

U.S. Department of Justice

Federal Bureau of Prisons

Reentry Services Division Baltimore Residential Reentry Office 302 Sentinel Drive, Suite 200 Annapolis Junction, MD 20701

August 30, 2018

Montgomery County Pre-Release Center

ATTN: Angela Talley, Director

11561 Nebel Street Rockville, MD 20852

RE: Full Monitoring Inspection

August 21-22,2018

Contract No: IGA-869-13 (2AF)

Dear Ms. Talley:

The purpose of this letter is to convey the findings of the Interim Monitoring conducted August 21-22, 2018 at your Residential Reentry Center in Rockville, MD. The monitoring was conducted by Phelicia Taplin, Residential Reentry Contract Oversight Specialist and myself.

There were no deficiencies and no advise items cited during the previous Interim Monitoring conducted on May 9, 2018. There were no new deficiencies or advise items identified during this inspection.

Congratulations on your monitoring. I appreciate the cooperation received during this inspection. All staff were extremely responsive and professional. You can consider this monitoring officially closed.

Please call me with any questions or concerns at at 301-317-3149 or Phelicia Taplin at 301-317-3283.

Sincerely,

Benjie Pittman

Residential Reentry Manager

Cc: Contracting Officer

Eastern Sector Managment



FEDERAL BUREAU OF PRISONS Residential Reentry Center FULL MONITORING RESULTS

1. Contractor Name:	2. Date and Type of Last Monitoring:	
Montgomery County Pre-Release Center	May 9, 2018 Interim Monitoring	
3. Facility Name: Montgomery County Pre-Release Center	Contract Number: IGA-869-13 Expiration Date: 09/30/2020 Loc Code: CBR 2AF	
Address: 11561 Nebel Street Rockville, MD 20852	Type Use: Moderate Bed Capacity for Federal Offenders: Quota: 30 Max Cap: 38	
Director: Angela Talley	Average ADP Last 6 months: 9.75 Average H/C ADP Last 6 months: .84 Average H/C Percentage: 0%	
4. Current Population FBOP State and Local USPO Pre-trial	116 9 107 1 0	
Other agencies this contractor performs service for are:	USPO D/MD, Montgomery County Dept of Corrections, Maryland Dept of Corrections	
5. Inspection Team (Name & Job Title)	Benjie Pittman, RRM Phelicia Taplin, RRCOS	
6. Prepared by: Phelicia Taplin Date: 8 130 18	Reviewed by: Benjie Pittman Date:	
Signature: Holeic applin	Signature: \$ 30 Y	

<u>NOTE</u>: This instrument requires working papers which clearly support how the findings in each area were determined. Attach additional sheets as necessary for Discussion/Findings.

<u>Team Member Name</u> Benjie Pittman Phelicia Taplin	Arrival Date/Time 08/21/18 @ 09:00 a.m. 08/22/18 @ 09:00 a.m.	<u>Departure Date/Time</u> 08/21/18 @ 2:00 p.m. 08/22/18 @ 2:00 p.m.
Phelicia Taplin NOTE: One shift was covered as a result of time constraints. This contractor has been operating without any	08/22/18 @ 09:00 a.m.	08/22/18 @ 1:30 p.m.
deficiencies during the last two monitorings.		

8. ACCOUNTABILITY

The statement of work requires the contractor to maintain offender accountability 24 hours a day, 7 days a week. Briefly describe the accountability procedures in place to meet this requirement. Under each section, examples of pertinent procedures are listed. Your description should include, but not be limited to those procedures.

In the facility:

(Counts, assuring offenders adhere to curfew, sign in/out procedures and controlled access to the facility, etc.)

Once during each shift residents are physically counted by a Resident Supervisor staff member, while in the facility. Counts are recorded in a daily log book. Counts are reported to the Montgomery County DOC daily. All offenders are required to punch in and out at the facility, on a time clock. Offenders must have an approved itinerary before leaving the facility. There are no concerns with offender accountability at the Montgomery County Pre-Release Center (MCPRC).

While at work:

(Notifying the employer of the offender's legal status, verifying employment, random checks at place of employment (to include home confinement offenders), etc.)

The employer is informed of the offender's status as a federal resident and the accountability requirements of the MCPRC, prior to an offender securing employment. Job site visits are conducted within the first 14 days of an offender's employment. The Work Release Coordinator conducts job checks and maintains accountability records for offenders at work. To ensure accurate and proper accountability, residents are not permitted to work for family members. MCPRC staff contact offenders at work daily, once per shift, at random times for accountability. Offenders call the RRC when arriving and departing their work place.

On home confinement:

(Random on-site visits, daily facility contacts by the residents, residents reporting to facility for program plan revisions, treatment and/or testing when scheduled, etc.)

The R3M system was updated in a timely manner for residents reporting the MCPRC and participating in the home confinement component. Montgomery County Pre-Release Center utilize in-house electronic monitoring devices to monitor offenders on home confinement. Currently, there was one federal offender on home confinement. While on home confinement offenders wear an electronic monitoring unit for accountability. Random on-site visits are conducted monthly at the offender's residence while on home confinement. Staff call offenders on home confinement at random times during each shift. Offenders are required to call in when they leave and return home. Offenders report to the facility for programming and urine screening and testing.

On social passes and authorized absences:

(Proper authorization of passes, eligibility determination, the time frames for starting and ending a pass, on-site verification of the requested pass location, random contacts made to the pass location, procedures to verify attendance at religious services, etc.)

All offender home pass sites are inspected by either MCPRC staff or the U.S. Probation Office staff prior to an offender going there. Host/Sponsors are also required to be interviewed by MCPRC staff prior to offenders being allowed to take a pass to their residence. Offenders may take two hour passes to local stores to purchase toiletries and clothing items. They also may take recreation passes and passes to attend counseling in the community. Offenders are called once every eight hours at random times while on home pass. This is documented on a pass card in the offender's file. Passes are properly authorized. Time frames for starting and ending passes are documented. All required information is contained on the pass form. Offenders attending church services are required to provide staff with a program/bulletin from each service attend. This documentation is maintained in the offender's file. No deficiencies were noted in this area.

On employment search:

(Verifying resident itineraries, random contacts to possible employment sites, time frames granted for employment searches, etc.)

Offenders must complete an itinerary, which is approved by the supervising staff prior to going on job interviews. All interviews must be approved by MCPRC staff and coordinated through the Work Release Coordinator. Employment Agreement forms should be completed and maintained in the file. Offenders may only leave the MCPRC for the period needed to provide resumes and applications to potential employers. Staff make random calls to verify signatures from prospective employers listed on the job search itineraries. All policies and procedures were followed to locator the resident at work to ensure proper accountability.

NARRATIVE:

Provide a brief overview of the strengths and deficiencies of the overall accountability program. (This overview should explain how and why these procedures are strong or deficient and to what extent. This overview should be no longer than a paragraph [3-5 sentences].)

There were no deficiencies noted in this area. Documentation verified that offenders are properly accounted for while on pass, home confinement, and at work. Home, pass, and job site visits are conducted in a timely manner. Nine offender files were reviewed and no deficiencies were noted in accountability. The Pre-Release Center had only four (4) escapes from the facility this year. All escapes were recaptured and forwarded for criminal prosecution. PRRS had 4% of offenders that were revoked from the program.

9. PROGRAMS

The contractor is responsible for assessing the needs of each offender and providing programs that will assist in their reentry into the community. What procedures are in place to accomplish these goals?

Intake:

(Offender assessments, physicals completed timely, required paperwork including fingerprints completed and submitted timely, etc. Was information solicited from the offender concerning his mental status, prescribed medications, and general health?)

Information is solicited during intake regarding health concerns. Offenders are given an intake physical within two weeks of arrival. Documentation indicates that orientation is completed in a timely manner after the offender's arrival at the facility. The Affordable Care Act is discussed with residents and they are given directions and the opportunity to apply. Consent to Release Information forms are completed in a timely manner. Upon arrival offenders are supplied with proper linens. Hygiene items are available if necessary.

COMMENT: Transfer orders were not executed and fingerprint cards were not completed in files. Copies sent to the RRM office was not keep in the files. Contractor was directed to maintain copies in all offender's files.

Program Plans:

(Are programs plans completed within the first two weeks of arrival, are they individualized, do they address the strengths and weaknesses of each offender, are the goals realistic and obtainable, are the offenders' signatures on the required documents, are residents meeting with counselors every two weeks, do the notes indicate progress or the lack thereof, do the notes contain all the required information listed on Attachment C, are they signed, etc.)

Individual Program Plans (IPP) are completed within the first two weeks of the offender's arrival. The IPP is individualized and addresses strengths and weaknesses of the offender. Offenders meet with the case manager/work release coordinator weekly to assess their progress toward their goals. Program Plans indicate reasonable and obtainable goals for the offender. Strategies to obtain measureable goals and set timeframes were clearly documented. A contact sheet was implemented to document signatures each time there is interaction between the work release coordinator and case manager as a result of case notes being maintained on a computer system. Case notes also document progress or the lack thereof and other important events. A review of offender files showed good interaction between offenders and their case managers/work release coordinator in reviewing progress. The following nine files were reviewed:

Chon, Daniel #89217-053
Gange, Marc #32372-016
Ferguson, William #58800-037
Francis, Glenfield #57770-037
Hawkins, Jaime #36660-037
Jackson, Andrew #53587-037
Johnson, Maurice #04460-087
Jones, Keenan #58796-037
Netcliff, Jerail #58301-037

Employment/Assistance:

(Does the contractor have employment assistance resources, hold employment preparation seminars, conduct assessments of the offender=s skill level to match with job placements, notifying the employer of the offender's legal status, verifying employment, random checks at place of employment, the success rate of the program, etc.)

Employer notifications are sent to the prospective employer prior to the offender's first work day. Nine files were reviewed during the monitoring. The MCPRC does a good job assisting offenders with their employment needs. An employment log was used to document arrival dates, date of employment, employer notifications, and dates of on-site job visits. All attempts are made to place offenders in jobs in accordance with their acquired skills. Job seminars are conducted and Work Release Coordinators assist offenders with job leads. There is a computer lab where computers are available for offenders to search for employment leads, fill out applications, and prepare resumes. Additionally, there is a kiosk set up in the dining area to enable resident to obtain job searching materials while eating meals. Four (4) of nine (9) residents are currently working. Overall, 77% of offenders were employed by the time of release from the program this year.

Life Skills/Specialized Programs:

(Parenting class, financial management, mental health, counseling, gender and cultural specific programming, etc.)

Offenders at the MCPRC are able to participate in a variety of life skills and counseling programs. MCPRRS offers the following programs: Thinking for a Change (Cognitive Behavioral Therapy (CBT) classes), Jail Addiction Services (JAS) Recovery Support Groups, Digital Literacy classes, HIV/STD Awareness, Job Readiness and Preparedness Classes, 12 Step Meetings and Support Groups, Family Sponsor Education Group classes, GED Programing, Conflict Resolution and Mediation, Meditation, Parenting classes, and Financial Literacy classes. In addition, the contractor address reentry issues, criminal thinking and alcohol/drug recovery.

Drug/Alcohol Treatment:

(Does the substance abuse counselor meet the minimum qualifications, are the offenders receiving the required amount of counseling and testing, urine surveillance procedures and requirements, alcohol testing procedures, TDAT participation, etc.)

Offenders with substance abuse problems are required to attend drug and alcohol counseling. RDAP graduates must attend weekly group and individual counseling with the RDAP provider, Counseling Plus. Other offenders who require drug treatment must pay for their own sessions in the community. Sessions must be at least one half hour per week. Offenders requiring drug testing are receiving urine tests as mandated. There is an in-house NA meeting once per week. A volunteer group conducts a relapse prevention group weekly. Offenders also attend AA/NA meetings in the community. All offenders returning to the facility from work or passes are subject to alcohol testing via breathalyzer. Offenders are also given random breathalyzer tests while in the facility. Additionally, offenders are tested for alcohol and drug use while they are in the home confinement component of the program.

Resources:

(Can they demonstrate that a viable community network of resources and services exists, how the network was developed and maintained, do the resources cater to each offender=s needs, what is the strength of the network and referral procedures, are mental health resources available, etc.)

The MCPRC has a viable network of resources throughout the county which they utilize to assist offenders with their needs. This network has been developed and maintained over many years of the MCPRC's interaction with the community. The resource network is strong and diverse, and includes mental health resources.

Release Preparation:

(Does the contractor have a residence development program, is the release plan prepared within the required time period and include all pertinent documents, are release documents submitted timely, etc.)

Release planning is done throughout the offender's stay at the RRC and through weekly counseling. The MCPRC staff sends a release plan to the USPO prior to placing an offender on home confinement. Staff also conduct a home site visit and approve the home plan prior to the resident being placed on home confinement. Release documents are submitted to the BOP in a timely fashion. Also, terminal reports are being submitted in a timely manner following the offender's release from the RRC. Overall, 98% of offenders who were released with verified housing this year.

Food Services:

(Menu certification, maintaining a registered dietician, providing meals for offenders who work odd hours or who have special diets, those preparing food have a food handler's license, are they following the current USDA Food Code and SOW requirements, etc.)

The food service department at the MCPRC is operated by Montgomery County staff. The food served matched the posted menu. The menu is certified by a registered dietician. The facility serves three meals a day and provides bag lunches as needed for residents who work outside the facility. There are special diets available for offenders with religious and medical dietary needs. The food service and food storage areas were clean. The refrigerator/freezer and stove areas were clean and serviceable. All food was labeled and properly stored in the freezer and refrigerator.

Medical Services:

(Are physicals being conducted in a timely manner, what policies and procedures are in place for the control and dispensing of medication, comply with SOW requirements, etc.)

The MCPRC has a Registered Nurse at the facility five days a week and on call on weekends. Daily, sick call is held at the MCPRC. All controlled medication is kept in a secure locker in the housing unit and distributed by the Resident Supervisor and the medicine log is documented when distributed. Physicals are conducted in a timely manner. Residents are briefed on the Affordable Care Act (ACA) during their initial orientation and given resources to apply. Offenders are asked to secure their own health care once they become employed. Bureau Electronic Medical Records (BEMR) forms are maintained in offender files for information purposes.

Discipline:

(Has there been any deviations from the discipline procedures and policies established by the Bureau, check with DHO to determine quality of reports, are they using informal resolutions whenever possible, do they use progressive discipline when appropriate, etc.)

There have been no deviations from established disciplinary procedures. MCPRC staff utilize informal resolution and progressive discipline appropriately. CDC hearings are held in accordance with policy.

NARRATIVE:

Provide a brief overview of the strengths and deficiencies of the programs overall. (This overview should explain how and why these procedures are strong or deficient and to what extent. This overview should be no longer than a paragraph [3-5 sentences].)

There were no deficiencies found in the area of programs. Drug and alcohol testing programs are well documented. All drug tests were given according to policy. Medication is being properly distributed as required and documented appropriately. Incident reports are accurately written. A review of offender files showed realistic IPPs, follow-up on goals, and good interaction between the offender and their case manager. Overall, 78% of offenders completed the program successfully this year.

10. COMMUNITY RELATIONS:

Establishing a positive relationship with the community is an important asset within community corrections. What procedures are in place to facilitate education and interaction within the local community? Has the contractor established a Community Relations Board, if so, briefly describe the organizational structure and contributions to the program.

Community Outreach Programs:

(Open houses, circulate newsletters, proof of a CRAB, who attends the meetings and who are the members, what agenda items are discussed, etc.)

Quarterly, the MCPRC has an outstanding meeting which is well attended. It is made up of a cross section of the community, including government representatives. These CRAB meetings demonstrate the great partnership created between the MCPRC and the community. A typical agenda includes the MCPRC Chief's report, discussion of initiatives and programs, resident guest speakers, and other topics related to an offender's reintegration. Minutes from all CRAB meetings are sent to the RRM office on a quarterly basis. The most recent CRAB was held on June 7, 2018.

Use of Volunteers:

(How many volunteers, what work do they perform at the facility, have they been cleared by the CCM, etc.)

The MCPRC utilizes a number of volunteers to assist with resume writing classes, tutoring, mentoring, and Bible studies. Volunteers also provide administrative support. Volunteers are supervised by MCPRC staff during their interactions with offenders.

Community Service:

(Offender volunteer services, what projects have the offenders participated in, etc)

Offenders are actively involved as volunteers in a number of community service activities. They volunteer both in the community and at the MCPRC. Offenders continue to participate on clean-up projects in the community.

NARRATIVE:

Provide a brief overview of the strengths and deficiencies of the overall community relations program. (This overview should explain how and why these procedures are strong or deficient and to what extent. This overview should be no longer than a paragraph [3-5 sentences].)

The MCPRC has established a strong community relations program. The CRAB meetings are well attended and facilitate employment and housing opportunities for offenders. Volunteers are well utilized to assist offenders in obtaining community resources. Regularly, offenders volunteer on different community projects. There were no deficiencies in this area.

11. SITE VALIDITY AND SUITABILITY

Does the contractor comply with all applicable local, state, national health, safety, environmental laws, regulations, Executive Orders, and building codes? Are there any new areas of public concern within a 2 mile radius?

Facility Physical Requirements:

(Conforms to all applicable building codes, are there any public concerns (within a half mile radius of the facility, are there any new schools, daycare centers, or other establishments that would cause the public to be concerned about the location near a CCC) does the facility still meet required NFPA/NEC/OSHA codes, have any major structural changes been made since last monitoring, if so, explain the nature of change and if it effected zoning, occupancy and/or safety requirements, etc.)

The facility conforms to all applicable building codes and no new public concerns within a half mile radius have been noted. The facility has enough space to house the current population. The MCPRC meets all required NFPA/NEC/OSHA codes. Since the last monitoring, three security doors were installed at the entrance of the facility which controls movement in and out of the lobby area of the facility as well as entry to the dining facility and to the main resident sleeping and staff office areas, that areas controlled by a control center. In addition, the control center was moved from one side of the building to the other which allows more efficient control over movement of staff, residents and visitors. Furthermore, additional security cameras were added for greater coverage and surveillance of movement. The facility is ACA and PREA accredited.

COMMENT: The facility is in process renovating the kitchen and resident's bathrooms. This is ongoing project until next year.

Life Safety:

(Fire drills, inspections, evacuation plans for any contingency, etc.)

Monthly, fire drills are conducted on different shifts. Documentation was provided for fire drills. Evacuation plans for any contingency exist and emergency exit diagrams posted throughout the facility clearly display areas of safe refuge. The Fire Marshal's inspection was conducted on October 23, 2018. HK Fire Protection, Inc. inspected all fire extinguishers on August 9, 2017. The fire alarm panel, sprinkler system, pull station, smoke detectors, and heat detector were inspected by VSC Fire and Security on April 6, 2018. There were no deficiencies in Life Safety.

Sanitation Plan:

(Is there proof of a sanitation plan, how well is it followed, how is the overall cleanliness of the facility inside, outside, and the surrounding areas, etc.)

There were no deficiencies noted in this area. Daily sanitation inspection reports were provided by the MCPRC staff to demonstrate that day to day implementation of their sanitation plan. During the monitoring, sanitation in the facility was good. Supervisors inspect offender rooms daily and provide an inspection slip to each offender providing feedback on their findings and any corrective action needed. Common areas were clean. Pest control services are provided by Innovative Pest Management for Termite & Pest Control and has an expiration date of July 15, 2019.

NARRATIVE:

Provide a brief overview of the strengths and deficiencies of the overall condition of the facility. (This overview should explain how and why these procedures are strong or deficient and to what extent. This overview should be no longer than a paragraph [3-5 sentences].)

There were no deficiencies noted in this area. Common areas were neatly maintained and floors were cleaned. The overall condition of the facility was good.

12. PERSONNEL

Adequate and qualified personnel are essential in operating a Bureau contract facility. How effective had the contractor been in ensuring recruitment, training and retention of sufficient staff is accomplished? What tracking methods are in place to ensure staff are receiving and signing for integrity guidelines? Have there been patterns or unresolved integrity issues identified?

Staffing Pattern:

(Are staff accessible to offenders 24hrs a day, the correct staff to offender ratio, all key position are filled, etc.)

Staff are accessible to offenders 24 hours per day. The facility maintains the correct staff to offender ratio. There are no concerns with the staffing of the facility.

Staff Qualifications:

(Proper reference checking conducted, obtained CCM approval prior to hiring, personnel files contain all required documentation, yearly evaluations are conducted, does contractor have a probationary period for employees, etc.)

This area is not applicable as this is an IGA, with the MCPRC staffed by Montgomery County employees.

Training:

(Orientation for new staff, annual training, attendance at BOP training, CPR training, etc.)

Staff at the MCPRC receive (40) forty hours of mandatory training from Montgomery County. They also must complete an additional (18) eighteen hours of training annually. A staff are CPR certified. Angela Talley, the director, attended Reentry Conference in St. Louis Missouri in July 2018.

Code of Conduct/Integrity:

(Proof of staff signatures indicating having received Code of Conduct, does the Code of conduct meet all SOW requirements, how is the importance of the Code of Conduct expressed to facility staff, were reported violations processed properly, etc)

There were no Code of Conduct violations reported since the last full monitoring.

Employee Recruitment and Retention Programs:

(How and where are vacant positions announced, what are their methods of recruitment, what fringe benefits are available to staff, are all staff properly qualified, discuss staff turnover, etc.)

This area is not applicable as this is an IGA. There are no concerns with employee retention.

NARRATIVE:

Provide a brief overview of the strengths and deficiencies of the staff overall. (This overview should explain how and why these procedures are strong or deficient and to what extent. This overview should be no longer than a paragraph [3-5 sentences].)

Montgomery County Pre-Release Center is a county operated program. There are no concerns with their staff, the staff ratio at the facility, or the training staff received. There were no integrity issues reported over the past year. This year the contractor filled a vacant Work Release Coordinator position. Additionally, a fulltime Mental Health Therapist was hired that begins work in October of 2018.

13. COMMUNICATION

Communication between the contractor and the community corrections staff is vital. Does the contractor demonstrate good communication skills, both written and oral? Is the contractor responsive to bureau requests, concerns and needs? Does the contractor submit reports that contain all required documentation, are the reports well written and timely.

Reports and Records:

(Thoroughness of content, detailed, timely, professional appearance, organization of files, etc.)

There were no deficiencies in this area. Referral packets and acceptance letters were sent to the RRM office timely. The MCPRC responds to all BOP inquiries in a timely manner. Responses are accurate and contain appropriate detail. Incident reports are reported accurately and timely. Files and compliance documents are orderly and organized, making them easy to review.

Billing:

(Timeliness, accuracy, permission received for outside medical treatment, proper subsistence documentation is submitted, etc.)

Billing is timely and usually accurate. MCPRC staff submitted all counts sheets to the RRM office in a timely manner for residents arriving from institutions and those placed on home confinement. The monthly billing is accurate and submitted in a timely manner. The MCPRC staff utilize the proper channels for outside medical treatment. The proper subsistence documentation is maintained in offender files.

Responding to Technical Direction:

(Level of responsiveness and compliance, etc.)

Technical direction given by the BOP to MCPRC staff are responded to promptly and are compliant with policy. They respond to all monitoring or technical reports from the RRM office in a timely manner.

Interactions with USMS and USPO:

(Ability to develop and maintain positive working relationships, etc.)

The MCPRC has a positive working relationship with the local office of U.S. Probation, as well as the local U.S. Marshal's office.

Ouality Control Program:

(Provide a brief explanation of the quality control program in place, does it meet all SOW requirements, is it viable and well maintained, are the required number of audits conducted, etc.)

NARRATIVE:

Provide a brief overview of the strengths and deficiencies of the contractor communication practices. (This overview should explain how and why these procedures are strong or deficient and to what extent. This overview should be no longer than a paragraph [3-5 sentences].)

There were no deficiencies noted in this area. Referral packets and acceptance letters were sent to the RRM office in a timely manner. The MCPRC communicates extremely well with the RRM office as well as with other BOP institutions. The MCPRC staff have positive working relationships with U.S. Probation and U.S. Marshal staff.

14: PREA

PREA is the law. Is the contractor in compliant with the provisions of PREA, are cross-gender pat searches prohibited, are male and female staff on all three shifts.

This contractor is PREA compliant. Cross-gender pat searches are not permitted. There is sufficient male and female staff on all three shifts.

Status of PREA audit:

(Has the contractor had an independent PREA audit, did they pass, what date? Audit must be no more than three years ago).

This contractor had an independent PREA audit and passed on April 28, 2015, with 100% compliance. In March of 2018, triennial Prison Rape Elimination Act (PREA) audit was conducted. MCPRRS achieved audit success with minimal programmatic and operational recommendations.

Staff Training:

(Provide an overview of the contractors' provision of PREA/sexual abuse prevention training to its staff to include: orientation training, annual training, and key staff training.

All staff received PREA/Sexual Abuse Training during orientation and annual training. There were no concerns found in this area.

SUMMARY OF DEFICIENCIES

There were no deficiencies cited during this monitoring.

SUMMARY OF ADVISE ITEMS

There were no advised items cited during this monitoring.

COMMENT ON STRENGHTS

78% of offenders completed the program successfully and 77% of those MCPRRS offenders were employed by the time of release. 98% of offenders who were released with verified housing.

GENERAL COMMENTS

The contractor and staff were cooperative and professional during the monitoring.

STAFF INTERVIEWS: Staff interviews were conducted and staff morale appears good. No concerns.

<u>INMATE INTERVIEWS:</u> Inmates were interviewed by the BOP staff during the monitoring. The only concern was offenders not receiving information about the program prior to arriving so they are better prepare of themselves.

The contractor does require Sex Offenders to attend treatment however BOP does not have an Sex Offender treatment program in place at this time.