuals.

### *Staff*

The staff in the START unit has been increased from the number that would ordinarily service this ward. It consists of professionally trained personnel familiar with the personality characteristics of this type offender. Personnel are selected who cannot be manipulated easily and who have a clear understanding of established rules and regulations. They cannot hesitate in direct confrontations. If disciplinary action is warranted, they act fairly and decisively. Modes of expected behavior are "modeled" in interactions between staff and participants. Expected behavior is clearly defined so that there is little chance for misunderstanding.

Since the offenders assigned to Project START are highly aggressive, with histories of assaults on both staff and other inmates, a larger than usual number of staff are needed. Duty times have been arranged so that there are at least three permanent staff on the unit any time that START participants are out of their rooms. The presence of these personnel forestall overt, hostile actions.

Personnel assigned full-time to the unit include a Unit Manager (a Correctional Treatment Specialist), and Assistant Unit Manager (a Ph.D. Psychologist), one Correctional Officer on each shift around the clock, one additional Correctional Officer on both the day and evening shifts, one Correctional Counselor, and one Industrial Specialist.

A number of additional specialists spend part of their on-duty time working with the START program. These include: the chaplain, a caseworker, a general practice physician, a physician's assistant, an occupational therapist, and an educational specialist. All medical and related services are provided on the unit except in emergency situations when the participant may be moved to locked quarters in the hospital until the emergency situation has abated and he can be returned to the START unit.

### *Progression (level) System*

A treatment procedure that has proven effective in other institutions (e.g., the Morgantown Youth Center and the Yardville Reception Center) has been a progression system. This consists of a number of levels which differ as to the responsibilities required and the privileges allowed. Residents begin at the lowest level and progress through successive levels as their behavior improves. If the individual fails to meet his responsibilities at any of the levels, he remains there until he can demonstrate the appropriate behavior; flagrant violations of the rules can result in demotion. When a participant reaches the highest level he has demonstrated a consistent ability to maintain the type of behavior which will permit him to return to a regular institution. At that time a conference is held with the participant and a decision reached as to which facility he shall be transferred. (Individuals who do not "graduate" are returned to the institution from which they were initially referred to START).

The current system has eight levels. The responsibilities and privileges associated with each level increase as the participant displays his ability to "handle" this type of responsibility. At the lowest level, the offender is allowed only basic personal articles, little time out of his cell, and limited exercise (in accord with the standards established in Bureau Policy on inmate discipline; see attached). These conditions differ very little from the lockup conditions from which the START participants have been transferred. At the lowest level, the participant will be expected to keep his room neat, maintain his personal hygiene, and show at least a minimal level of cooperation. To earn the opportunity to move to Level II, the resident must meet certain criteria. (See Table 1).

TABLE 1—MOVEMENT CRITERIA

#### *Levels and Time Scale*

Orientation, 1 week.

Level I, Good Days—20.

Level II, Good Days—25.

Level III, Good Days—30.

Level IV, Good Days—30+7 consecutive in last 10 days.

Level V, Good Days—30+10 consecutive in last 15 days.

Level VI, Good Days—30+14 consecutive in last 20 days.

Level VII, Good Days—30+20 consecutive in last 25 days.

Level VIII, Transfer.

When the resident reaches Level II, he is expected to remain cooperative, maintain his room, and continue his personal care. His performance in these areas will be continually observed. While at this level, he will have increased privileges, but there are also increased responsibilities. The Level II individual is expected to pursue the educational and treatment goals that he and the START Treatment Team have together established. He is also expected to work helping to maintain the sanitation of the START unit; he is given a limited

opportunity to work (and earn industrial pay and industrial "good time") in the industry program.

When the man reaches Level III, his amount of time outside his cell has greatly increased and he is given the opportunity to spend more time in industry. In addition to the sub-goals of Level II, he is expected to work towards the completion of his treatment goals. In similar fashion, the individual moves through the eight levels.

Other rewards which accrue to those who move up through the levels include: the return of forfeited good time (25% returned at Level V; 50% returned at Level VII; the remainder returned when the individual is transferred back to a regular institution); increased time in industry (Levels I-VI, ½ day; Levels VII and VIII, full day; increase in industrial "pay" in accord with the regular institution's industrial pay scale; further, the participant receives industrial good time, which means additional time off his sentence; individuals at Levels I through V will be on the point system; Levels VI through VIII, the inmates will be on a contract system (see attached description).

The criteria for movement are shown in Table 1. It centers around the concept of a "Good Day." This involves a daily measure of behavior in twelve areas of responsible behavior which incorporate the three sub-goals of the START program; personal care and hygiene, adequacy of interactions with others, level of work behavior. Each of the twelve areas (see Table 2) are observed and daily, one of three marks is placed on a check sheet: a symbol for acceptable performance, a symbol for unacceptable performance, and a symbol which indicates those areas in which the individual had no opportunity to perform on a specific day. Following the principle of the progressive level system, the criterion for a "good day" is also on a graduated scale (see Table 3).

#### *Treatment Approach*

The START program was developed to help an individual change those aspects of his behavior which are maladaptive. The task presented to the START staff was to find a means which would result in the decreased occurrence of these destructive behaviors. To accomplish this goal, certain basic principles of behavior modification were adapted. The underlying theme of the START program is to reward constructive behavior. If appropriate behavior is rewarded, the likelihood of it happening again is increased; conversely, if unacceptable behavior is not rewarded (i.e., not attended to) the likelihood of it re-occurring is reduced.

TABLE 2—"GOOD DAY" CRITERIA

1. Willingness to participate; e.g.
  - a. Accepted work assignment.
  - b. Vacated room when opportunity available.
  - c. Served self from food cart.
  - d. Agreed to medical exam and laboratory test upon admission and/or request.
2. Neat and clean room appearance.
3. Neat and clean personal appearance.
4. Shower and shave according to guidelines on designated days.
5. Engaged in exercise or recreation activities; e.g.
  - a. Vacated room.
  - b. Went to yard or day room.
6. Accepted a "no" or other reasonable response when making requests. Made requests in a non-abusive manner.
7. Communicated with others in a reasonable tone of voice without belittling, agitating, or using abusive language.
8. Accepted or performed assignments, duties, or tasks without needing persuasion.
9. Followed directions and instructions in a willing manner without bickering.
10. Followed rules, regulations, and policies of unit.
11. Used care in handling federal property.
12. Settled differences without fighting, wrestling, striking, or other overt, physically aggressive acts towards another person.

Non-earning of a "Good Day" necessitates a note in resident's file.

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TABLE 3—GUIDELINE FOR EARNING A "GOOD DAY"

- Level I, 9 out of the 12 acceptable areas.
- Level II, 10 out of the 12 acceptable areas.
- Level III, 11 out of the 12 acceptable areas.
- Levels IV thru VIII, 12 out of the 12 acceptable areas.

Within the START Program two types of positive reinforcements or rewards will be used. The *first* is a medium of exchange; namely, points. Upon completion of an adaptive or constructive task or behavior, the individual will be rewarded by the presentation of a specified number of points. These points, in turn, may be exchanged for a variety of additional privileges: ordering commissary, cigarettes, making collect phone calls, buying personal items, special privileges, etc. The *second* type of reward is social reinforcement. Generally, social reinforcement is the method of communication which is commonly used every day; e.g., smiles, statements with a positive meaning (i.e., "good"), and the general accepting mood of the reinforcing person. Communication is considered a reinforcer because it provides the individual feedback as to whether he is performing correctly or incorrectly. Since research has demonstrated that rewards are more effective behavior motivators, both the point system and the social rewards system will stress positive reinforcement. (A more detailed description of the START point system is appended).

Being awarded or exchanging points naturally leads the START participant into interactions with the staff members. Through such a mechanism as this, the staff begins to appear more positive to the inmate than the usual negative role in which offenders cast them. This opens the way for social contact, thus, active counseling (which had been ineffective in the past) can now be more meaningful.

A second theme underlying the START program is that participants have a freedom of choice. Inmates will not be forced to work, keep themselves or their living areas clean, or engage in any behavior against their will except insofar as this freedom does not interfere with the rights and well being of others. This does not mean that behavior will not be prompted. It is unrealistic to expect all individuals to perform appropriately the first time they are presented with a situation. It is desirable for a staff member to ask a participant in a positive manner to act in accordance with the unit routine; however, it is not appropriate to threaten or coerce the individual.

As has always been the case, disruptive behavior will not be condoned. If an offender engages in such behavior, he will be placed in his room. When this happens, the individual will not have the opportunity to earn or spend points, nor can he earn a Good Day. In essence, when the Unit staff locks a participant in his room, they are indicating that the person cannot control himself. His removal continues until he shows by a change in his behavior, that he can now control himself. At that time, he can leave his room and resume participation in the program; he no longer needs someone else to control his inappropriate behavior for him.

A third central theme around which the START unit was developed is individualizing treatment. While the program does have a structure within which its participants must function, effort has been made to permit an individualization of the treatment approach. The START Treatment Team will, with the individual, develop a treatment program to fit his needs (e.g., academic or social education, recreation, counseling, etc.) Further, in addition to the point system, individually designed contracts will be used in which the inmate and the Treatment Team agree that if a particular participant accomplishes a task specifically designed to meet his needs, he will receive a specified number of points. At a later stage (from Level VI onward) the points will be eliminated and contracts will be written directly in terms of desired items.

The START Team will make every effort to deal with each of the inmates as an individual. A continuing stress will be placed on treating each with dignity and humanness. The staff will be expected to model the type of behavior being required from the participants. Each man in the program will be treated like a man; since it appears to be a truism that people generally behave as they anticipate others expect them to behave.

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### *Discipline*

Despite efforts to prevent such occurrences, disciplinary problems will occur. In line with the behavior modification principle that the participant should be fully aware of the contingencies in a given situation, an effort has been made to spell out disciplinary procedures.

Of those offenses listed in the Bureau of Prisons' Policy Statement on Inmate Discipline, the START program is particularly concerned about those noted in Table 4. Based on current experience and prior history, these kinds of activities can lead individuals into a continuation of previous adjustment problems in an institutional setting. Consequently, the START program will be particularly interested in trying to help participants eliminate this type of behavior.

For the most part, violations of START program regulations will result in the participant being confined in his room for a specified period of time set by the Unit Team. Following the completion of this restriction period, the individual presents a request to return to normal program participation. If the Unit Team agrees, he returns to the program. If the Unit Team does not agree (because the offender has continued to be disruptive) he will be told why he must continue in time out status and when he will next be reviewed. (As a "rule of thumb," he must be reviewed no later than the time designated for the original offense; i.e., if the rule violation resulted in 3 days restriction, then a review must occur before three more days).

During this control period, the individual will: not lose points previously earned; will not be able to earn points; will not be able to spend points previously earned. He will not be able to earn a Good Day either on the day the violation occurred, or while he is in "time out" status. During the restriction period, the standards for segregation unit practices will be followed as detailed in Bureau of Prisons' policies. In all matters related to the handling of disciplinary problems, the Unit Team will make the final decisions within the guidelines established by Bureau of Prisons' policies. Appeals for a review of the Team decision can be made by a participant in accordance with institutional and Bureau policies.

TABLE 4—VIOLATIONS OF START PROGRAM PROCEDURE

1. Gambling.
2. Excessive use of abusive language after first warning.
3. Agitation of others without stopping after first warning.
4. Excessive arguing with another participant or staff member after first warning.
5. Disobeying a staff member after first warning.
6. Fight between two or more individuals.
  - a. Instigator or agitator.
  - b. Victim.
  - c. Start of fight not observed by staff (same for all).
7. Stealing of any type, including coercion, strong-arming, or extortion.
8. Physically threatening another inmate or staff member.
9. \*Deliberate destruction of federal property.
10. \*Use of weapon in an incident.
11. \*Overt physical action towards another participant resulting in victim requiring medication or removal from unit.
12. \*Overt physical action resulting in injury of staff member.

### *Conclusion*

The START program is not viewed as a panacea. Rather, it is a treatment alternative when repeated efforts with other types of approaches have not had any beneficial results. Individuals who demonstrate after a significant trial period in the program—not longer than one year—that START is not helping them, will be returned to the sending institution.

\*Depending upon the severity of the incident, any one or several of the following may be imposed by the Unit Team: restriction of two weeks or more; reduction in level including return to Level 1; recommend forfeiture of good time; refer for criminal prosecution.

The following is the first paragraph of the handbook given to new participants in the START program:

"The START Program at the Medical Center for Federal Prisoners is designed to assist you in changing your current way of behaving within the Federal Prison System. To be considered for the program you must have spent considerable time in segregation for one reason or another. This is a miserable type of existence; the START Program is designed to help you learn to live more successfully in a regular institutional program, and to help better prepare you for release from custody. We, in the Federal Government, have not sent you to prison; by Law, we have been given the responsibility of your custody after you have been sentenced by the Federal Courts. We have also been given the responsibility to establish a program in which you can still live by your principles and beliefs, but learn to express them in a less destructive manner than has been the case in the past."

### START PROGRAM--POINT SYSTEM

The point system is designed to provide the START participant with immediate feedback as to the appropriateness of his behavior. The system involves: (1) the awarding of points for appropriate behavior; and (2) the creation of an exchange rate for desired items. The earning scale and exchange rate will be published and made known to all START participants.

#### *Earning Points*

START inmates at Levels I through V will receive immediate tangible feedback (points) following their performing in an adaptive manner. Points can be earned for classes of behavior including personal hygiene, work tasks, adaptive social interaction, and engaging in self-improvement tasks. Each class of behavior is sub-divided into specific behaviors for which points will be awarded at a pre-determined rate.

A further group of behaviors (which are individually specified for a particular inmate) will be rewarded on a contractual basis. That is, the participant and the staff member will negotiate a special contract which will require that the individual behave in a certain way in order to earn a specified number of points (e.g., asking an "isolated" participant to engage in a table game with a different START inmate for five days in order to earn 500 points).

#### *Spending Points*

The points which a participant earns can be exchanged for a variety of items: personal comfort items, recreational, edible, communication, etc. The initial list was drawn from other programs, discussions with inmates and staff members, and observation as to what kinds of things offenders request. The list is not all inclusive (it can be expanded at any time) since some of the strongest reinforcers will be those suggested by the inmates themselves. The point-exchange rate will be set by the START Unit staff.

Items will be available in the Unit "store" which will be open several times each day. Rented items will be available several times each week on a scheduled basis.

Details of the point system are contained in the following tables:

#### *Rules and Procedures Governing Point Cards*

1. Each card will show the individual's name and date of issue.
2. Each card holds a maximum of 500 points.
3. A card completely punched will be returned to the staff.
4. Cards should be kept on the person and not left lying around.
5. A card which is destroyed or lost cannot be replaced unless staff can validate that the card was accidentally destroyed or lost.

#### *Guidelines for Distributing Points*

1. Individual is given points contingent upon the completion of the designated response.

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2. Individual presents his card to the staff at the appointed area.
3. Staff stamps the card the number of times as designated on the Point Earning Sheet or according to the terms of an individual behavioral contract.
4. Individual keeps the card(s) in his possession.
5. Individual is given a new card:
  - a. Complete filling of an existing card.
  - b. In the event of a lost or destroyed card.

#### *Guidelines for Spending Points*

1. Individual presents card to staff requesting the purchase of an item, privilege, or rental.
2. All items, privileges, and rentals will be exchanged at a pre-determined rate or cost.
3. Two specific days will be the only rental periods unless otherwise specified.
4. The unit store will be open several times daily.
5. Other items will be purchased at pre-arranged periods.
6. Points are spent once a hole is punched through the number.
7. Point card must be returned to staff after it is completely punched.

#### **POINT EARNING SHEET**

##### *Behaviors*

(See list of Behavior Requirements)

- (1) Shower on assigned day.
- (2) Shave on assigned day.
- (3) Haircut.
- (4) Personal appearance.
- (5) Room appearance.
- (6) Orderly assignment.
- (7) Industry per ½ day.
- (8) Special assignment.
- (9) Physical exercise.
- (10) Good Day.

##### *Point earning on a contractual basis*

Performance on educational course.  
 Performance on preparation for GED.  
 Paper written on specific topic.  
 Performance on self-improvement course.  
 Performance on written contract with Team.  
 Acquiring typing skills.

#### **BEHAVIORAL REQUIREMENTS**

##### *Shower, shave, and haircut*

1. Accept appropriate toilet articles.
2. Move to area designed for hygiene use.
3. Perform hygiene activity in accordance with Medical Center Policy.
4. Return toilet articles to appropriate person or place.

##### *Personal appearance*

In regard to expected behavior in this area, START participants will be expected to conform their behavior to Bureau and Medical Center policy as to generally acceptable standards. For example: shoes tied, if applicable; pants zipped or buttoned; shirt buttoned, if applicable; shirt tail inside pants; hair combed so that it is not unmanageable or unkempt (see Policy Statement 7300.04—Mustaches, Sideburns, and Hair for Male Inmates); and other areas of general appearance neat.

##### *Room appearance*

1. Bed made in accordance with Medical Center Policy.
2. Floor swept and mopped, when cleaning materials available.
3. Walls clean and used according to Policy.
4. Toilet and sink clean with items neatly placed.
5. Metal Cabinet.
- a. Items on top neatly arranged.



- b. Items on shelves arranged in a reasonable order.
6. Items on window sill neatly arranged.
7. Other areas clean and items placed neatly.

#### *Orderly assignment*

1. Accept designated area (s) to be cleaned without bickering.
2. Acquire necessary cleaning materials.
3. Clean designated area.
4. Return and neatly arrange cleaning materials.

#### *Industry*

1. Move to the industrial room.
2. Accept industry assignment(s) without controversy.
3. Perform industry assignment.
4. Clean industry area according to direction of industrial foreman.
5. Return to unit living area.

#### *Special assignment*

1. Accept special assignment without becoming abusive.
2. Perform special assignment.

Individuals may earn points through performing a work task to which they are not normally assigned. The individual and staff member must agree on a set rate or earning before the task is performed. The rate is not to exceed 50 points per hour for work unless designated by the Unit Manager.

#### POINT EXCHANGE RATE

##### *Store Items*

- Fresh fruit.
- Tobacco and paper.
- Packs of matches.
- Pencil.
- Paper (5 regular sheets).
- Coffee or juice.
- Cereal.
- Ballpoint pen.
- Calendar.
- Learning Center newspaper or periodical.
- Games and arts and crafts items.
- Puzzles and cardboard (rent).

##### *Rental Items*

- Institutional radio per week.
- Own radio per week.
- Recreational equipment per day.
- Private chair in own room per week.
- Own musical instrument per week.
- Other personal property per week.

##### *Other exchange Items*

- Commissary items.
- Ordering hometown newspaper.
- Notarizing by case manager outside regular time.
- Collect telephone calls home (limit 2 per month).
- Ordering periodical subscription.
- Photograph of self.
- Shower and/or shave above weekly rate.
- Ordering personal books.

[Item 11.B.3]

FEDERAL CENTER FOR CORRECTIONAL RESEARCH, FEDERAL BUREAU OF PRISONS,  
BUTNER, N.C.

[Item 11.B.3.a]

PROGRAM DESCRIPTION, AUGUST 22, 1972

The Federal Center for Correctional Research will be a unique facility in the Federal correctional system, specializing in long-term research on the treatment and management of various types of offenders. The Center will study and treat

selected subgroups of offenders in an attempt to devise effective treatment programs which can be adopted by other correctional facilities.

The "correctional program research" units, housing about 190 persons, will attempt to develop programs for offenders, such as minority groups, and subgroups like alcoholic felons, overly passive follower types, and various other groups. These inmates will be at Butner for a period of intensive study and treatment in an effort to determine what kind of correctional program is effective with each type of offender. A system for monitoring results during the treatment period will be devised and the evaluations of these studies will be published.

A "mental health research" program will care for a population of about 35 young men, 35 women, and 60 adult men who are in the acute phase of mental disturbance. The objective of the research program will be to develop and implement intensive treatment approaches for mentally disturbed patients who constitute a management problem. The treatment effort will attempt to stabilize these special cases so they can be returned as quickly as possible to the sending institution to resume their correctional treatment.

Various treatment approaches will be used in the semi-autonomous housing units including group therapy, individual counseling, specialized education, vocational programs, social services and leisure-time activities. However, shared activities will be provided in a central area—small chapel, canteen, dining hall, indoor and outdoor recreation, auditorium and clinic. This "Community Green" will resemble a town center where residents and visitors can associate in an atmosphere as normalized as possible.

The location of the Center makes possible a close working relationship with the medical schools and universities in the Raleigh-Durham-Chapel Hill "Research Triangle" area. Staff members of these organizations, as well as representatives of the National Institute of Mental Health, the Department of Health, Education, and Welfare, and the National and North Carolina Advisory Panels to the Bureau of Prisons have assisted the Bureau planning staff in developing the programs and architectural design for the facility.

Instead of a traditional institution, the facility will have a more psychologically pleasing character, designed to be adaptable to changing research procedures. Rather than guard towers, underground electronic detection systems together with a mobile vehicular patrol will be used for more effective perimeter security. Special windows of a special plastic and glass laminate with a built in alarm will furnish better and more economical security as well as providing a better therapeutic environment.

The architectural firm is Middleton, Wilkerson, McMillan of Charlotte, North Carolina, who will also provide construction management services for the project.

#### *Capacity*

Mental Health Research—38 Youth—Male; 64 Adult—Male; 38 Female.

Correctional Research—200.

Maintenance Cadre—40.

Infirmery—8.

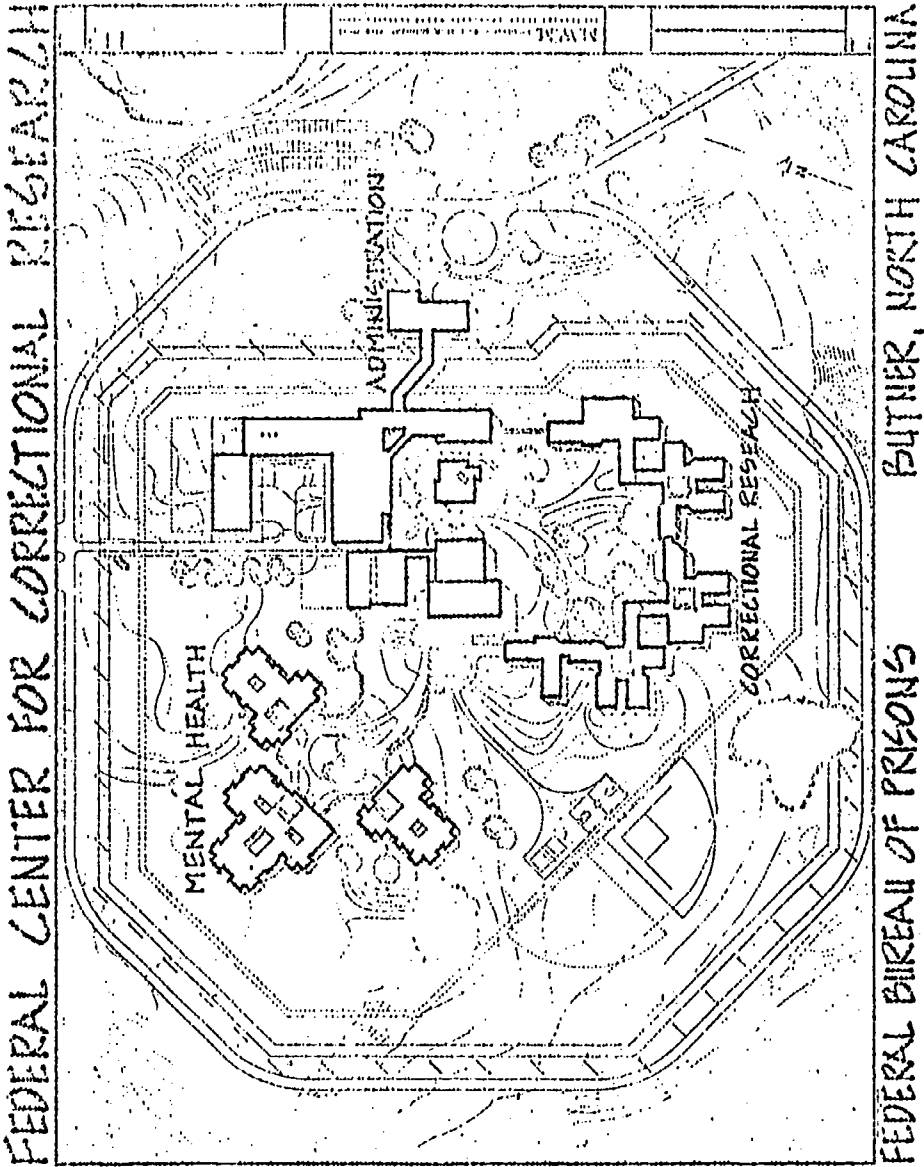
Total beds—388.

Square Footage—235,000.

Area Inside Fence—42 acres.

Construction Start—June 1972.

Construction Finish—February 1974.



.[Item 11.B.3.b]

## REVISED PROGRAM DESCRIPTION, APRIL, 1973

The Federal Center for Correctional Research, now under construction, will be a unique facility in the federal correctional system to provide intensive care to acutely disturbed inmates in a 140 bed mental health unit. It also will focus on long term research for management and treatment of various types of offenders in four 50-bed Behavioral Sciences Units. Here, the Center will study and treat selected subgroups of offenders to devise effective treatment programs, many of which can be adopted by other correctional institutions.

## MENTAL HEALTH UNITS

These units are designed to provide intensive care for a federal offender population of 38 women, 38 male youth, and 64 adult males who are in the acute phase of mental disturbance.

The objective of these programs will be to develop and implement intensive treatment approaches for psychotic and borderline psychotic patients who constitute a treatment and management problem beyond the capacities of other correctional institutions in the area east of the Mississippi. The objective will be to stabilize these special treatment cases so they can be returned as quickly as possible to the sending institution to resume their correctional treatment program. Most patients will be at Butner for a six to nine month duration. Patients who show little or no progress after eighteen months would be transferred to the Medical Center for Federal Prisoners at Springfield, Missouri for treatment appropriate for more chronic psychiatric disturbance.

While effective treatment of Butner's psychiatric patients will be a prime goal, the program will be carefully monitored and evaluated to study the relative effectiveness of different treatment techniques.

## BEHAVIORAL SCIENCES RESEARCH UNITS

The behavioral sciences research units will attempt to develop more effective programs for various types of offenders. Population will be selected mostly from offenders in the general federal prison population claiming legal residence east of the Mississippi.

Inmates will participate in programs during a nine to twelve month period of intensive study and treatment to determine what kinds of correctional programs are effective with varying types of offenders under differing conditions.

The planning and design of treatment programs will continue to draw heavily on the research capabilities of nearby universities in the Raleigh-Durham-Chapel Hill area. Results will be monitored, published and made available to correctional administrators at local, state, and federal levels.

## TRAINING

In developing more effective correctional programs, the Bureau places the highest priority on training and development of staff. The Butner program will have an integrated training program to develop more skilled staff not only for federal programs, but also for state and local programs. Program development has already begun with universities in the area, including Duke, North Carolina, North Carolina State and East Carolina State, to train university students in correctional techniques. Collaboration with the universities will range from residency training programs for Ph.D. candidates to students working for Masters and Bachelors degrees, to short-term training for more specific programs, such as unit managers.

## THE PHYSICAL PLANT

Instead of a traditional institution, the facility will have a more psychologically pleasing character, designed to be adaptable to changing research procedures. Rather than guard towers, underground electronic detection systems together with a mobile vehicular patrol will be used for more effective perimeter security. Windows of a special plastic and glass laminate with a built-in alarm will furnish better and more economical security as well as providing a better therapeutic environment.

The architectural firm is Middleton, Wilkerson, McMillan of Charlotte, North Carolina who are also providing construction management services for the project.

Total capacity is 388 beds.

Scheduled completion is April 1974.

[Item 11.10.3.c]

## PROGRAM MASTER PLAN--SUMMER 1973

### Foreword

This is a revised but still preliminary and incomplete version of the Program Master Plan. We can expect a new version every thirty to ninety days as program and research planning and growth continue. Those proposals that are carefully spelled out in detail, however, will remain stable as they have already been, in general, accepted by the planning staff in the Bureau of Prisons.

### SECTION I--INTRODUCTION

#### A. Location

Butner is a very small town in the center of North Carolina with several major state institutions within its boundaries. These include John Umstead Hospital, a mental institution; Murdoch Center, with treatment for retardation; C. A. Dillon School for juvenile delinquents; the Rehabilitation Center for the Blind; the Alcoholic Rehabilitation Center; and a minimum security camp, Umstead Youth Center, which is part of the state correctional system. Aside from the obvious cooperative efforts with these state institutions, the community of Butner carries little in the way of resource. Butner, however, is in close proximity to the "Research Triangle Area" made up of the cities and communities of Durham, Raleigh and Chapel Hill, with each city containing a major college or university, i. e. Duke with a medical school, the University of North Carolina with a medical school and North Carolina State University. There are, in addition, several private colleges and two black universities which provide additional resource services. There is also a formal Research Triangle Park including business institutions, such as IBM, and many pharmaceutical laboratories. It is within this larger community then, already heavily committed to research, that the close working ties will be established.

#### B. Physical Characteristics of the Institution

The Federal Center for Correctional Research is a new institution. Under the direction of the architectural firm of Middleton, Wilkerson and McMillan of Charlotte, North Carolina, construction was begun in June 1972. The capacity is approximately 350 total beds, 235,000 square feet of buildings and 42 acres inside the fence with an anticipated opening in mid 1974. This institution is characterized by seven separate living quarters for inmates with each living unit containing a majority of individual rooms, meeting rooms, staff offices and recreational areas within its boundaries. There are certain other buildings of shared interest including a chapel; gymnasium and recreational area; a support building, housing clothing, commissary, food and barber shop; an educational building; an infirmary; a service structure containing the mechanical services and storeroom; and finally, an administration building which is located outside of the fenced enclosure. This will be a medium security institution with a double fence, underground perimeter security sensing devices, armed vehicular patrols, and replacing the security sash will be a special material, electrically wired for additional security within each unit.

#### C. Key Population Characteristics

1. *Mental Health.*—The three mental health units will be filled by referrals from institutions located in OMB Regions I-IV (east coast) with inmates across RAPS categories in various stages of their sentences.

2. *Correctional Program.*—The correctional program research units will be filled with some sub-segment spectrum of the inmates housed in federal facilities in Regions I-IV. This spectrum will be determined by the research program design.

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#### *D. Organizational Structure and Staffing Patterns*

The anticipated staff of the Federal Center for Correctional Research is 211 positions, representing an inmate-staff ratio of 1.66 to 1. The basic organizational design will be functional participatory management with a functional unit sub-structure. There will be four principal divisions: the administrative services, the correctional program division, the research division and the mental health division. The administrative service is made up of the Warden and his office staff, the personnel office and the business office. The correctional program division is made up of the Associate Warden, Correctional Programs, the four correctional program units, food service, mechanical service, chaplain, correctional coordinator and community coordinator. The research division is made up of the Director of Research, the research coordinators and the record office and data coordination staff. The mental health division is made up of the Associate Warden, Mental Health, the three mental health units, the nursing service coordinator, the safety officer, education coordinator and case management coordinator. The organizational chart and the participatory management committees are located in Appendix B.

#### *E. Statement of Mission*

In the green book entitled "Behavioral Research Center, Butner, N. C.", the mission for the proposed facility was stated as "the treatment of mentally disturbed and violent offenders, for research leading to the management and correction of such behavioral problems, and for staff training in promising treatment techniques for serious deviant behavior". The method of actualizing this mission includes the following two mission statements:

1. *Mental health.*—The Mental Health Units will provide excellent acute and/or specialized treatment and/or forensic services for psychiatrically ill offenders from Region I—IV in all stages of their sentences. This program will be conducted in the context of a research setting to find increasingly effective methods of referral, evaluation, treatment and aftercare.

2. *Correctional Program.*—The Correctional Program Units shall, in an initial integrated design, test the best correctional and treatment modalities available in such a way as to provide usable and transferable models for other correctional settings (federal, state, local), these models to be fully researched in a prospective, longitudinal manner with full follow-up. The institution shall provide at least part of the initial training for such transfer of program models.

### SECTION II—PROGRAM PRINCIPLES

#### *A.1.—General Principles*

1. To provide carefully selected personnel with full training experiences prior to opening and through continuing training post opening so as to maximize actualization of potential. This is not only to provide the Federal Center for Correctional Research with fullest manpower utilization but also recognizes the fact that transferability of programs, mental health and/or research, will require a transfer of knowledgeable, experienced personnel capable of training others.

2. To provide careful, full and accurate record keeping above and beyond the usual for an institution because of our research function.

3. To utilize functional participatory management so that all specifically treatment functions and specifically maintenance functions and mixed functions are carefully integrated into the total program model and the authority for implementation of same is shared by those concerned. This is in order to properly integrate the work load of the institution which would otherwise, through overcentralization, result in inefficiencies of scale and performance.

4. To make proper and complete use of academic and other consultation and involvement of local and national community members and volunteers. An open situation with multiple involvements of outsiders will result in better community relations and a full general understanding of our research function. Moreover, the total environment in the institution will be more normalized by these contacts, especially in conjunction with the most modern policy procedures related to everyday inmate life.

5. To provide an environment that is understandable, reasonably rational and masterable by inmates and staff but is yet not so carefully and detailedly outlined as to have learning in this environment non-transferable to the less than rational outside world.

## A.II.—Specific Principles

### a. Mental Health Units:

1. That each unit (youth, adult male, female) establish clear, cooperative relationships with its small list of referring institutions in Regions I—IV. This will facilitate communication, referral and aftercare processes and general evaluation of the program.

2. That the units provide acute care; this care, in general, consisting of 90-180 days of care with some exceptions. That these units provide for carefully selected cases specialized care lasting longer than 180 days, but in no case should these units provide merely chronic, custodial care.

3. That if one or more universities are cooperative in assisting in the staffing and consulting for forensic work, that one or more of the units maintain a small sub-section for case studies for the United States Judiciary in conjunction with said university. This is in order to open up to the United States Judiciary in Regions I—IV the potentially rich forensic resources of the institution and surrounding academic community without overtaxing program staff.

4. Each unit should, in conjunction and cooperation with its referring institutions, insure that the aftercare provided at said institution is adequate to preserve and enhance the benefit accorded to the inmate during his period of treatment at the Federal Center for Correctional Research. This is in order to prevent the "revolving-door" phenomenon which occurs when the centralized treatment facility efforts are not followed up by adequate aftercare.

5. That such research as would lead to the enhancement and increase in efficiency of method of the curative treatment of psychiatric illness shall be done so as to incrementally improve the services provided by the three mental health units. This is necessary because with all the deficiencies of psychiatric treatment generally the differences between correctional settings and inmates and the general population has resulted in much of general psychiatric knowledge not being easily transferable.

6. These units shall be actively involved with the training of other federal correctional mental health personnel and in the training of mental health personnel generally in the research triangle area and nationally as there is a great dearth of individuals trained both in mental health and corrections.

### b. Correctional Program Research Units:

1. All research programs shall either provide adequate community follow through by aftercare supplementation or not provide it for research control purposes. This necessity is indicated by repeated research findings that institutional improvement without community follow through tends to disappear over a two-year period.

2. Each individual shall have prescribed and shall follow an educational-vocational program with an emphasis on his/her capacity for productive interpersonal relationships. Upon release, he/she shall be prepared to work with a high expectancy of success with a high enough level of skill either to perform on the job and/or have entry level skills for training and with proper preparation of the place providing employment such that their expectancy is positive. This combination of high expectancy, high interpersonal and technical skill and reasonable community acceptance is demonstrated to result in better vocational success.

3. Each individual, post-release, needs an adequate positive social setting. There now exists four such well-established patterns: one is family adjustment, two is the therapeutic community or some other totally involving work setting, such as the military, three are deviant sub-cultures and four is the lower life-style which is only characterologically feasible to a small sub-segment of our population. In general, all inmates who had a family will be encouraged, counseled and given every assistance in maintaining and enhancing this family involvement. The others will be given assistance in methods of operationalizing a family and providing an equivalent social setting during the institutional time and post-release until such family-like involvement is operational.

4. All research programs shall effectively discourage overt and covert antisocial behavior. This will avoid the hypocritical involvement in programs that often saps their strength.

5. Staff and inmates will be required to participate in a joint effort. This will prevent the "we/they" split that typically polarizes and alienates the staff from the inmates.

6. Each program will be required to involve all staff and inmates in its functioning so as to prevent sterile, alienated roles for either staff or inmates.

7. Each program and all the programs together will make every effort to prevent negative cliques from forming in the institution so as to prevent the usual negativistic inmate compound culture which interferes with corrective programming.

8. Each program will be asked to develop its own integrated philosophy so as the members of the program, staff and inmate, have an understandable basis for decision making. This enhances the cooperation and coordination of all parties and appears to result in increased performance.

9. Each program will be asked to include within itself academic and other consultation as an adjunct to its basic program design. This will enhance the reputability and depth of each program without overrelying on academic conceptualizations.

10. Each program will be asked to provide for all the inmates needs and deficiencies that might prevent him from making a successful adjustment in the community. This is to prevent strengthening only specific areas in the inmates personality and technical skills while preserving other major areas of deficiency.

11. Each program will carefully use a variety of categorizing instruments to determine if its methods are more or less appropriate for each specific category but will preferably not use these for prescribing treatment especially in the early stages of the program. This is to prevent premature categorization with self-fulfilling prophecies prior to adequate information gathering and sorting.

12. Each program will have an adequate training program such that those staff that do rotate from program to program are quickly and competently integrated into the program and thus resulting in their getting, over a period of time, a good set of skills in each program area. This is to prevent rotating staff from getting treated as second class citizens and also provide them with a broad base for further promotion and development of their potential alongside of those that may have been employed with a high level of previous skill.

13. Each program staff will participate in the community follow-through for its post-release inmates to at least some extent. This will provide continuity of philosophy and practice and will also provide an interesting and broadening career development opportunity to institutional staff.

14. Preferably each program will harness the social pressure of its various component members for positive goals. These social pressures are a given in institutional situations and need harnessing as they often otherwise go opposite to the goals of programming.

15. The Research Department in its coordination with the programs will provide feedback to the programs as to their performance and as to new data as it comes along in a variety of areas so that the programs may constantly improve themselves, not only from their own natural development but from these inputs. The Research Department will then calibrate for such changes in programs as to be able to maintain the research design which should be so designed as to have this capacity. This will prevent the original research design from becoming a constraint and then a sterile instrument divorced from the actual procedures being followed in the units.

16. Each research program shall follow ethical guidelines to be determined in advance for all programs.

#### *B. Current Implementation*

Research and program planning to date have resulted in the ability to formulate and document the above principles in A. The broad measure of the above's feasibility will be that of whether, in fact, these guidelines and program principles will be practical and useable in operationalizing the institution.

#### *C. Future Implementation*

Increase program planning, community coordination, research staff and operational staff so as to adequately prepare for the institutional start up which will now take only four months total time rather than the original eight months planned due to the longer planning time and more complete staffing. Implementation target, September 1, 1973 pointing toward September 1 to November 1, 1974 opening date. The position responsible for implementation is that of Program Development Coordinator.

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## SECTION III—ASSESSMENT

*A. Mental Health Units—List of Preliminary Proposed Measures*

1. Number of patients referred vs. number of patients accepted. The difference between these two figures is a measure of the degree of our adequate communication to referring institutions.
2. Number of patients accepted who actually receive full treatment as prescribed. This measure would indicate the accuracy of our acceptance and diagnostic procedures vis a vis our ability to provide treatment and motivate patients to accept it.
3. Percentage of patients fully treated who are then transferred to referring institutions, other institutions or community care. This figure should be 100% as policy is not to retain chronic cases.
4. Percentage of cases referred to other institutions as fully treated who require no further in-patient treatment. This measure will represent the lasting effect of our treatment process.
5. Community follow-through as to success of patients when released to the community vis a vis both (a) criminal recidivism, and (b) relapse into mental illness for which they were treated. This will further measure long-term effect of treatment provided.
6. Number of mental health personnel trained for other institutions relative to number hired and/or needing training. This will measure relative input of Butner to mental health efforts of the Bureau of Prisons.
7. Number of employees hired or transferred in with no adequate prior experience or skills in the area of treatment of mental patients who are transferred out, skilled in such areas.
8. Production of scholarly papers in the area of treatment of mental disorders in correctional settings and other pertinent areas.

*Correctional Program Research Units*

1. Number of major research programs instituted at start up of institution.
2. Percentage of research population inmates who can be adequately followed which should preferably be 100% of population plus controls.
3. Percentage of inmates who can be provided programs that follow all the policy guidelines contained in Section II-b. This figure should also be 100%.
4. Each inmate will be carefully evaluated as to his deficiencies in areas that are necessary for community adjustment and success and each program will be measured by its success in eliminating these deficiencies.
5. Percentage of research population inmates that are provided adequate community follow-through.
6. Percentage of research population inmates released from programs who are adequately prepared for employment, their average and mean salary levels, work satisfaction and general level of success.
7. Percentage of research population inmates who are released to an adequate social setting.
8. A variety of measures will be needed to determine the degree to which each type of antisocial behavior is present or not present. For example, whether or not fighting occurs, whether or not exploitation occurs, whether or not gambling occurs, whether or not homosexual behavior occurs, whether or not escape plots occur, etc.
9. A careful analysis will be constantly maintained of the formation, evolution and dissolution of negative cliques.
10. Sociological-type testing will be used to see whether, in fact, there is an integrated philosophy in each program and whether, in fact, it is followed and to what degrees by its various members.
11. A variety of sociological instruments will be used to test the morale and joint effort of the staff and inmates. Also tested will be their positive involvement in programs.
12. Staff rotating in and out of each of the correctional program units will be pre and post tested as to the amount of skills in the specialized areas of the programs that they have learned.
13. We will establish if program staff involvement in community projects, in fact, does enhance performance in any way.
14. With sociological instruments, we will test whether social pressures are, in fact, harnessed to positive goals or not.

15. The number and amount of academic and other consultation will be recorded and some measure of the usefulness and whether or not the useful aspects were implemented will also be made.

16. Each theoretical categorization that is tested will include within it measures of its own reliability and validity.

17. All of the research population and matched controls will be followed for at least two years post release. The outcomes of the research, control and general populations shall be compared by such broad measures as absolute recidivism and other more specific measures yet to be specified.

18. The research department will be required to evaluate its own performance and/or to have a private research team to do same.

19. A long-term measure will be the total number of derivative programs begun in other settings based on one of the models we test, the number implemented, the number successful (see 17 above) and, finally, the number of third generation programs engendered which are also successful.

20. Finally, all programs will be initially carefully evaluated and then continuously evaluated to insure that it stays within the ethical guidelines set. (General comment: Most of the above measures are carefully not over specified at this time, leaving adequate room for further program and research planning and elaboration.)

#### SECTION IV—CURRENT OPERATIONS

Under the guidance of the Division of Planning and Development, with full cooperation of the various Central Office Divisions, and with significant inputs from federal and state institutions and agencies, the Bureau operations have consisted primarily of long-range, broad program development, operational planning, and the initiation of community public relations. The staff consists of a Program Development Coordinator, an Executive Assistant, a personal secretary and an administrative clerk. At the present time, the operations have resulted in the program development principles outlined in Section II, in the development of the staffing and organizational patterns outlined in Section I and in the Appendix, as well as having laid a solid foundation of good relations with the local academic, professional, governmental, business and lay communities. The outlines of a number of important specific projects have been identified for immediate exploration and implementation. These specific projects include but are not limited to aftercare supplementation, increased capabilities for our information system, regionalization of mental health service, in OMB Regions I—IV, identification and review of effective correctional treatment modalities and specification of the unique content of these for training purposes.

#### SECTION V—FUTURE OPERATIONS

The major tasks before us in the next six months are the following:

1. To evaluate the inmate data system and existing information systems as to their ability to accommodate the intended research and to make such appropriate recommendations as may be necessary based on this analysis.

2. To select the four program models for the four correctional program research units to test and complete at least a rough outline of what they will be, how they will operate and what type and number of personnel will be necessary within the total possible complement of 211 for the institution as a whole. Once these are established, to begin to elaborate the manner by which inmates will come into these programs and the manner by which the entire project will be followed with suitable controls.

3. Our new Mental Health Coordinator will elaborate the mental health needs and ability to provide for them of the various institutions in OMB Regions I—IV and prepare a proposal for coordinating these efforts with our mental health programs. During the course of this, he will visit and set up initial coordinative relationships with each of these institutions. He will also develop our mental health training packages and coordinate with academic departments in local universities and assist with mental health recruiting.

4. Our Operational Systems Coordinator will coordinate for us in the Bureau's Washington Office, especially the various program changes that impinge upon the implementation of the Bureau's procedures or, conversely, such Bureau developments as may effect our planning and implementation effort.

5. The Operational Systems Coordinator will also have the responsibility with the aid and assistance of the Community Services Division, Bureau of Prisons, to evaluate the community after care supplementation aspect of the Correctional Program Units.

[Appendix A]

DETAILED POPULATION ANALYSIS

MENTAL HEALTH

We are awaiting a Mental Health Program Coordinator to communicate with each and every institution located in OMB Regions I—IV regarding local evaluation of the number of inmates eligible for referral and the type of aftercare services available at their institution.

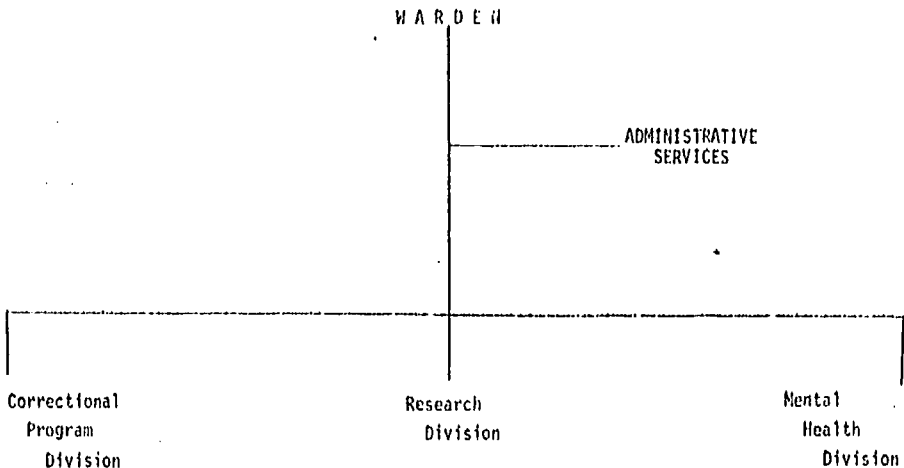
CORRECTIONAL PROGRAM RESEARCH

We have received and are in the process of evaluating the first computer printout categorizing the 11,000 inmates in Regions I—IV broken into various categories of research interest.

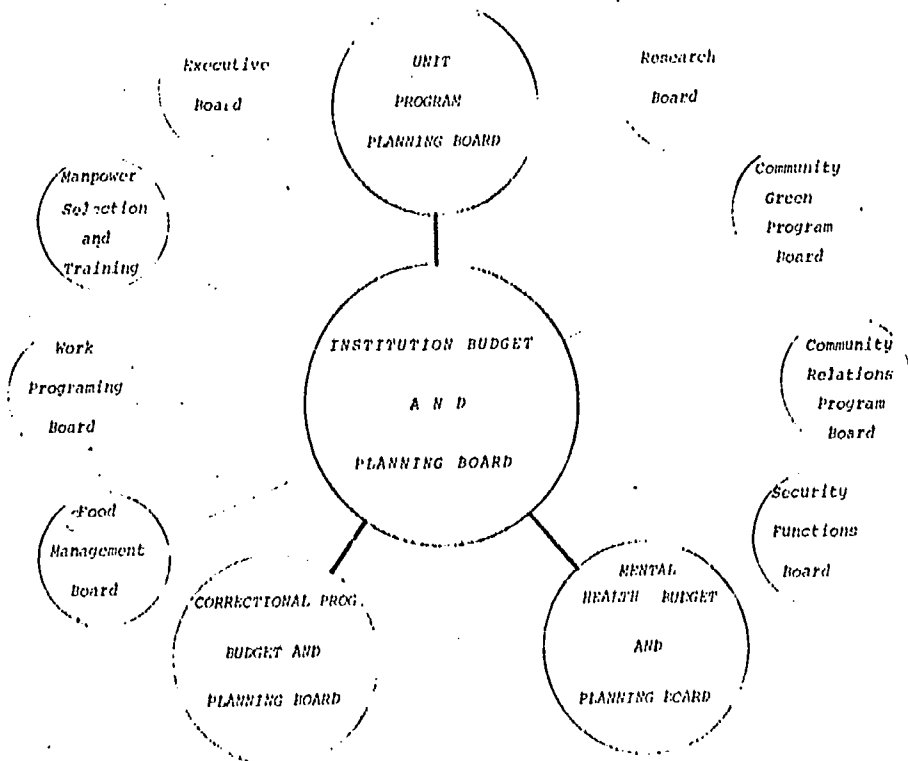
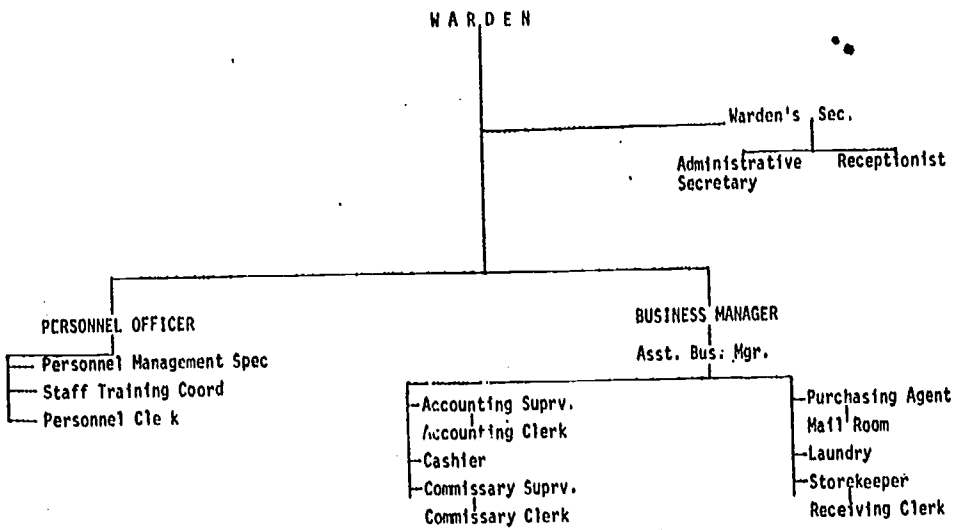
[Appendix B]

ORGANIZATIONAL CHARTS

DEPARTMENT OF JUSTICE  
Bureau of Prisons  
Federal Center for Correctional Research  
Butner, North Carolina



## ADMINISTRATIVE SERVICES



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