

STATE OF RHODE ISLAND
DEPARTMENT OF CORRECTIONS
COMMUNITY CORRECTIONS

COMMUNITY CONFINEMENT



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COMMUNITY CORRECTIONS MISSION STATEMENT

The mission of the Rhode Island Department of Corrections is to contribute to public safety by maintaining a balanced correctional system of institutional and community programs, which provide a range of control and rehabilitation options for criminal offenders.

It is the belief of Community Corrections that offenders, by making use of appropriate rehabilitative services and functioning responsibly in the community, have the ability to refrain from further illegal activities and live productive lives in society.

In support of this belief, it is the mission of Community Corrections to expend all efforts to provide offenders with comprehensive services, to supervise offender's community activities and monitor compliance with specially ordered conditions; thereby providing for the rehabilitation of the offender, reintegration from the institutions and protection of the community.

PURPOSE STATEMENT

The Community Confinement Program provides the Rhode Island Justice System and the Department of Corrections with an intensely supervised alternative to incarceration, as outlined in RIGL 42-56-20.2 and 42-56-10.

REFERRAL PROCESS

The Courts are the primary source of Community Confinement placements. While the legislation provides a mechanism for sentenced inmates to be classified to Community

Confinement, this option is not being utilized. The referral process begins when a judge requests a determination on whether a particular defendant is eligible for Home Confinement. The defense attorney, the Court Clerk, or the defendant then forward the necessary information to the Eligibility and Assessment Counselor either by leaving the information on the Referral voice mail or by faxing a referral form to the Home Confinement office. It is critically important that the Eligibility and Assessment Counselor receives the referral data in a timely manner; seven to ten business days prior to the court date is preferred. This will help to ensure that the investigation is completed for the Home Confinement Eligibility Hearing Court Date.

The Eligibility and Assessment Counselor will first conduct local and national criminal background checks. If the defendant is eligible in regard to criminal background, an interview will be conducted. If the defendant is at the A.C.I. pending the Eligibility Hearing, the interview will be conducted at the A.C.I. If the defendant is in the community pending the Eligibility Hearing, the interview will be scheduled and conducted at the Home Confinement Office, located at the Pinel Building at the Pastore Complex in Cranston.

During the interview, the defendant must agree to the conditions of Community Confinement, which are explained in detail in the Community Confinement Program Agreement. Restrictions involving employment, telephone service, subsidized housing, housemates, motor vehicles, program fees and basic program requirements are explained in full. This document was reviewed and accepted through Public Hearing.

A Community Program Counselor will present the Eligibility Findings to the Judge on the scheduled Court date.

Defendants may be found Eligible or Not Eligible per statute. They may also be found Eligible with Concerns per Rhode Island Department of Corrections Policy. In these cases, defendants are eligible by law. However, Home Confinement Administration strongly recommends an alternative sanction with reasons stated in writing to the Court.

COMMITMENT PROCESS

Following sentencing or placement on electronic monitoring as a condition of bail, the defendant will be transferred to the A.C.I. via the Rhode Island State Marshals. The defendant will serve one mandatory night at the A.C.I. The purpose is three-fold: first, the inmate needs to be processed by the Records & Identification Unit; second, the inmate becomes familiar with incarceration, and understands the consequence if program compliance is not met; and third, the inmate receives a Home Confinement Program Orientation during the afternoon of their release to Home Confinement. Staffing does not permit overnight waives or program orientation during the evening.

Community Confinement Staff transport the inmate from the A.C.I. to the Home Confinement Office the next day. Once the inmate has arrived at the Home Confinement Office, s/he will be fitted with an electronic ankle bracelet, meet with his or her assigned Community Program Counselor, develop a schedule for the upcoming week, provide a urine sample and receive additional guidance on the operation of the electronic monitoring equipment and program rules. Offenders are allowed to use the telephone to arrange for a ride home from the office. Offenders are usually prepared to be released to the community by approximately 2:45 p.m. Once the offender has entered the home, s/he will install the field-monitoring device, and wait for clearance from the Home Confinement

Office. Offenders will usually not be home early enough to attend work that day.

AUTHORIZED ACTIVITIES

The Community Confinement Program is very restrictive. There are very few authorized activities, including work, job search, counseling and support groups (AA, NA, etc.), medical appointments, religious services and legal appointments.

EMPLOYMENT AND EDUCATION

Per 42-56-20.2, an offender must demonstrate that s/he will be regularly employed, or enrolled in an educational or vocational training program within 30 days of initiation to community confinement. An offender must notify his/her supervisor of their placement on home confinement: at the initial interview, the Eligibility & Assessment Counselor provides an Employment Verification Form. The offender must bring this form to their work supervisor, and the supervisor then faxes it to Home Confinement after having filled out the required information: contact person, telephone number, work hours, etc.

Self-employment is allowed. However, offenders must be able to demonstrate that their business is legal and legitimate. Offenders must be on an official payroll. Cash and personal checks as payment are not acceptable. All applicable federal and local taxes must be taken out of the payroll check.

The assigned Community Program Counselor will verify the information with the employer prior to authorizing the offender to work. Offenders are authorized to work more than one job, as well as overtime with prior approval of the assigned Community Program Counselor.

JOB SEARCH

If unemployed when placed on Home Confinement, offenders are allowed to conduct a job search. This usually consists of filling out job applications, attending interviews, and visiting the unemployment office. Offenders must pre-arrange appointments. Authorized activities are limited and contacts will be verified.

COUNSELING AND SUPPORT GROUPS

The majority of Home Confinement inmates attend counseling and or support groups. In many cases, the counseling or treatment is stipulated by court order, as a condition of community confinement. The assigned Program Counselor will monitor the offender's attendance and progress, as much as possible given many substance abuse treatment support groups mandate confidentiality.

MEDICAL APPOINTMENTS

Offenders are authorized to attend routine and or emergency medical appointments. It is the offender's responsibility to schedule the medical appointment and notify their assigned Program Counselor in advance. Emergency medical treatment requires supportive documentation from the emergency room of the hospital or medical facility visited.

RELIGIOUS SERVICES

Offenders are allowed to attend religious services while on community confinement. Community Confinement staff will again approve all religious activities in advance. Staff conduct random field visits to verify attendance.

LEGAL APPOINTMENTS

Offenders are permitted to attend legal appointments and obligations. This includes court dates, consultation with attorneys and other legal matters. Arrangements will be made in advance to facilitate proper scheduling.

MAJOR COMPONENTS OF SUPERVISION

The Community Confinement Program utilizes five major methods of supervision: 24-hour electronic monitoring, office reporting sessions, random drug and alcohol testing, community field visits, and referrals to community resources and or treatment if necessary.

ELECTRONIC MONITORING

Upon release to community confinement, each offender is issued a field-monitoring device and an ankle bracelet. The ankle bracelet, or transmitter, is affixed to the offender's ankle. The field monitoring device, or FMD, is connected to the offender's telephone line and electrical outlet in the home. The FMD tracks the ankle bracelet with exclusive radio frequency signals up to 75 feet in the home. When the offender goes beyond the 75-foot electronic boundary, the FMD relays this information to Correctional Officers at the Home Confinement Office, through the Host Computer. This computer monitors compliance with all programmed schedules. It also prints out all alarms indicating violations of approved scheduling and tampering with the electronic monitoring equipment. The Correctional Officer relays information to the assigned Program Counselor and or a Home Confinement Supervisor as necessary.

REPORTING SESSIONS

Offenders placed on Home Confinement are required to report to the Home Confinement Unit at least twice per month. This enables the assigned Program Counselor to review the offender's daily activity schedule and other basic requirements. Offenders are expected to make program fees payments and to provide payroll stubs, and printed receipts to verify hours and locations on their schedules.

DRUG AND ALCOHOL TESTING

Program staff conduct random urinalysis testing for the detection of drug use, as well as random Breathalyzer tests for the detection of alcohol use. There is zero tolerance for the use of illicit drugs or alcohol.

If an offender tests positive for drugs and or alcohol, s/he is immediately terminated from the program and returned to the A.C.I. Offenders who successfully complete a substance abuse treatment program at the A.C.I. may be considered for re-release to Home Confinement by the Home Confinement Administrator.

It is the offender's responsibility to provide documentation of prescription medications. While over the counter medication is permitted, the offender must notify his/her Counselor. Cough syrup with alcohol is not authorized; offenders are given a list of appropriate cough syrups without alcohol.

COMMUNITY FIELD VISITS

Community Program Counselors and Correctional Officers conduct Field Visits. Field visits include home checks, work checks, church checks, court checks, hospital checks, job search checks and any other location checks necessary.

Home Confinement personnel also utilize “drive-by” equipment in order to detect the presence of an offender at a particular location without having to enter the building or even be seen.

REFERRALS TO COMMUNITY RESOURCES

Community Program Counselors do not provide clinical type counseling services. They act as program officers, as they conduct caseload supervision and monitor offenders' program compliance. As such, they refer offenders to community treatment, counseling, or support services as necessary and as consistent with the offenders' needs.

OFFENDERS PAROLED TO ELECTRONIC MONITORING

The Parole Board will grant parole with an electronic monitoring condition as a more restrictive option than straight parole for selected inmates. This is a separate program, although it is often confused with Home Confinement.

Community Confinement Correctional Officers provide electronic monitoring services, including 24-hour electronic monitoring and inventory control, to the Parole Unit. However, all remaining services and supervision are established and conducted by the Parole Unit.