

A Corrections Workforce for the 21st Century

Heather Toronjo
George Mason University

“America’s community corrections systems must reflect and embody the normative values of the wider democracy in which they reside.”

“We will not achieve these ideals through piecemeal tweaks to the current system, no matter how rigorous the science or how well intentioned the reformers.”

—Executive Session on Community Corrections

HUMAN SERVICE FIELDS including social work, psychology, nursing, and teaching increasingly embrace (at least nominally) a continuous and experiential approach called coaching to improving staff use of evidence-based practices (Archer, 2010; Barbee, Christensen, Antle, Wandersman, & Cahn, 2011; Ervin, 2005; Falender & Shafranske, 2014; Joyce & Showers, 2002; Kadushin & Harkness, 2014). And implementation scholars recognize coaching as a core driver of effective change efforts in human service organizations (Fixsen, Naoom, Blase, & Friedman, 2005). Coaching is an intentional, ongoing, on-the-job process that differs from traditional one-shot or classroom-based training. Organizations that effectively use coaching support the effort with structures such as observations and feedback processes and a coaching service delivery plan (Kampa-Kokesch & Anderson, 2001; Kretlow & Bartholomew, 2010; Milne & Reiser, 2017). They may use peer coaches (Joyce & Showers, 2002), a supervisor coaching model (Kadushin & Harkness, 2014), or outside clinical supervisors (Falender & Shafranske, 2014), but variations in approaches aside, the focus of coaching remains on building specific skills and improving competency. Despite the proven efficacy of coaching to improve

skill use (Jones, Woods, & Guillaume, 2016; Theeboom, Beersma, & Vianen, 2014), many human service fields struggle with the same barriers to implementing best practices. These include poor support from the organization, too few resources, non-supportive organizational culture, and poor staff perceptions of the practices (Aarons & Palinkas, 2007; Fixsen, Naoom, Blase, Friedman, & Wallace, 2005; Mota da Silva, da Cunha Menezes Costa, Garcia, & Costa, 2015; Mullen, Bledsoe, & Bellamy, 2008). Decades of research on implementing evidence-based practices in these human service fields makes it clear that effectively integrating EBPs must combine staff training with organizational development efforts including shifting climate and culture (Aarons, Ehrhart, Farahnak, & Sklar, 2014; Glisson & Schoenwald, 2005; Mullen et al., 2008). One method of shifting culture is to develop the deontological argument for *why* an organization does what it does. In other words, practices cannot be simply a means to an end, but should be guided by values that help determine their essential rightness. This article argues that the evidence-based movement in community corrections must be accompanied by such a shift and that coaching, so widely heralded in other human service fields as a method for improving

competency, is one vehicle to help fulfill this larger ideal of organizational development.

In the field of community corrections, the Risk-Need-Responsivity (RNR) model has introduced human service into the justice context, and change efforts in the field have centered on implementing the RNR model’s various components (Chadwick, Dewolf, & Serin, 2015; Taxman & Belenko, 2012; Taxman, Cropsey, Young, & Wexler, 2007). The RNR model is considered the standard for “what” officers should work on with individuals on their caseloads (e.g., criminogenic needs) and “how” they should do it (e.g., core correctional practices). Table 1 details the 15 principles comprising the RNR model. The 15th principle notes the importance of coaching (referred to as clinical supervision). RNR architects James Bonta and Don Andrews, influenced by a background in clinical psychology, recognized the importance of coaching in developing practitioner competence in these types of human service skills. Thus, all current RNR-based supervision models (e.g., STICS, STARR, EPICS, SUSTAIN) and their various offshoots aim to improve officer adherence to the RNR principles through a coaching mechanism (Bonta et al., 2011; Chadwick et al., 2015; Labrecque & Smith, 2017; Robinson et al., 2012).

TABLE 1.
Principles of the RNR Model

The Overarching Principles
<ol style="list-style-type: none"> 1. Respect for the Person and the Normative Context: Services are delivered with respect for the person, including respect for personal autonomy, being humane, ethical, just, legal, and being otherwise normative. Some norms may vary with the agencies or the particular setting within which services are delivered. For example, agencies working with young offenders may be expected to show exceptional attention to education issues and to child protection. Mental health agencies may attend to issues of personal well-being. Some agencies working with female offenders may place a premium on attending to trauma and/or to parenting concerns. 2. Psychological Theory: Base programs on an empirically solid psychological theory (e.g., general Personality and Cognitive Social Learning). 3. General Enhancement of Crime Prevention Services: The reduction of criminal victimization may be viewed as a legitimate objective of service agencies, including agencies within and outside of justice and corrections.
The Core RNR Principles and Key Clinical Issues
<ol style="list-style-type: none"> 4. Introduce Human Service: Introduce human service into the justice context. Do not rely on the sanction to bring about reduced offending. Do not rely on deterrence, restoration, or other principles of justice. 5. Risk: Match intensity of service with risk level of cases. Work with moderate and higher risk cases. Generally, avoid creating interactions of low-risk cases with higher-risk cases. 6. Need: Target predominately criminogenic needs. Move criminogenic needs in the direction of becoming strengths. 7. General Responsivity: Employ behavioral, social learning, and cognitive behavioral influence and skill building strategies. 8. Specific Responsivity: Adapt the style and mode of service according to the setting of service and to relevant characteristics of individual offenders, such as their strengths, motivations, preferences, personality, age, gender, ethnicity, cultural identifications, and other factors. 9. Breadth: Target a number of criminogenic needs relative to noncriminogenic needs. 10. Strength: Assess strengths to enhance prediction and specific responsivity factors. 11. Structured Assessment: <ol style="list-style-type: none"> a. Assessment of Strengths and Risk-Need-Specific Responsivity: Employ structured and validated assessment instruments. b. Integrated Assessment and Intervention: Every intervention and contact should be informed by the assessment. 12. Professional Discretion: Deviate from recommendations only for very specific reasons.
Organizational Principles: Setting, Staffing, and Management
<ol style="list-style-type: none"> 13. Community-based: Community-based services are preferred but the principles of RNR also apply with residential and institutional settings. 14. GPCSL-based Staff Practices: Effectiveness of interventions is enhanced when delivered by therapists and staff with <i>high-quality relationship skills</i> in combination with <i>high-quality structuring skills</i>. Quality relationships are characterized as respectful, caring, enthusiastic, collaborative, valuing personal autonomy, and using motivational interviewing to engage the client in treatment. Structuring practices include prosocial modeling, effective reinforcement and disapproval, skill building, cognitive restructuring, problem solving, effective use of authority and advocacy/brokerage. 15. Management: Promote the selection, training, and clinical supervision of staff according to RNR and introduce monitoring, feedback, and adjustment systems. Build systems and cultures supportive of effective practice and continuity of care. Some additional specific indicators of integrity include having program manuals available, monitoring of service process and intermediate changes, adequate dosage, and involving researchers in the design and delivery of service.

In existing coaching models, coaches assess officers' use of certain practices, then employ a variety of coaching methods (e.g., feedback, training, role-playing, modeling) to raise officers' use of those skills to a defined level of proficiency. While these training models look to diffuse evidence-based practices within the field of corrections, community supervision would be wise to learn from our human service counterparts and combine implementation of EBP supervision models

with other organizational development efforts. Studies on the effectiveness of these models in changing officer behavior and client outcomes show promising results (Bonta et al., 2011; Chadwick et al., 2015; Labrecque & Smith, 2017; Robinson et al., 2012). And the few studies that parse out the effect of coaching find a positive relationship with improved officer adherence to the RNR principles (Bonta & Andrews, 2016; Labrecque & Smith, 2017). However, research on the use of EBPs

within community supervision continues to find misalignment between training and use of skills (Viglione, 2017; Viglione, Rudes, & Taxman, 2015). In current models, coaching and training happen at the front-line level. Coaches do not necessarily hold a position of authority within the organization and are usually peer coaches or specialty trainers. Current models could do more to "Build systems and cultures supportive of effective practice and continuity of care" (Bonta et al., 2016, p. 177).

A New Coaching Model

Building a culture supportive of effective practice requires that agencies move beyond just the what and how of effective practice to focus on the why. Traditionally, the reason (or "why") for training officers in the RNR model lies in its crime prevention benefits (Andrews & Dowden, 2008). New training initiatives are invariably sold as a method to reduce recidivism. Officers are tasked with applying this model because "it works" to change behavior. But "reducing recidivism" is a deceptively complex goal that is "deeply and irrevocably flawed" as a measure of success (McNeill, Farrall, Lightowler, & Maruna, 2012, p. 40). As McNeill et al. (2012) so elegantly note, recidivism "is not a straightforward measure of behaviour change...it is a measure of a series of interlocking social reactions to perceptions of behaviour (witnessing, reporting, detecting, prosecuting, sentencing, conviction)" (p. 6). Furthermore, "reducing recidivism" does not address the myriad other goals community supervision must embody. And selling a model based on its purported outcomes does not comport with decades of research on the diffusion of innovations and implementation science, which hold that leadership must align practices with the overall mission, values, and philosophy of the organization (Dean L. Fixsen, Blase, Naoom, & Wallace, 2009; Rogers, 2003; Taxman & Belenko, 2012). For community supervision agencies, a field so exposed to the exigencies of changing political winds, clarifying mission and values is a crucial first step to any change effort. The day-to-day practices of supervision agencies cannot be defended based solely on their effects on changing behavior. This is true for many reasons (not the least of which is an incomplete understanding of human behavior). Rehabilitation efforts such as the RNR model have in fact been criticized as being too risk-focused and minimizing the importance of human agency (Polaschek, 2012; Ward, Yates, & Willis, 2012).

The Executive Session on Community Correction's 2017 Consensus Document *Toward an Approach to Community Corrections for the 21st Century* provides much-needed guidance on the "why" underlying community supervision practices. In the Consensus Document a wide array of community corrections stakeholders seeks to reorient the field to the values of a democratic institution. This document calls on community supervision to reorient from being an institution charged with keeping prison populations low, maintaining order, or preventing crime, to take up the mantles of community well-being, parsimonious use of authority, individual agency and dignity, legitimacy and community trust, and justice and fairness. Importantly, the Consensus Document reconceptualizes individuals under supervision, their relationship with the community, and the relationship between the community and supervision agencies. By recognizing the worth of justice-involved individuals and treating them as citizens in a democratic society, the documents calls on agencies to ensure that individuals are "free from arbitrary treatment, disrespect and abuses of power" (p. 2). The first fundamental mission of community supervision is community well-being, which is described as "stability in everyday life, rooted in social bonds of neighborhoods and families that allow individuals to flourish" (p. 2). And the document situates community supervision squarely within the communities it serves, calling upon agencies to make community residents co-producers of justice, and concerning itself with the effect of justice system intrusion on communities (which includes those under supervision and their families) over time and across generations. To support the guiding values the Consensus Document implores the field to move beyond "piecemeal tweaks" and embrace thirteen *paradigm shifts* that range from the goals of community supervision, to whom it targets, and even how it is funded (Executive Session, 2017). While a detailed analysis of each paradigm shift is outside the scope of this essay, there are several (e.g., shifting from deficit-based to strengths-based, or from punishing failure to promoting success) that coaches can use to help marry the guiding values to the day-to-day practice of agencies.

Leveraging coaches in this way calls for an expansion of coaching within community supervision beyond the focus on improving specific staff practices to become a mechanism by which agencies may begin to embody the values detailed in the Consensus Document.

While current coaching efforts target front-line workers and focus on improving specific practices, this new model of coaching calls upon agencies to train supervisors in the values and paradigm shifts laid out in the Consensus Document, as well as a management style that aims to improve officer use of skills and improve officer decision-making by helping officers explore their own assumptions, biases, and values.

To this end, the proposed coaching model includes the following five core coaching competencies: 1) knowledge of effective practices and guiding values, 2) establishing quality working relationships, 3) facilitating individual learning, 4) effective communication, and 5) managing group learning sessions. Derek Milne (2017) offers a theory-based, empirically supported conceptualization of clinical supervision used in psychology which can be adapted for corrections. Milne's model relies on experiential learning theory, which holds that a person must explore a mix of countervailing learning styles—experiencing, reflecting, conceptualizing, and experimenting—to transform experience into knowledge. In other words, a coach's job is to help an officer think more deeply about his or her experiences to sharpen the officer's understanding and improve decision-making. Coaching sessions should be guided by observations from actual practice and specific goals developed in tandem with officers. Just as with current models, coaches provide feedback to officers on their observations and may engage in either teaching, demonstrating, or experimenting with the officer to improve professional practice depending on the scaffolding needs of the particular officer. However, most importantly, coaches use questions to facilitate reflection. Through a process of Socratic questioning, coaches can help officers unearth hidden assumptions and explore biases in decision-making processes, and in doing so, reorient the officer to the guiding values of community corrections. This reflective coaching is necessary to ensure that officers can adapt epistemic knowledge, or what we know about changing behavior, to particular individuals and situations without carrying "imprints of beliefs and values that may bear little relationship with research into effective practice" (Spouse, 2001, p. 1). In other words, as practitioners attempt to use practices such as those espoused by the RNR model, they will inevitably encounter messy and unpredictable situations, in which case they will likely fall back on informal or tacit

understandings to guide their behavior. A coach is there to prevent this by engaging the officer in a discussion of not only what works to change behavior but also what an officer should do in light of the values detailed above.

Evaluating Coaching Impacts

This coaching model seeks to achieve the larger aim of staff professionalization via the following sub-goals: 1) support the paradigm shifts in the Consensus Document, 2) improve supervisors' coaching skills, 3) improve front-line officers' supervision and decision-making, and 4) improve the lives of individuals under supervision. To that end, studying a coaching model would involve capturing changes related to each sub-goal.

Paradigm shifts. Each paradigm shift would have its own set of measurement criteria. While an exploration of each paradigm shift is outside the scope of this essay, the following are examples of measurements of the first paradigm shift—from punishing failure to promoting success. Measurements might include a change in the ratio of rewards versus sanctions given out, changes in fees charged over time, changes in violations (including count and severity of infraction), and changes in opportunities provided for progress. *Supervisor skills.* Milne, Reiser, Cliffe, & Raine (2011) developed the *Supervision: Adherence and Guidance Evaluation*, which allows researchers to code the use of coaching skills in practice. Coaching skills may also be captured through self-report or case vignettes (Minoudis et al., 2013). *Officer skills and decision making.* Changes in officer professional development may also be measured in a variety of ways, including behaviorally-anchored scoring, officer self-reported use of skills, vignette scoring, and survey items measuring changes in wisdom or ethical decision-making (Ardelt, 2003; Rest, 1975). Observation scoring rates the officer's use of skills such as working relationship skills, client engagement and motivation skills, risk management skills, and core correctional practices using a rating scale (e.g., 0-3). *Client changes.* Client outcomes should expand beyond rearrest, reconviction, or reincarceration to include changes in risk factors, strengths, and goals achieved—such as days sober, improvements in family dynamics, increased prosocial connections, or new ways of thinking, just to name a few. Client outcomes should be measured by reassessments of the risk/need instrument as well as specialized forms to capture important short-term goals or stability factors.

Conclusion

Developing a community supervision workforce for the 21st century requires a marriage of empirical science (what we can do and how we can do it) with guiding values (what we should do). A coach's role is to improve both what and how community supervision works by first cultivating the why. A coach helps officers learn skills and improve professional practice by facilitating officer reflection on values exemplified in particular situations and bridging the gap between the lived experience of probation officers and the *what, how, and why* of what they ought to be doing.

References

- Aarons, G. A., Ehrhart, M. G., Farahnak, L. R., & Sklar, M. (2014). Aligning leadership across systems and organizations to develop a strategic climate for evidence-based practice implementation. *Annual Review of Public Health, 35*(1), 255–274. <https://doi.org/10.1146/annurev-publ-health-032013-182447>
- Aarons, G. A., & Palinkas, L. A. (2007). Implementation of evidence-based practice in child welfare: Service provider perspectives. *Administration and Policy in Mental Health and Mental Health Services Research, 34*(4), 411–419. <https://doi.org/10.1007/s10488-007-0121-3>
- Andrews, D. A., & Dowden, C. (2008). The Risk–Need–Responsivity Model of assessment and human service in prevention and corrections: Crime-Prevention jurisprudence. *Canadian Journal of Criminology and Criminal Justice, 49*(4), 439–453. <https://doi.org/10.3138/cjccj.49.4.439>
- Archer, J. C. (2010). State of the science in health professional education: effective feedback. *Medical Education, 44*(1), 101–108. <https://doi.org/10.1111/j.1365-2923.2009.03546.x>
- Ardelt, M. (2003). Empirical assessment of a three-dimensional wisdom scale. *Research on Aging, 25*(3), 275–324. <https://doi.org/10.1177/0164027503025003004>
- Barbee, A. P., Christensen, D., Antle, B., Wandersman, A., & Cahn, K. (2011). Successful adoption and implementation of a comprehensive casework practice model in a public child welfare agency: Application of the Getting to Outcomes (GTO) model. *Children and Youth Services Review, 33*(5), 622–633. <https://doi.org/10.1016/j.childyouth.2010.11.008>
- Bonta, J., Andrews, D. A., & Andrews, D. A. (2016). *The psychology of criminal conduct*. <https://doi.org/10.4324/9781315677187>
- Bonta, J., Bourgon, G., Rugge, T., Scott, T.-L., Yessine, A. K., Gutierrez, L., & Li, J. (2011). An experimental demonstration of training probation officers in evidence-based community supervision. *Criminal Justice and Behavior, 38*(11), 1127–1148. <https://doi.org/10.1177/0093854811420678>
- Chadwick, N., Dewolf, A., & Serin, R. (2015). Effectively training community supervision officers: A meta-analytic review of the impact on offender outcome. *Criminal Justice and Behavior, 42*(10), 977–989. <https://doi.org/10.1177/0093854815595661>
- Ervin, N. E. (2005). Clinical coaching: A strategy for enhancing evidence-based nursing practice. *Clinical Nurse Specialist CNS, 19*(6), 296–301. <https://doi.org/10.4161/cc.4.12.2282>
- Falender, C. A., & Shafranske, E. P. (2014). Clinical supervision: The state of the art. *Journal of Clinical Psychology, 70*(11), 1030–1041. <https://doi.org/10.1002/jclp.22124>
- Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). *Implementation research: A synthesis of the literature*. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network.
- Fixsen, D. L., Blase, K. A., Naoom, S. F., & Wallace, F. (2009). Core implementation components. *Research on Social Work Practice, 19*(5), 531–540. <https://doi.org/10.1177/1049731509335549>
- Fixsen, D. L., Naoom, S. F., Blase, K. A., & Friedman, R. M. (2005). *Implementation research: A synthesis of the literature*. Retrieved from <http://www.popline.org/node/266329>
- Glisson, C., & Schoenwald, S. K. (2005). The ARC organizational and community intervention strategy for implementing evidence-based children's mental health treatments. *Mental Health Services Research, 7*(4), 243–259. <https://doi.org/10.1007/s11020-005-7456-1>
- Jones, R. J., Woods, S. A., & Guillaume, Y. R. F. (2016). The effectiveness of workplace coaching: A meta-analysis of learning and performance outcomes from coaching. *Journal of Occupational and Organizational Psychology, 89*(2), 249–277. <https://doi.org/10.1111/joop.12119>
- Joyce, B., & Showers, B. (2002). *Student achievement through staff development*. Retrieved from <http://ebookcentral.proquest.com/lib/gmu/detail.action?docID=3002066>
- Kadushin, A., & Harkness, D. (2014). *Supervision in social work*. Columbia University Press.
- Kampa-Kokesch, S., & Anderson, M. Z. (2001). Executive coaching: A comprehensive review of the literature. *Consulting Psychology Journal: Practice and Research, 53*(4), 205–228. <https://doi.org/10.1037/1061-4087.53.4.205>
- Kretlow, A. G., & Bartholomew, C. C. (2010). Using coaching to improve the fidelity of evidence-based practices: A review of studies. *Teacher Education and Special Education, 33*(4), 279–299. <https://doi.org/10.1177/0888406410371643>
- Labrecque, R. M., & Smith, P. (2017). Does training and coaching matter? An 18-month evaluation of a community supervision model. *Victims & Offenders, 12*(2), 233–252. <https://doi.org/10.1080/15564886.2015.1013234>
- McNeill, F., Farrall, S., Lightowler, C., & Maruna, S. (2012). Reexamining evidence-based practice in community corrections: Beyond “a confined view” of what works. *Justice Research and Policy, 14*(1), 35–60. <https://doi.org/10.3818/JRP.14.1.2012.35>
- Milne, D. L., & Reiser, R. P. (2017). *A manual for evidence-based CBT supervision*. John Wiley & Sons.
- Milne, D. L., Reiser, R. P., Cliffe, T., & Raine, R. (2011). SAGE: Preliminary evaluation of an instrument for observing competence in CBT supervision. *The Cognitive Behaviour Therapist, 4*(4), 123–138. <https://doi.org/10.1017/S1754470X11000079>
- Minoudis, P., Craissati, J., Shaw, J., McMurrain, M., Freestone, M., Chuan, S. J., & Leonard, A. (2013). An evaluation of case formulation training and consultation with probation officers. *Criminal Behaviour and Mental Health, 23*(4), 252–262. <https://doi.org/10.1002/cbm.1890>
- Mota da Silva, T., da Cunha Menezes Costa, L., Garcia, A. N., & Costa, L. O. P. (2015). What do physical therapists think about evidence-based practice? A systematic review. *Manual Therapy, 20*(3), 388–401. <https://doi.org/10.1016/j.math.2014.10.009>
- Mullen, E. J., Bledsoe, S. E., & Bellamy, J. L. (2008). Implementing evidence-based social work practice. *Research on Social Work Practice, 18*(4), 325–338. <https://doi.org/10.1177/1049731506297827>
- Polaschek, D. L. L. (2012). An appraisal of the risk–need–responsivity (RNR) model of offender rehabilitation and its application in correctional treatment. *Legal and Criminological Psychology, 17*(1), 1–17. <https://doi.org/10.1111/j.2044-8333.2011.02038.x>
- Rest, J. R. (1975). Longitudinal study of the Defining Issues Test of moral judgment: A strategy for analyzing developmental change. *Developmental Psychology, 11*(6), 738–748. <https://doi.org/10.1037/0012-1649.11.6.738>
- Robinson, C., Lowenkamp, C., Holsinger, A., Vanbenschoten, S., Alexander, M., & Oleson, J. C. (2012). A random study of Staff Training Aimed at Reducing Re-arrest (STARR): Using core correctional practices

- in probation interactions. *Journal of Crime and Justice*, 35(2), 167–188. <https://doi.org/10.1080/0735648X.2012.674823>
- Rogers, E. M. (2003). *Diffusion of innovations* (5th ed.). New York: Simon and Schuster.
- Spouse, J. (2001). Bridging theory and practice in the supervisory relationship: A socio-cultural perspective. *Journal of Advanced Nursing*, 33(4), 512–522.
- Taxman, F. S., & Belenko, S. (2012). *Implementing evidence-based practices in community corrections and addiction treatment* (2012 ed.). Springer.
- Taxman, F. S., Cropsey, K. L., Young, D. W., & Wexler, H. (2007). Screening, assessment, and referral practices in adult correctional settings: A national perspective. *Criminal Justice and Behavior*, 34(9), 1216–1234. <https://doi.org/10.1177/0093854807304431>
- Theeboom, T., Beersma, B., & Vianen, A. E. M. van. (2014). Does coaching work? A meta-analysis on the effects of coaching on individual level outcomes in an organizational context. *The Journal of Positive Psychology*, 9(1), 1–18. <https://doi.org/10.1080/17439760.2013.837499>
- Viglione, J. (2017). Street-level decision making: Acceptability, feasibility, and use of evidence-based practices in adult probation. *Criminal Justice and Behavior*, 44(10), 1356–1381. <https://doi.org/10.1177/0093854817718583>
- Viglione, J., Rudes, D. S., & Taxman, F. S. (2015). Misalignment in supervision: Implementing risk/needs assessment instruments in probation. *Criminal Justice and Behavior*, 42(3), 263–285. <https://doi.org/10.1177/0093854814548447>
- Ward, T., Yates, P. M., & Willis, G. M. (2012). The Good Lives Model and the Risk Need Responsivity Model: A critical response to Andrews, Bonta, and Wormith (2011). *Criminal Justice and Behavior*, 39(1), 94–110. <https://doi.org/10.1177/0093854811426085>