

## **Attachment Two: Tennessee Department of Correction Policies**

***\*The policies enclosed are subject to revisions. The expiration date of the policy is the State's anticipated revision date and not an exclusion of operational duties.\****

Policies Enclosed:

#103.10.1 Title VI-Limited English Proficient (LEP)


#704.01 Standards of Offender Supervision

#704.01.1 Compliant Reporting

#704.10 Community Supervision Sanctions

#705.11 Community Supervision Offender Fees

#706.03 Offender Contact Notes

 <p style="text-align: center;"> <b>ADMINISTRATIVE POLICIES AND PROCEDURES</b>          State of Tennessee          Department of Correction       </p>	Index #: 103.10.1	Page 1 of 5
	Effective Date: February 1, 2019	
	Distribution: A	
	Supersedes: 103.10.1 (12/1/15) PCN 18-31 (5/15/18)	
Approved by: Tony Parker		
Subject: TITLE VI – LIMITED ENGLISH PROFICIENCY (LEP)		

- I. **AUTHORITY:** TCA 4-3-603; TCA 4-3-606; TCA 4-21-901; TCA 4-21-904; TCA 4-21-905; and Title VI of the Civil Rights Act of 1964, 42 USC 2000d et seq; Federal Executive Order 13166.
- II. **PURPOSE:** To establish guidelines in accordance with Title VI Civil Rights Act of 1964 and Executive Order 13166 by taking reasonable steps to provide meaningful access to programs and activities to Limited English Proficiency (LEP) persons to ensure language does not prevent staff from effectively communicating with LEP persons who are under the jurisdiction of the Tennessee Department of Correction (TDOC).
- III. **APPLICATION:** All Tennessee Department of Correction (TDOC) employees, visitors, and offenders under TDOC custody/community supervision, including privately managed facilities, employees of Tennessee Rehabilitative Initiative in Correction (TRICOR), and all providers and recipients of departmental services including contract service providers.
- IV. **DEFINITIONS:**
  - A. **Contracted Vendor Interpreter Services:** Contract interpretative services used by TDOC to assist in the provision of meaningful service to individuals who have a Limited English Proficiency, including those who are hearing impaired.
  - B. **Interpretation:** The oral conversion of spoken words from one language (source language) to another language (target language) while retaining the same meaning.
  - C. **“I Speak” or Language Identification Guide:** A card with a variety of languages used to determine the need for a particular language services during routine activities and encounters.
  - D. **Limited English Proficiency (LEP):** Persons who do not speak English as their primary language or who have a limited ability to read, speak, write, or understand English.
  - E. **LEP Coordinator:** The Associate Warden of Treatment at TDOC facilities, the Assistant Warden/Deputy Superintendent at privately managed facilities, and the Title VI Coordinator for the Department of Correction.
  - F. **Primary Language:** An individual’s native language in which an individual is most able to effectively communicate.
  - G. **Meaningful Access:** Language assistance that results in accurate, timely, and effective communication at no cost to the LEP individual. For LEP individuals, meaningful access denotes access that is not significantly restricted, delayed or inferior as compared to programs or activities provided to English proficient individuals.
  - H. **Sub-Recipients:** For purposes of this policy, TDOC contractors who provide direct service programs to offenders and beneficiaries (i.e, private management of institutional operations, substance use or mental health treatment programs, health services, educational programs, etc.)

Subject: TITLE VI – LIMITED ENGLISH PROFICIENCY (LEP)

- I. Translation: The replacement of written text from one language (source language) into an equivalent written text in another language (target language).
- J. Programs and Activities: Any programmatic activity or assignment that is funded with federal or state monies and conducted or sanctioned by the TDOC. These activities or assignments include, but are not limited to, the following:
- a. Education
  - b. Substance use treatment and testing
  - c. Behavioral health programming
  - d. Segregation, visitation, or cell/bed assignment
  - e. Referrals to the Special Alternative Incarceration Unit (SAIU)
  - f. Job/program assignments and pay levels
  - g. PREA Screening, Orientation, and Education
- K. Title VI of the Civil Rights Act of 1964: Federal statute which states that “No person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.”
- L. Title VI Coordinator: The TDOC employee appointed to adjudicate Title VI allegations and monitor compliance for the Department.
- M. Title VI Site Coordinator: The Associate Warden of Treatment/Deputy Superintendent at TDOC facilities, the Community Supervision designee at each district office, and the Assistant Warden of Treatment at privately managed facilities.
- V. POLICY: The TDOC will not discriminate on the basis of race, color, or national origin as outlined in Title VI of the Civil Rights Act of 1964.
- VI. PROCEDURES:
- A. All institutions and community supervision offices shall ensure that individuals who have a Limited English Proficiency (LEP) have access to programs and activities as required in Title VI of the Civil Rights Act of 1964. Provisions for language assistance for LEP individuals shall include but not be limited to the following:
1. Notice of available language services to LEP offenders and/or visitors at the main entrance to the facility, district office, intake, visitation galleries, and in the inmate library.
  2. Assessment: During the intake process, offenders requiring language or literacy assistance will be offered Language Identification (“I Speak) Guide to determine if the offender has a literacy or language deficiency. The names of those offenders requiring LEP services will be documented and reported to the LEP Coordinator immediately. An interpreter will be provided through utilization of institutional staff, volunteers, or contract interpreters to determine the extent of their proficiency.

Subject: TITLE VI – LIMITED ENGLISH PROFICIENCY (LEP)

- a. The LEP Coordinator at each TDOC facility shall receive an access code from the contracted vendor for interpreter services that shall be used for telephonic interpretation services.
- b. The LEP Coordinator at each district office shall contact the Director of Contract Administration at Central Office to request translation services. Request shall be made at least 48 hours in advance and the following information shall be provided:
  1. Offender First/Last Name
  2. Offender TDOC ID#
  3. Offender's Native Language
  4. Purpose of Appointment
  5. Appointment Date and Time
  6. Appointment Location (including street address)
  7. Contact Information for Staff Requesting Appointment
- c. Privately managed facilities shall ensure that qualified language interpreter services and/or document translation services are provided for non-English speaking offenders, and shall submit an LEP plan annually to the LEP Coordinator (TDOC Title VI Coordinator).
- d. No institution or community supervision office shall rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties or the investigation of an inmate's allegation under CFR 115.64 and Policy #502.06.2.

B. Types of Interpretation:

1. Telephonic interpretation: Interpreting services provided via telephone.
2. In-Person (Live) Interpretation: Interpreting services provided face-to-face between an interpreter and a non-English speaking individual

C. Procedures for Requesting and Documenting Interpretation/Translation Services:



1. Language Assistance Measures: TDOC staff, volunteers, or contract interpreters may be used to provide LEP assistance. The name of the individual providing interpreter services shall be documented on the offender management system (OMS) conversation screen (LCDG). The LEP Coordinator shall ensure that the other departments within TDOC are notified of the inmate's limited English proficiency status and/or need for interpreter services (i.e, classification, medical, mental health, count room, unit managers, PREA Coordinator, PREA Compliance Manager, etc.)

Subject: TITLE VI – LIMITED ENGLISH PROFICIENCY (LEP)

2. Orientation/Classification Assignment and Hearing: The Counseling Service Team will evaluate the ability of the offender to understand without an interpreter. If it is evident that the offender's knowledge of the English language is insufficient then interpretation services shall be provided. The unit team will evaluate the ability of the inmate to understand the classification procedures and conduct a structural interview through an interpreter if necessary for understanding, and provide an explanation of the sentence structure. The Chief Counselor/designee will conduct all classification hearings through an interpreter (if necessary) and provide an explanation of the results of the hearing and the recommendations made during the hearing.
3. Medical/Mental Health Staff: The medical/mental health staff shall evaluate the ability of the offender to understand the consultation/treatment and the need for an interpreter. The treatment/non-treatment will be fully explained to the offender utilizing an interpreter, if necessary, for comprehension (See Policy #113.22). Offenders shall never be used as interpreters as it is related to dealing with inmate health care. The name of the interpreter shall be documented in the medical chart.
4. Disciplinary Procedures: Offenders shall be provided interpretation services, as necessary, in order to discuss his/her case prior to the hearing and throughout the hearing process up to and including appeals. Offenders shall never be used as interpreters at disciplinary hearings. The name of the interpreter shall be recorded on the disciplinary report.
5. Grievance Procedures: Offenders shall be provided interpretation services, as necessary, to assist in the submission of grievances or in order to discuss his/her case prior to the hearing and throughout the hearing process up to and including appeals. The name of the interpreter shall be recorded on Inmate Grievance, CR-1394 (See Policy #501.01)
  - a. Any offender who wishes to file a LEP complaint regarding language access may file a grievance by completing an Inmate Grievance, CR-1394 (See Policy #501.01).
  - b. Offenders under community supervision may file a LEP complaint by completing the Complaint under Title VI Civil Rights Act of 1964, CR-3893 (See Policy #705.07).
  - c. The LEP Coordinator shall investigate the complaint according to the procedures outlined in TDOC Policies #501.01 and #705.07 and provide written notice of the disposition of the LEP complaint in the offender's primary language.
6. Education/Programs: Education and/or program staff shall determine the need for interpretation services. Educational/program materials shall be provided in the language of the offender if available.
7. Housing Assignments: Unit management staff shall monitor the housing assignments of all LEP inmates and ensure that interpretation services are provided as needed.
8. Court Appearances: The records office shall notify the court if interpreter services are required in ample time to allow the courts to locate an interpreter.

Effective Date: February 1, 2019	Index # 103.10.1	Page 5 of 5
Subject: TITLE VI – LIMITED ENGLISH PROFICIENCY (LEP)		

9. Parole Hearings: The Chief Counselor/designee will notify the Institutional Parole Officer (IPO) when a LEP inmate is scheduled to meet the parole board. The facility will ensure that an interpreter is available for the parole hearing if needed.
- D. Notifying the Public about Language Services: Posters and language identification guides from the contracted vendor shall be posted at each facility and district office (i.e., building entry, intake, visitation galleries, etc.) stating that interpreters are available free of charge to LEP individuals.
- E. Procedures for Accessing Document Translation Services: Should the LEP Coordinator identify a need for a specific document to be translated a request shall be forwarded to the Forms, Publications, and Printing Liaison.
- F. The TDOC shall monitor compliance regarding Limited English Proficiency through the following:
1. The annual inspection process
  2. Each LEP Coordinator shall maintain and update an LEP Policy which is included in the *Title VI Site Coordinator's Manual* (See Policy #103.10).
  3. The completion of Title VI Tracking-Limited English Proficiency (LEP) Services Provided, CR-3546. (See Policy #103.10)
- G. New employees shall receive training regarding the requirements of LEP during orientation. Current employees shall receive training during their annual in-service. Additionally, sub-recipients must provide LEP training to their staff. This training may be administered by the use of lesson plans and/or outlines; training will be reviewed and approved by TDOC annually.
- VII. ACA STANDARDS: None.
- VIII. EXPIRATION DATE: February 1, 2022.

 <p style="text-align: center;"> <b>ADMINISTRATIVE POLICIES AND PROCEDURES</b>          State of Tennessee          Department of Correction       </p>	Index #: 704.01	Page 1 of 8
	Effective Date: April 1, 2023	
	Distribution: C	
	Supersedes: 704.01 (9/1/20)	
Approved by: 		
Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)		

- I. AUTHORITY: TCA 4-3-603, TCA 4-3-606, Title 40, Chapter 28, Part 6, TCA 40-35-303, TCA 40-35-313, TCA 39-13-524, TCA 39-13-526.
- II. PURPOSE: To supervise offenders in the community consistently and effectively by following evidence-based practices allowing the agency to focus maximum resources on higher risk offenders.
- III. APPLICATION: Assistant Commissioner of Community Supervision, Assistant Commissioner of Rehabilitative Services, all Tennessee Department of Correction (TDOC) Community Supervision staff, Day Reporting Center (DRC) Correctional Administrators and staff, and offenders.
- IV. DEFINITIONS:
  - A. Compliance: The degree to which an offender has adhered to the supervision requirements of his/her supervision level and the degree to which the Probation Parole officer (PPO) has monitored the offender's performance.
  - B. Contact Note Code: The four-character code entered to record a specific task into an offender's offender management system (OMS) case note history and document compliance with a standard.
  - C. Day Reporting Center (DRC): A highly structured, non-residential substance use treatment program that combines rehabilitation, supervision, treatment and re-entry services.
  - D. Face to Face Contact (FAC): PPO - Offender contact, whether in the office (FACO) or the field (FACF) that is made person to person, or by virtual platform (FACV), where the PPO visually confirms the person with whom he or she is conversing is the offender.
  - E. Interstate Compact Offender Tracking System (ICOTS): The system used by the Interstate Commission of Adult Offender Supervision to track offenders.
  - F. Monitoring: The act of observing, detecting, or recording actions, interactions, or documentation as it relates to the supervision of offenders.
  - G. Offender Case Plan: For the purposes of this policy, an individual series of tasks outlined for an offender to follow in order to successfully complete the special conditions of supervision and/or the needs identified by the risk and needs assessment tool adopted by the Department.
  - H. Records Disposition Authorization (RDA): A written directive that sets forth the procedures by which agency records shall be retained and disposed. An RDA is not binding until it has been approved by the Public Records Commission.

## Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)

- I. Risk and Needs Assessment (RNA): For purposes of this policy, a process utilized in determining the degree of risk an offender presents to the community, assessing the offender's needs for assistance and surveillance and identifying the availability of resources.
  - J. Supervision Codes: Three-digit computer programming codes that are entered into the OMS conversation screen Supervision Plan (LCDF), which instructs OMS as to the requirements for different standards of supervision.
  - K. Supervision Level: The category to which an offender is assigned and determines the standards of the offender's supervision requirements.
  - L. Standards of Supervision: The type and frequency of activity or contact that PPO schedules on behalf of each offender.
  - M. Virtual Home Visit: Contact between the PPO and offender via video platform in which the offender uses video and conducts a virtual walk-through of the offender's residence, which includes showing the numerical address (mailbox/address on the house) to ensure compliance with conditions of supervision.
- V. POLICY: The Department shall supervise all offenders on supervision, including probation and parole, and in accordance with standards that ensure public safety through the use of effective monitoring, sanctions, and rewards.
- VI. PROCEDURES:
- A. PPOs shall utilize the standards of supervision according to the supervision level as described throughout this policy.
    1. Enhanced (1EN): This supervision level includes offenders ordered by the court to be placed under enhanced or intensive supervision and offenders assessed as "criminally diverse" or "high violent," "high property," or "high drug" by the risk and needs assessment tool adopted by the Department. The requirements for this class of supervision are:
      - a. Face to face contact/three per month using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
      - b. Home visit/one per month documented by FACF/HOMF
      - c. Supervision fee verification/one per month
      - d. Special conditions verification/one per month
      - e. Arrest check/one per month
      - f. Employment verification/one per month
      - g. Drug screen/one every six months for offenders with high or moderate drug needs as assessed on the risk needs assessment, or as required by the court/Board of Parole. All offenders are subject to a reasonable suspicion drug screening.
      - h. Risk reassessment/one annually



Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)

- i. Offender case plan/one every three months
  - j. Progress report (ICOTS)/one annually, if applicable
2. Intake (2IN): This supervision classification is for offenders transitioning from the courts or institutions to community supervision. Offenders shall be assigned to this supervision level at the beginning of their supervision. Offenders will remain in the intake plan of supervision for two calendar months, not exceeding 75 days. After the second calendar month, offenders shall be placed in the corresponding supervision level based on their assessed level of risk pursuant to Policy #703.02. The requirements for this class of supervision are:
  - a. Face to face contact/two per month using any of the following: office (FACO/FAC1/FAC2), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  - b. Home visit/one per month documented by FACF/HOMF
  - c. Supervision fee verification/one per month
  - d. Special conditions verification/one per month
  - e. Arrest check/one per month
  - f. Employment verification/one per month
  - g. Drug screen/one every two months for all intake offenders
  - h. Risk assessment/one per month
  - i. Offender case plan/one every two months
3. Medium (4ME): This supervision level includes offenders assessed as “moderate” by the risk and needs assessment tool adopted by the Department, and the requirements for this class of supervision are:
  - a. Face to face contact/one every two months using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  - b. Home visit/one every six months documented by FACF/HOMF
  - c. Supervision fee verification/one every two months
  - d. Special conditions verification/one every two months
  - e. Arrest check/one every two months
  - f. Employment verification/one every two months
  - g. Drug screen/one annually for offenders with high or moderate drug needs as assessed on the risk needs assessment, or as required by the court/Board of Parole. All offenders

are subject to reasonable suspicion drug screening.

- h. Risk reassessment/one annually
  - i. Offender case plan/one every six months
  - j. Progress Report (ICOTS)/one annually, if applicable
4. Minimum (4MI): This supervision level includes offenders assessed as “low” by the risk and needs assessment tool adopted by the Department. The requirements for this class of supervision are:
- a. Face to face contact/one every four months using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  - b. Home visit/one annually documented by FACF/HOMF
  - c. Supervision fee verification/one every four months
  - d. Special conditions verification/one every four months
  - e. Arrest check/one every four months
  - f. Employment verification/one every four months
  - g. Drug screen/one per year for offenders with high or moderate drug needs as assessed on the risk needs assessment, or as required by the court/Board of Parole. All offenders are subject to a reasonable suspicion drug screening.
  - h. Risk reassessment/one annually
  - i. Offender case plan/one annually
  - j. Progress report (ICOTS)/one annually, if applicable
5. The DRC Supervision Levels shall include offenders ordered to participate in the DRC program by the Parole Board, the sentencing court, the behavioral health specialist, or the PPO per Policy #514.01. Offenders shall be placed in the appropriate supervision level based on their RNA assessment once all three phases have been successfully completed and they are transitioned from the DRC program:
- a. DRC Phase 1 (1D1): This initial level of supervision is for offenders entering the DRC program and has the following requirements:
    - 1. Face to face contact/three per month using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
    - 2. Home visits/one per month documented by FACF/HOMF
    - 3. Supervision fee verification/one per month
    - 4. Special conditions verification/one per month

Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)

5. Arrest check/one per month
  6. Drug screen/four per month for all DRC Phase 1 offenders. All offenders are also subject to a reasonable suspicion drug screening.
  7. Risk assessment/one annually
  8. Offender case plan/one every three months
  9. Progress report (ICOTS)/one annually, if applicable
- b. DRC Phase 2 (2D2): This supervision level is for offenders who have successfully completed all DRC Phase 1 requirements and has the following requirements:
1. Face to face contact/two per month using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office
  2. Home visits/one every two months documented by FACF/HOMF
  3. Supervision fee verification/one per month
  4. Special conditions verification/one per month
  5. Arrest check/one per month
  6. Employment verification/one per month
  7. Drug screen/two per month for all DRC Phase 2 offenders. All offenders are also subject to a reasonable suspicion drug screening
  8. Risk assessment/one annually
  9. Offender case plan/one every three months
  10. Progress report (ICOTS)/one annually, if applicable
- c. DRC Phase 3 (3D3): This supervision level is for offenders who have successfully completed all DRC Phase 2 requirements and has the following requirements:
1. Face to face contact/one per month using any of the following: one (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  2. Home visits/one every three months documented by FACF/HOMF
  3. Supervision fee verification/one per month
  4. Special conditions verification/one per month
  5. Arrest check/one per month
  6. Employment verification/one per month

Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)

7. Drug screen/one per month for all DRC Phase 3 offenders. All offenders are also subject to a reasonable suspicion drug screening.
  8. Risk assessment/one annually
  9. Offender case plan/one every three months
  10. Progress report (ICOTS)/one annually, if applicable
6. Warrant on Bond (WRB): Offenders released on bond, pending a revocation hearing, shall be placed in this supervision level until disposition of revocation, and the requirements are:
- a. Face to face contact/two per month using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  - b. Home visit/one per month documented by FACF/HOMF
  - c. Supervision fee verification/one per month
  - d. Special conditions verification/one per month
  - e. Arrest check/one per month
  - f. Employment verification/one per month
  - g. Drug screen/one every six months for offenders with high or moderate drug needs as assessed on the risk needs assessment, or as required by the court/Board of Parole. All offenders are also subject to a reasonable suspicion drug screening.
  - h. Risk assessment/one annually. However, they will remain WRB supervision level until there is a revocation disposition. If the offender is returned to supervision after the disposition of a revocation, the risk assessment shall be completed pursuant to Policy #703.02 to determine the appropriate level of supervision.
  - i. Offender case plan/one every three months
  - j. Progress Report (ICOTS)/one annually, if applicable
7. Post Violation (2PV): Offenders shall be assigned to this level of supervision after the disposition of a revocation warrant for 30 days, and the requirements are:
- a. Face to face contact/two per month using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  - b. Home visit/one per month documented by FACF/HOMF
  - c. Supervision fee verification/one per month
  - d. Special conditions verification/one per month
  - e. Arrest check/one per month

## Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)

- f. Employment verification/one per month
  - g. Drug screen/one per month for all post-violation offenders
  - h. Risk reassessment/one per month
  - i. Offender case plan/one every two months
  - j. Progress Report (ICOTS)/one annually, if applicable
8. Compliant Reporting(4TR): This supervision class is exclusively for offenders that have been placed on the TDOC's official interactive voice recognition reporting program. All cases shall be transferred to Compliant Reporting pursuant to Policy #704.01.1. The requirements for this level of supervision are:
- a. Face to face contacts/two annually using any of the following: office (FACO), field (FACF), or virtual (FACV). If offenders are unable to report virtually, they shall report to the office.
  - b. Home visits/two annually. One shall be conducted in person and documented by FACF/HOMF. The remaining home visit may be conducted virtually and documented by FACV/HOMV.
  - c. Arrest check/one every six months
  - d. Risk reassessment/one annually
  - e. Offender case plan/one annually
  - f. Progress report (ICOTS) one annually, if applicable
9. Administrative: This classification includes the following supervision levels:
- a. Abscond (9AB): Offenders who willfully avoid supervision or make their whereabouts unknown to their PPO. Once an offender has been determined to be an Absconder pursuant to Policy #707.22, they shall be moved to this plan of supervision. This level of supervision requires one local arrest check every six months documented by ARRN or ARRP, and one national arrest check through NCIC annually documented by BBNN or BBNP.
  - b. Deported (9DP): Offenders identified as having been deported before expiring their suspended sentence. This supervision level requires one national arrest check through NCIC annually documented by BBNN or BBNP.
  - c. Detainer (9DT): Offenders identified as being detained for pending charges. This supervision level requires one monthly verification of incarceration.
  - d. In Custody (9IC): Offenders identified as being incarcerated. This supervision level requires one monthly verification of incarceration.
  - e. ICOTS Out (9IS): Offenders identified as having their Tennessee supervision transferred to another state. This supervision level requires one national arrest check through NCIC annually documented by BBNN or BBNP and one annual progress report.

## Subject: STANDARDS OF OFFENDER SUPERVISION (PROBATION AND PAROLE)

- f. Judicial Suspended Sentence (9JS): Offenders with sentencing court orders relieving them from community supervision reporting requirements as a condition of their probation. This supervision level requires one national arrest check through NCIC annually documented by BBNN or BBNP.
  - g. Not In Arrest (NIA): This supervision level is for absconding offenders located with non-extraditable violation warrants pursuant to Policy #707.22. This level of supervision requires one local arrest check every six months documented by ARRN or ARRP, and a national arrest check through NCIC annually documented by BBNN or BBNP.
  - h. Residential Treatment (9RT): Offenders identified as being placed in an inpatient treatment facility or residential placement for mental health, substance use, or physical care for a minimum of 28 days. Offenders in this supervision level are either not allowed to leave the premises or in a physical state that would prevent them from doing so. Offenders assigned and actively supervised by the specialty court program in which the offender is not being held in a secure facility but living in the community may be placed on this supervision level. If residential treatment is provided by a caretaker in their personal residence, there must be documentation from a licensed health care professional. Supervision level requires one verification of placement per month and one progress report per year if the offender's supervision was transferred to Tennessee from another state.
  - i. Suspension of Direct Supervision (9SD): Offenders identified as having received permission from the ACCS to suspend the requirement to report to Community Supervision as a condition of their parole. This supervision level requires one national arrest check through NCIC annually documented by BBNN or BBNP.
10. Warrant (9WR): Offenders identified as having an active warrant for their arrest. This supervision level requires one monthly arrest check.

B. Compliance:

1. The PPO shall, at a minimum, supervise offenders according to their supervision level. For purposes of auditing, time frequencies shall be counted beginning the first full month following the person's release on supervision.
2. It is recognized that a PPO cannot physically control whether or not the offender keeps a scheduled appointment or when or whether phone calls are returned. The PPO shall plan and execute a remedial action when the offender misses a scheduled required activity or contact.
3. Each contact or activity that the officer schedules and completes, or attempts to complete (and if incomplete, therefore plans, enters, and executes a remedial action), shall be entered in OMS conversation screen Contact Notes using code (LCDG) pursuant per Policy #706.03.


- C. Records Retention: Records associated with this policy shall be maintained in accordance with established RDAs. Records must be stored in a secure area. Destruction of these records shall be completed in accordance with TDOC Policy 109.03.

VII. APPLICABLE FORMS: None.

VIII. ACA STANDARDS: 4-APPFS-2A-03, 4-APPFS-2A-07, 4-APPFS-2A-08, 4-APPFS-2B-11, 4-APPFS-2D-04, 4-APPFS-2E-01.

IX. EXPIRATION DATE: April 1, 2026

## Standards of Supervision

															
Risk & Needs Assessment	TOMIS Supervision Code		Face-to-Face	IOT Reporting (if applicable)	Home Visit	Supervision Fee Verification	Special Conditions Verification	Arrest Check	Employment Verification	Drug Screen	Risk Assessment/Reassessment	Offender Case Plan	Verification of Custody	NCIC	ICOTS Progress Report (if applicable)
Intake	2IN	Intake	2 per month	0	1 per month	1 per month	1 per month	1 per month	1 per month	1 every 2 months	1 per month	1 every 2 months	0	0	0
Criminally Diverse, High Violent High Property, or High Drug	1EN	Enhanced	3 per month	0	1 per month	1 per month	1 per month	1 per month	1 per month	1 every 6 months**	1 annually	1 every 3 months	0	0	1 annually
Moderate	4ME	Medium	1 every 2 months	0	1 every 6 months	1 every 2 months	1 every 2 months	1 every 2 months	1 every 2 months	1 annually**	1 annually	1 every 6 months	0	0	1 annually
Low	4MI	Minimum	1 every 4 months	0	1 annually	1 every 4 months	1 every 4 months	1 every 4 months	1 every 4 months	1 annually**	1 annually	1 annually	0	0	1 annually
Compliant Reporting	4TR	Compliant Reporting	1 every 6 months	1 per month	1 every 6 months*	0	0	1 every 6 months	0	0	1 annually	1 annually	0	0	1 annually
Violations	9WR	Active VOP Warrant	0	0	0	0	0	1 per month	0	0	0	0	0	0	0
	WRB	Warrant on Bond	2 per month	0	1 per month	1 per month	1 per month	1 per month	1 per month	1 every 6 months**	1 annually	1 every 3 months	0	0	1 annually
	2PV	Post Violation	2 per month	0	1 per month	1 per month	1 per month	1 per month	1 per month	1 per month	1 per month	1 every 2 months	0	0	1 annually
Administrative	9AB	Absconder	0	0	0	0	0	1 every 6 months	0	0	0	0	0	1 annually	0
	NIA	Not in Arrest	0	0	0	0	0	1 every 6 months	0	0	0	0	0	1 annually	0
	9DP	Deported	0	0	0	0	0	0	0	0	0	0	0	1 annually	0
	9DT	Detainer	0	0	0	0	0	0	0	0	0	0	1 per month	0	0
	9IC	In Custody	0	0	0	0	0	0	0	0	0	0	1 per month	0	0
	9IS	ICOTS Out	0	0	0	0	0	0	0	0	0	0	0	1 annually	1 annually
	9IS/9SD	JSS/SDS	0	0	0	0	0	0	0	0	0	0	0	1 annually	0
	9RT	Residential Treatment	0	0	0	0	0	0	0	0	0	0	1 per month	0	1 annually
DRC Supervision Levels	1D1	Phase 1	3 per month	0	1 per month	1 per month	1 per month	1 per month	0	4 per month	1 annually	1 every 3 months	0	0	1 annually
	2D2	Phase 2	2 per month	0	1 every 2 months	1 per month	1 per month	1 per month	1 per month	2 per month	1 annually	1 every 3 months	0	0	1 annually
	3D3	Phase 3	1 per month	0	1 every 3 months	1 per month	1 per month	1 per month	1 per month	1 per month	1 annually	1 every 3 months	0	0	1 annually

\*Compliant Reporting Home Visits-One of the required home visits may be completed virtually

\*\*Drug screen offenders assessed with a high or moderate drug need on the Risk & Needs assessment tool or as ordered by the Court or Board of Parole.

All offenders on the Intake, Post Violation, and DRC supervision levels shall receive drugs screens as indicated by the standards of supervision. Also, all offenders are subject to a reasonable suspicion drug screening

02-2023



ADMINISTRATIVE POLICIES  
AND PROCEDURES  
State of Tennessee  
Department of Correction

Index #: 704.01.1

Page 1 of 6

Effective Date: September 1, 2020

Distribution: C

Supersedes: 704.01.1 (6/15/18)

Approved by: Tony Parker

Subject: COMPLIANT REPORTING

- I. AUTHORITY: TCA 4-3-603, 4-3-606, 40-28-601, 40-28-608, 40-35-303.
- II. PURPOSE: To establish guidelines for the supervision of offenders placed in a level of supervision that uses an interactive voice recognition system (also known as Compliant Reporting) as well as those offenders on interactive offender tracking (IOT) as a sanction.
- III. APPLICATION: Assistant Commissioner of Community Supervision and Tennessee Department of Correction (TDOC) Community Supervision staff.
- IV. DEFINITIONS:
  - A. Action Items: A list of action items in the Compliant Reporting (CR) vendor software that are related to enrolling or exiting offenders in the CR program, transferring offenders between CR officer caseloads and performing offender caseload maintenance.
  - B. Arrest Event System (AES): Automated arrest program that provides arrest reports based on input data from participating law enforcement agencies.
  - C. Compliant Reporting (CR): A level of supervision for qualifying offenders that allows them to report through voice recognition software.
  - D. Drug Offender: For this policy, a drug offender is an offender who is assessed as high drug risk level on the current TDOC risk needs assessment tool.
  - E. Fee Payment Schedule: A schedule agreed to by the offender that stipulates the amount of money he/she will pay monthly until the amount owed is paid in full.
  - F. Interactive Voice Recognition software: An online telephonic computer aided software used for offenders reporting to the CR program.
  - G. Interstate Compact Offender Tracking System (ICOTS): A federal program designed to monitor the transfer and supervision of offenders between states.
  - H. Manager's Review: A review of an offender's case record by a Probation Parole Manager for the purpose of determining an offender's eligibility for CR and for compliance with the conditions of supervision. This differs from a file audit in that an audit is a more thorough process.
  - I. Offender Fee System: Tennessee offender supervision fee program. The accounting program used to maintain and track the offender's state fee obligation.
- V. POLICY: The TDOC shall provide an electronic supervision system for the monitoring of designated offenders.



Effective Date: September 1, 2020	Index # 704.01.1	Page 2 of 6
Subject: COMPLIANT REPORTING		

VI. PROCEDURES:

A. Offender Justification for Referral to Compliant Reporting

1. The offender must have:
  - a. Completed intake in accordance with the standards of supervision; and
  - b. Been in a minimum supervision level for one year; or
  - c. Been in a medium supervision level for 18 months.
2. The offender must be in significant compliance:
  - a. No arrests or sanctions higher than Level 1 in the past one year.
  - b. Fees have been paid in full or partial payments are being made in compliance with a pre-determined payment plan. An offender with fee arrearages of \$2000 or less, on the current sentences as verified on the Offender Fee System, must be making payments per payment schedule for three consecutive months prior to being moved to compliant reporting.
  - c. All offenders, excluding drug offenders, must have passed one drug screen within the past 12 months of being referred for Compliant Reporting. In the past 12 months, drug offenders must have passed two drug screens, with the most recent drug screen being negative prior to being referred for Compliant Reporting. An offender, other than a drug offender, who tests positive for drugs must wait six months to become eligible for another referral. Drug offenders must have no positive drug screen results for the 12 months prior to another referral being made.
  - d. Special conditions are current.
  - e. Has reported as instructed without incident, unless excused and documented by the officer.
3. Offenders are ineligible for CR if they are on supervision for any of the following offenses or facilitation of or an attempt to commit any of the following:
  - a. Domestic abuse or domestic assault,
  - b. Driving under the influence (DUI) or driving while intoxicated in the past five years,
  - c. Any crime against a person which resulted in physical bodily harm, or
  - d. Any crime where the victim was under the age of 18.
4. If the offender has a previous conviction for one of the crimes listed in Section VI.(A)(3) but is not currently on supervision for one of those crimes, then the DD shall make a case by case determination as to whether an offender is suitable for CR. The DD review process is waived if the expiration date is more than ten years old.
5. Offenders in the Programmed Supervision Unit (PSU) and offenders with murder convictions are ineligible for CR.

Effective Date: September 1, 2020	Index # 704.01.1	Page 3 of 6
Subject: COMPLIANT REPORTING		

6. The offender must be in the minimum or medium supervision level. Offenders with special conditions may participate in the program. Compliant reporting officers shall monitor those special conditions accordingly.
  7. Misdemeanor offenders shall be moved to CR once the intake process is complete with the exception of offenders that fall into one or more of the categories below:
    - a. Registered sex offenders
    - b. Convictions for DUI or domestic violence
    - c. Pending charge/violation
    - d. Within 60 days of sentence expiration
- B. Offender Referrals to Compliant Reporting: Staff shall complete Compliant Reporting Checklist, CR-3946, and Telephone Reporting Referral, CR-3947, for each offender considered for Compliant Reporting prior to making the referral:
1. Complete and submit CR-3946 and CR-3947 to the supervisor for approval.
  2. The PPM shall review the Compliant Reporting Referral form, CR-3947, and Compliant Reporting Checklist, CR-3946, for completeness and to ensure the offender meets the criteria for CR.
- C. Maintaining the Offender's CR Vendor Software File
1. The CR officer shall set up and maintain the offender's file on the vendor's software and complete action items as they occur. The CR officer shall:
    - a. Print, organize, and mail the offender's new enrollment packet to the offender,
    - b. Enter special conditions,
    - c. Verify that the data from the offender management system imported accurately into vendor's software. Verify that the offender's primary and alternate phone numbers are correct.
    - d. Update the offender employment data as job changes or periods of unemployment occur,
    - e. Update offender contact, and
    - f. Update offender primary and mailing addresses and ensure the offender's current address is reflected in the offender management system.
  2. Action items shall be completed monthly.
  3. Compliant reporting officers shall enter offender contacts with the vendor software in the offender management system (OMS) as a contact note.

Effective Date: September 1, 2020	Index # 704.01.1	Page 4 of 6
Subject: COMPLIANT REPORTING		

D. Supervision of Offenders on Compliant Reporting

1. Offenders on the CR program shall not incur additional fees for participating in the program.
2. Offenders on the CR program shall call the provided toll free number as required per the compliant reporting and transitional supervision level.
3. Offenders who fail to call in as required shall receive an automated telephone call to the primary number listed on the vendor software.
4. If the offender does not respond to the instructions provided in the automated call, the CR officer shall:
  - a. Attempt to make contact with the offender.
  - b. Document all efforts to contact the offender, to include but not be limited to the telephone numbers called, time/date of calls, and communications with any known collateral contacts.
5. Offenders who fail to call in for the month and who do not respond to the CR officer's attempts to make contact, which can include text message, phone call, mailed letter, and/or home visit, shall be discharged from the program and returned to previous supervision level.
6. At the beginning of each month, the CR officer shall run a report from the Offender Fee System or otherwise identify which offenders have fee exemptions expiring that month. Offenders who have an exemption that is expiring that month shall be contacted by the CR officer and instructed that the exemption is expiring and that updated documentation is required to be submitted that month.

For offenders who fall behind on their supervision fees and Criminal Injury Compensation Fees, the compliant reporting officer shall:

- a. Contact offender reminding of his/her supervision fee obligation.
  - b. Third consecutive month missed payment: Offender will be sanctioned per sanction matrix. See Policy# 704.10.
7. CR officers shall utilize the Arrest Event System (AES) system to monitor any offender arrests pursuant to Policy #704.01.
- E. Compliant Reporting Offender Intrastate Transfers: Offenders requesting to move outside of their current region shall be transferred pursuant to Policy #708.01.
- F. Compliant Reporting Exit
1. Compliant reporting officers shall complete case closing activities (case closing summary/TEPE, discharge movement, discharge certificates) for offenders who are discharged from supervision due to expiration of sentence, court order, Board of Parole action, or death.

Effective Date: September 1, 2020	Index # 704.01.1	Page 5 of 6
Subject: COMPLIANT REPORTING		

2. If for any reason the CR offender is required to go to court or institutional hearing, staff from the referring office shall be responsible for any court or hearing action including the preparation of the violation of Probation/Parole (VOP) report. If required, the offender may be removed and returned to regular supervision.
  3. When a violation is required according to policy, the CR officer will refer the case to probation parole manager for reassignment to the referring supervising officer.
- VII. ACA STANDARDS: 4-APPFS-2A-07, 4-APPFS-2A-08, 4-APPFS-2A-10, 4-APPFS-2B-01, 4-APPFS-2B-02, 4-APPFS-2E-01
- VIII. EXPIRATION DATE: September 1, 2023.



TENNESSEE DEPARTMENT OF CORRECTION  
COMMUNITY SUPERVISION

**Compliant Reporting Checklist**

Offender Name: Enter First, Last Name.

TDOC ID #: Enter TDOC ID#

<b>Officer Responsibilities</b>	<b>Referring Officer:</b>	<b>Enter Officer Name.</b>
<input type="checkbox"/> Offender casefile review		Date Completed
<input type="checkbox"/> Compliance Monitoring process discussed with the offender		Date Completed
<input type="checkbox"/> Offender residence verified and correct in Offender Management System		Date Completed
<input type="checkbox"/> Offender telephone number verified and correct in Offender Management System		Date Completed
<input type="checkbox"/> Offender voice mail verified		Date Completed
<input type="checkbox"/> Offender telephone privacy protector disabled		Date Completed
<input type="checkbox"/> NCIC check completed		Date Completed
<input type="checkbox"/> Compliant Monitoring Referral (CR3947) completed		Date Completed
<input type="checkbox"/> Contact Note entered in Offender Management System <i>(Use code REIO)</i>		Date Completed
<input type="checkbox"/> Compact Action Requests or Progress Reports completed <i>(if ISC case)</i>		Date Completed
<input type="checkbox"/> Financial obligations are current		Date Completed
<input type="checkbox"/> Fee payment schedule		Date Completed
<input type="checkbox"/> Offender Standards of Supervision compliance for current month complete		Date Completed
<input type="checkbox"/> Offender Management System is up-to-date <i>(Offender Attributes, Employment)</i>		Date Completed
<input type="checkbox"/> Documents scanned to Compliance Reporting Officer <i>(check all that apply)</i>		Date Completed
<input type="checkbox"/> Judgement Order(s), Parole Certificate, Judicial Diversion Order		
<input type="checkbox"/> Signed/Dated Compliance Monitoring Referral <i>(CR3947)</i>		
<input type="checkbox"/> Sanctions Documentation Grid		
<input type="checkbox"/> Compliance Reporting Checklist <i>(CR3946)</i>		
<input type="checkbox"/> Other: List other documents.		

<b>Manager Responsibilities</b>
<input type="checkbox"/> Compliant Reporting Checklist (CR3946) and Compliant Reporting Referral (CR3947) complete
<input type="checkbox"/> Compliant Reporting Referral (CR3947) signed and dated
<input type="checkbox"/> Offender case file reviewed
<input type="checkbox"/> Contact Note entered into Offender Management System
<input type="checkbox"/> Staff assignment change completed in Offender Management System
<input type="checkbox"/> Offender movements completed, if necessary, in the Offender Management System
<input type="checkbox"/> Update offender information in ICOTS, if necessary
<input type="checkbox"/> Checklist Complete



TENNESSEE DEPARTMENT OF CORRECTION

Telephone Reporting Referral

Offender Name: First Name Last Name. TDOC ID: TDOC ID

Referral Type:  IOT sanctioning  ATR Supervision Transfer

Physical Address	Street., City., State		Phone #: (###) ###-####.	
Current Employer	Company Name., Company Address.			
Driver's License #	DL #.	<input type="checkbox"/> Suspended		for Number. years.
		<input type="checkbox"/> Revoked		
County of Conviction	County.	Court	Court Name.	
Docket # <b>List all</b> Docket(s).				
Conviction Offenses <input type="checkbox"/> <b>See additional offenses on reverse side.</b>	Offenses.			
	Offenses.			
	Offenses.			
	Offenses.			
	Offenses.			
Case Type	<input type="checkbox"/> Regular Probation	<input type="checkbox"/> 40-35-313	<input type="checkbox"/> ISC	<input type="checkbox"/> Parole
Sentence Date	Date.	Sentence Length	Length.	Expiration Date Date.
Supervision Fees Status <i>All exemptions must be completed prior to submission</i>	\$ Assessed Amount.		Exemption Type:	Select.
	<input type="checkbox"/> Arrearage	\$ Amount.	Exemption Expiration Date:	Date. <input type="checkbox"/> Waived
Court Costs <input type="checkbox"/> Paid in Full	Balance	\$ Court Cost Balance.	Monthly Payment	\$ Amount.
			Monthly Payment:	\$ Amount.
Restitution:	Amount:	\$ Total Amount	Payment made to:	Recipient

**Special Conditions** *Check all that apply*

<input type="checkbox"/>	Alcohol and Drug Screen	Date of last drug screen	Date.
<input type="checkbox"/>	Alcohol and Drug Assessment	<input type="checkbox"/> Pending <input type="checkbox"/> Complete	Completion Date.
<input type="checkbox"/>	Alcohol and Drug Treatment <input type="checkbox"/> In-patient <input type="checkbox"/> Out-patient	<input type="checkbox"/> Current <input type="checkbox"/> Complete	Completion Date.
<input type="checkbox"/>	Counseling	<input type="checkbox"/> Anger Management	<input type="checkbox"/> Current <input type="checkbox"/> Complete Completion Date.
		<input type="checkbox"/> Mental Health	<input type="checkbox"/> Current <input type="checkbox"/> Complete Completion Date.
<input type="checkbox"/>	Community Service Work # of hours: hours.	<input type="checkbox"/> Current <input type="checkbox"/> Complete	Completion Date.
<input type="checkbox"/>	No Contact with Name.		
<input type="checkbox"/>	Programming	<input checked="" type="checkbox"/> Cognitive Behavior	<input type="checkbox"/> Current <input type="checkbox"/> Complete Completion Date.
		<input type="checkbox"/> Batterer's Intervention (SAFE)	<input type="checkbox"/> Current <input type="checkbox"/> Complete Completion Date.
		<input type="checkbox"/> Victim Impact	<input type="checkbox"/> Current <input type="checkbox"/> Complete Completion Date.
<input type="checkbox"/>	Forensic Social Worker Referral	<input type="checkbox"/> Current <input type="checkbox"/> Complete	Completion Date.

\_\_\_\_\_  
 Probation Parole Officer  
**Attach all applicable paperwork**

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Supervisor

\_\_\_\_\_  
 Date



ADMINISTRATIVE POLICIES  
AND PROCEDURES  
State of Tennessee  
Department of Correction

Index #: 704.10

Page 1 of 9

Effective Date: April 1, 2019

Distribution: C

Supersedes: 704.10 (1/6/17)  
PCN 17-5 (1/20/17)

Approved by: Tony Parker

Subject: COMMUNITY SUPERVISION SANCTIONS

- I. AUTHORITY: TCA 4-3-603, TCA 4-3-606, Title 40, Chapter 28, Part 6, TCA 40-35-303, TCA 40-35-313, TCA 39-13-524, TCA 39-13-526, TCA 40-28-703.
- II. PURPOSE: To establish guidelines for the consistent application of graduated sanctions for designated offender behaviors.
- III. APPLICATION: Assistant Commissioner of Community Supervision (ACCS) and Tennessee Department of Correction (TDOC) Community Supervision staff.
- IV. DEFINITIONS:
  - A. Administrative Review: A process by which an offender may object to sanctions which have been imposed by the Probation Parole Officer (PPO).
  - B. Community Service Work (CSW): A program within Community Supervision and administered by a coordinator who works with qualified non-profit or governmental entities to use labor by probationers and parolees on public service tasks.
  - C. Curfew: A lawful instruction establishing a specific time during a 24 hour period in which an offender must be at a certain place for a certain number of hours.
  - D. Graduated Sanctions: Structured, incremental responses to non-compliance with conditions of supervision.
  - E. Level 1 Sanctions: Low-level responses to address offender non-compliance.
  - F. Level 2 Sanctions: Mid-level responses to address offender non-compliance.
  - G. Level 3 Sanctions: High-level responses to address offender non-compliance.
  - H. Level 4 Sanctions (Zero Tolerance Violations): Offender actions which require the PPO to request a warrant from the releasing authority.
  - I. Releasing Authority: For the purpose of this policy, the releasing authority is defined as the parole board and courts.
  - J. Sanction: A swift, certain, and proportionate response by the PPO to return the offender to compliance by use of non-prison accountability measures and programs.
  - K. Sanction Imposition: A process by which a sanction is selected and confirmed in the graduated sanctions distributed application.
  - L. Sanction Matrix: A chart consisting of defined attitude/behavior offender violations and corresponding sanctions that shall be utilized to address those non-compliant offender behaviors within the context of supervision level.

Subject: COMMUNITY SUPERVISION SANCTIONS

- M. Sanction Monitor: A PPO charged with the tracking of community supervision offender sanctions by use of non-prison accountability measures and programs.
- N. Special Condition: Additional or modified rule(s) of probation or parole imposed by the Court or Board of Parole, respectively, because of an offender's unique need or for public safety purposes.
- O. Successful Sanction: The completion of all the prescribed actions to address those non-compliant offender behaviors and does not require additional sanctioning.
- P. Unsuccessful Sanction: The failure to complete all, or part, of the prescribed actions to address those non-compliant offender behaviors and does require additional sanctioning.
- V. POLICY: Graduated sanctions shall be applied to offenders as a consequence of non-compliance with the rules and conditions of their community supervision.
- VI. PROCEDURES:
- A. Violations:
1. Attitude violations and corresponding OMS contact codes:
    - a. Unemployed-Failure to Provide Verification/Seek (Employment)-EMPX
    - b. Non-payment of financial obligation-NPFO
    - c. Failure to comply with lawful instructions/Special conditions of supervision-FCLS
    - d. Failure to report violations or criminal behavior-FRVC
    - e. Failure to attend programming, treatment or Sex Offender treatment-FAPT
    - f. Positive Drug Screen during Orientation/Intake-IPDS
  2. Behavior violations and corresponding OMS contact codes:
    - a. Moved without permission or notification (excluding sex offenders), leaving the county without permission, or violation of curfew-MOPC
    - b. One Positive Drug Screen (all offenders) (Alcohol Use-Only Sex Offenders)-ORPD
    - c. Failure to report as instructed-FALR
    - d. New misdemeanor charge/citation-Class "B" or below-NMCB
    - e. Terminated from programming, treatment, or non-compliance sex offender treatment-TRPT
    - f. More than one positive drug screen (all offenders)/more than one alcohol use (Only Sex Offenders)-within a six month period-MPDS
    - g. Failure to comply with sanction-FALS
    - h. Consistently fails to report/failure to comply with sex offender treatment contract-FALC
    - i. Possession of firearm-WFIR
    - j. Positive Drug Screen for Methamphetamine- ZTPD
    - k. Refusal to submit to a Drug Screen-RSDS
    - l. Three or more non-compliance with level 1 sanctions within one year-NCS1
    - m. Two or more non-compliance with level 2 sanctions within one year -NCS2
    - n. Non-compliance with level 3 sanctions within one year -NCS3
    - o. 3<sup>rd</sup> level 2 Sanction applied w/in 6 months on separate instances MST3
    - p. Absconded Supervision-ABSV



Subject: COMMUNITY SUPERVISION SANCTIONS

- q. Refusal to Submit to a Search-RFRS
- r. New criminal Class "A" Misdemeanor arrest/conviction-NCAC
- s. New Felony arrest/conviction (arrest for sex offender)-NCAF

B. Sanction Levels: PPOs shall determine the most appropriate sanctioning response for the offender's non-compliant behavior by utilizing the Community Supervision Graduated Sanctions Distributed Application.

1. Level 1 Sanctions and corresponding OMS contact codes: PPOs shall impose sanctions no later than five business days after verifying offender non-compliance.

- a. Verbal Warning-Officer Intervention-VBW1
- b. Restrict travel privilege for 30 days-RTP1
- c. Increase reporting for 30 days-ISL1
- d. Payment Plan Established-PPE1
- e. Submit to an FSW assessment and complete all recommendations-SFS1
- f. One additional drug screen within 30 days-ADS1
- g. Attend job readiness class within 30 days-JRC1
- h. Eight hours CSW within 14 days-CSW1
- i. Curfew for 30 days-CUR1
- j. Submit weekly schedule of activities for 30 days-Sex Offender/CIP Offender-WSA1
- k. GPS Monitoring for 30 Days-Sex/CIP Offender-GPS1
- l. Use of RF 30 Days Monitoring-RFM1
- m. Refer to Community Resource Center (Substance Use Only) for evaluation-CRC1

2. Level 2 Sanctions and corresponding OMS contact codes: PPOs shall impose sanctions no later than two business days of verification of offender non-compliance.

- a. Written Warning- Officer Intervention--WSI2
- b. Restrict travel privilege for up to 60 days-RTP2
- c. Payment Plan Established-PPE2
- d. Increase reporting for 60 days-ISL2
- e. Submit to an FSW assessment and follow all recommendations-SFS2
- f. Two additional drug screens within 60 days-ADS2
- g. Attend job readiness class within 20 days-JRC2
- h. 16 hours CSW within 30 days-CSW2
- i. Curfew for 60 days-CUR2
- j. Submit weekly schedule of activities for 60 Days-Sex Offender/CIP Offender-WSA2
- k. GPS Monitoring for 60 Days-Sex/CIP Offender-GPS2
- l. Use of RF 60 days Monitoring-RFM2
- m. Refer to Community Resource Center (Substance Use Only) for evaluation-CRC2

3. Level 3 Sanctions and corresponding OMS codes: PPOs shall impose sanctions no later than one business day of verification of offender non-compliance.

- a. Restrict Travel Privilege up to 90 days-RTP3
- b. Payment Plan Established-PPE3
- c. Increase reporting
- d. Submit to an FSW assessment and follow all recommendations-SFS3
- e. Three additional drug screens within 90 days-ADS3
- f. Attend job readiness class within 15 days-JRC3

Effective Date: April 1, 2019	Index # 704.10	Page 4 of 9
Subject: COMMUNITY SUPERVISION SANCTIONS		

- g. 24 hours CSW within 45 days-CSW3
- h. Curfew for 90 days-CUR3
- i. Refer to DRC for evaluation- DRC3
- j. Refer for Risk Reassessment-RFRR
- i. Submit weekly schedule of activities for 90 Days-Sex Offender/CIP Offender-WSA3
- j. GPS Monitoring for 90 Days-Sex/CIP Offender-GPS3
- k. Use of RF 90 Days Monitoring-RFM3
- l. Three or more non-compliance in one year with Level 1 Sanctions-NCS1
- m. Two or more non-compliance in one year Level 2 Sanctions-NCS2
- n. Failure to Comply with FSW Recommendations-FCFS

4. Level 4 Sanctions (Zero Tolerance Violations) and corresponding OMS codes: PPOs shall submit a violation report and request a warrant from the releasing authority in accordance to Policies #707.20 and #707.30).

- a. Possession of a firearm-WFIR
- b. Positive Drug Screen for Methamphetamine-ZTPD
- c. Refusal to submit to a Drug Screen-RSDS
- d. Any non-compliance with a Level 3 sanction in one year.-NCS3
- e. Third Level 2 Sanction or above violation within a six month period on separate instances-MST3
- f. Absconded Supervision-ABSV
- g. Refusal to submit to a Search-RFRS
- h. New Criminal Class A Misdemeanor-NCAC
- i. New felony arrest/conviction (any Arrest for Sex Offender)-NCAF

C. When applying sanctions, the PPO shall:

1. Utilize the Community Supervision Graduated Sanctions Matrix Distributive Application to complete offender sanctions.
2. Review violation(s) and utilize the Community Supervision Sanctions Matrix to determine the most appropriate sanctioning response for the offender's non-compliance.
3. Determine if the violation is attitude or behavioral and cross reference the violation with the offender's supervision level in the Community Supervision Sanction Matrix to select the appropriate sanction(s).
4. PPOs may select up to two sanctions per violation committed, but can select no more than a total of four sanctions to be imposed.
5. If an offender incurs additional sanctions during the sanctioning monitoring process, all previous applied sanctions shall continue to be monitored throughout completion of the most recent sanction.
6. A sanction shall not be imposed for a positive drug screen until confirmation is received from the certifying laboratory or the offender signs a voluntary admission Drug Screen Results, CR-4046, pursuant to Policy #705.04.
7. If an offender disagrees with the sanction(s) imposed:

Effective Date: April 1, 2019	Index # 704.10	Page 5 of 9
Subject: COMMUNITY SUPERVISION SANCTIONS		

- a. The PPO shall impose the sanctions as outlined in VI.(B)(3) until a determination is made by management [excluding those appeal sanctions in section VI.(E)(1)].
- b. The PPO will schedule an appointment for the offender and PPO to meet with a Probation Parole Manager (PPM) according to the timeframe designated by the sanction level.
- c. The PPM shall meet with the offender and review the proposed sanction(s) and make a determination as to the appropriateness of the proposed sanctions. If necessary the PPM may make the necessary modifications to the proposed sanctions.

D. Documentation of Sanctions:

1. All sanctions shall be documented in the OMS conversation in a timeframe pursuant to Policy #706.03. PPOs shall complete a detailed comment outlining the offender's non-compliant behavior, date the PPO imposed sanction(s), the sanction level, sanction imposed, and progress with the completion of each sanction(s) imposed.
2. Sanctions shall be documented utilizing the Notice of Sanction, CR-4068, which shall be printed and placed in the offender's case file pursuant to Policy #706.01.
3. Offenders must be present at the time of sanctioning, excluding those zero tolerance violations as outlined in VI.(B)(4). The officer and offender shall sign the Notice of Sanction, CR-4068, which shall serve as notice of sanction(s) imposed. Offenders shall receive a copy of the notice of sanction form after the aforementioned signatures are obtained, which also provides the offender with information pertaining to the right of appeal, if applicable.

E. Monitoring/Approving Sanctions:

1. Probation Parole Managers (PPMs) shall ensure all sanctions are approved within the timeframes as outlined in VI.(B)(4).
2. Probation Parole Managers shall sign the Level 2 and Level 3 Notice of Sanction, CR-4068, after the form is signed by the probationer or parolee and the supervising officer.
3. If the zero tolerance violation is not approved by the releasing authority, the PPM will disapprove the sanction in the application, enter the reason for the disapproval in the notes section, and applicable sanctions shall be applied.
4. PPMs shall conduct a daily review of the monitor report, which is located in the Community Supervision Sanction Distributive Application. PPMs will review and monitor all sanctions which have been applied. PPMs shall monitor the Community Supervision Graduated Sanctions Matrix Distributive Application on a daily basis to ensure all sanctions pending PPM review are addressed.
5. PPMs shall discuss sanctions which have been applied with PPOs each week, and ensure appropriate documentation and OMS contact notes have been completed. PPMs shall use the weekly discussion as an opportunity to provide on-going coaching sessions and training to PPOs.

Effective Date: April 1, 2019	Index # 704.10	Page 6 of 9
Subject: COMMUNITY SUPERVISION SANCTIONS		

6. If discrepancies are discovered in the sanctioning process, corrective action shall be completed.
7. PPOs shall monitor offender sanctions in the Community Supervision Graduated Sanctions Matrix Distributive Application and document the appropriate completion information by entry of the following in Matrix Distributive Application:
  - a. Successful
  - b. Unsuccessful:
    - (1) Refused to comply.
    - (2) Complied with sanction(s) but additional sanctioning required.
    - (3) Absconded.
    - (4) New Class 'A' Misdemeanor arrest/conviction.
    - (5) New Felony arrest/conviction.
    - (6) Possession of a firearm.
    - (7) Positive drug screen for methamphetamine.
    - (8) Refused to submit to a drug screen.
    - (9) Refused to submit to a search.
    - (10) Sanction not permitted by sentencing judge.
    - (11) Expiration of sentence/Court or Board ordered.
8. The District Director shall conduct a monthly review of the Sanction Tracking Report.
9. The Department shall provide the sentencing court and prosecutor's office with a Monthly Report, reflecting all sanctions imposed upon probationers under the court's jurisdiction, which will be submitted by the 10<sup>th</sup> day of each month.

F. Administrative Review of Sanctions:

1. The offender may request an administrative review for curfew sanctions.
2. The PPO shall complete the Administrative Review Request/Decision, CR-4067.
3. Sanctions imposition shall await the administrative review disposition.
4. Upon the request by the offender of an appeal request, the PPO will immediately notify the PPM and Sanction Monitor of the appeal request.
5. The Sanction Monitor shall route the Administrative Review Request/Decision, CR-4067, to the appropriate Correctional Administrator within 24 hours of receipt.
6. The Correctional Administrator (CA) shall conduct a review of the offender request to appeal and provide a written decision within three business days.
7. The CA shall provide the decision to the appropriate Sanction Monitor.
8. The Sanction Monitor shall route the final decision to the PPO of record and PPM within 24 hours of receipt.

Effective Date: April 1, 2019	Index # 704.10	Page 7 of 9
Subject: COMMUNITY SUPERVISION SANCTIONS		

9. The PPO of record shall immediately notify the offender of the decision. If the sanction is upheld, the sanction shall be imposed immediately.

VII. ACA STANDARDS: 4-APPFS-2B-11.

VIII. EXPIRATION DATE: April 1, 2022.



TENNESSEE DEPARTMENT OF CORRECTION

Drug Screen Results

Offender Name: \_\_\_\_\_

TDOC ID #: \_\_\_\_\_

Testing Location: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Requesting Officer: \_\_\_\_\_

Test Type: Select One.

**Results**

Please indicate "N" (Negative), "P" (Positive), or Rx (Verified and Valid Prescription) for each substance below

<b>COC</b> _____ Cocaine	<b>PCP</b> _____ PCP
<b>MTD</b> _____ MET-500	<b>BUP</b> _____ Buprenorphine
<b>MOP</b> _____ Opiates	<b>OXY</b> _____ Oxycodone
<b>AMP</b> _____ Amphetamines	<b>THC</b> _____ Marijuana
<b>BZO</b> _____ Benzodiazepines	<b>BAR</b> _____ Barbiturates
<b>MET</b> _____ Methamphetamine	<b>MDMA</b> _____

**Acknowledgement**

Urine Specimen collected on: \_\_\_\_\_ by \_\_\_\_\_  
Date Testing Officer

Drug screen is positive and specimen sent to the lab for confirmation testing.  
*(Offender accounts will be invoiced for the cost of confirmation testing if the lab confirms the specimen is positive for one or more substances).*

\_\_\_\_\_  
Offender Signature Officer Signature

**Voluntary Admission**

I, \_\_\_\_\_ freely and voluntarily admit that I used \_\_\_\_\_  
Print Name Substance(s) Used  
on or about \_\_\_\_\_  
Date

I am interested in a substance abuse assessment and want to speak with a Forensic Social Worker.

\_\_\_\_\_  
Offender Signature Date Testing Officer Signature Date

\_\_\_\_\_  
Offender PPO Signature Date



TENNESSEE DEPARTMENT OF CORRECTION

Notice of Sanction

<b>Offender:</b> <a href="#">Click here to enter text.</a>	<b>TDOC#:</b> <a href="#">Click here to enter text.</a>
<b>Officer:</b> <a href="#">Click here to enter text.</a>	<b>Office:</b> <a href="#">Click here to enter text.</a>
<b>Manager:</b> <a href="#">Click here to enter text.</a>	<b>Supervision level:</b> <a href="#">Click here to enter text.</a>

You have violated the conditions of your probation or parole supervision rules as outlined below. The following sanction(s) will be imposed as a result of the outlined violation. Failure to comply with these sanctions may result in a violation report submission to the court or the Board.

<b>Violation Date:</b> <a href="#">Click here to enter a date.</a>	<b>Sanction Level:</b> <a href="#">Choose an item.</a>
<b>Violation(s):</b> <a href="#">Choose an item.</a>	<b>Sanction(s) Imposed:</b> <a href="#">Choose an item.</a>
	<b>Sanction Impose Date:</b> <a href="#">Click here to enter a date.</a>
	<b>Sanction Level:</b> <a href="#">Choose an item.</a>
	<b>Sanction(s) Imposed:</b> <a href="#">Choose an item.</a>
	<b>Sanction Impose Date:</b> <a href="#">Click here to enter a date.</a>
	<b>Sanction Level:</b> <a href="#">Choose an item.</a>
	<b>Sanction(s) Imposed:</b> <a href="#">Choose an item.</a>
	<b>Sanction Impose Date:</b> <a href="#">Click here to enter a date.</a>
	<b>Sanction Level:</b> <a href="#">Choose an item.</a>
	<b>Sanction(s) Imposed:</b> <a href="#">Choose an item.</a>
	<b>Sanction Impose Date:</b> <a href="#">Click here to enter a date.</a>

Any curfew imposed as a sanction is eligible for an administrative review, at the request of the offender. A request for Administrative Review may be submitted by the offender on form CR4067 to be reviewed by a Correctional Administrator. A final decision from the administrative review will be issued within five (5) business days from the date of the request. If an administrative review has been requested, sanction imposition will remain, pending the results of the review. The administrative review decision will be provided to the offender in writing.

\_\_\_\_\_  
Offender signature

\_\_\_\_\_  
Officer Signature

\_\_\_\_\_  
Manager Signature



TENNESSEE DEPARTMENT OF CORRECTION  
**Administrative Review Request/Decision**

<b>Offender:</b>	<a href="#">Click here to enter text.</a>	<b>TDOC#:</b>	<a href="#">Click here to enter text.</a>
<b>Officer:</b>	<a href="#">Click here to enter text.</a>	<b>Office:</b>	<a href="#">Click here to enter text.</a>
<b>Manager:</b>	<a href="#">Click here to enter text.</a>	<b>Supervision level:</b>	<a href="#">Click here to enter text.</a>

**Violation Date:** [Click here to enter a date.](#)

**Sanction Level:** [Choose an item.](#)

**Violation(s):** [Choose an item.](#)

**Sanction(s) Imposed:** [Choose an item.](#)

Administrative Review Requested. The following statement is provided in support of the request for administrative review:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Offender Signature: \_\_\_\_\_ Date: \_\_\_\_\_

An administrative review has been completed by the Correctional Administrator. After reviewing the statement provided by the offender and the non-compliance violations information, the final decision in the matter of this review is:

Concur with the proposed sanction, which shall be imposed immediately.



The proposed sanction is sent back for revision. The supervising officer and manager are instructed to select an alternative sanction.

This decision is a final decision and may not be appealed beyond this level.

\_\_\_\_\_  
Correctional Administrator Signature

\_\_\_\_\_  
Date



 <p style="text-align: center;"> <b>ADMINISTRATIVE POLICIES AND PROCEDURES</b>          State of Tennessee          Department of Correction       </p>	Index #: 705.11	Page 1 of 12
	Effective Date: February 15, 2023	
	Distribution: C	
	Supersedes: 705.11 (7/1/21)	
Approved by: 		
Subject: COMMUNITY SUPERVISION OFFENDER FEES		

- I. AUTHORITY: TCA 4-3-603, TCA 4-3-606, TCA 40-35-321, TCA 39-13-524, TCA 40-35-313, TCA 40-15-105, TCA 40-28-201 et seq., TCA 40-28-118(b) TCA 40-39-201 et seq., and TCA 40-39-301 et seq.
- II. PURPOSE: To ensure a standard method of offender fee collections.
- III. APPLICATION: Assistant Commissioner of Community Supervision, all Tennessee Department of Correction (TDOC) Field Services staff, Central Office Fiscal Staff, and offenders on community supervision.
- IV. DEFINITIONS:
  - A. Administrative Status: A supervision level consisting of any supervision type which reflects that the offender is not reporting to a Probation Parole office, but whose case is active in OMS. Examples include: warrant status offenders or those in a residential treatment placement program.
  - B. Criminal Injuries Compensation Fund (CICF): A tax levied when any person is convicted of a crime of any nature by a circuit court, court of general sessions, or a comparable court of record with jurisdiction over criminal matters.
  - C. Day Reporting Center: A highly structured, non-residential program that combines supervision, treatment, and re-entry services.
  - D. Deoxyribonucleic Acid (DNA): The substance that is the main constituent of the chromosomes of all organisms and is responsible for the transmission of hereditary characteristics of parents to their offspring.
  - E. Deoxyribonucleic Acid (DNA) Fee: A fee pertaining to the DNA sample collection process.
  - F. Drug Testing Reimbursement: Monies collected from offenders to defray the cost of drug tests conducted by a licensed drug testing laboratory to confirm or disprove use of illegal drugs.
  - G. Electronic Monitoring Indigency Fund (EMFI): Designated by the legislature to be collected from any person who is under the supervision of the TDOC and enrolled in an electronic monitoring and tracking program.
  - H. Fee Assessment: Amount of money, as a Supervision Fee or as a CICF Fee, that an offender is obliged to pay monthly.
  - I. Global Positioning Satellite (GPS) Fee: Monies designated by the legislature to be collected from offenders monitored by GPS to defray the cost to probation and parole for GPS monitoring in compliance with TCA 40-39-305 and 40-28-201.

Subject: COMMUNITY SUPERVISION OFFENDER FEES

- J. Interstate Compact Transfer Application Fee: Monies designated by the legislature to be collected from offenders applying for transfer of supervision to another state in compliance with TCA 40-28-201 (a) (1).
- K. Judicial Diversion: A court proceeding whereby prosecution of an eligible and selected offender is suspended, upon request of the defendant to the Judge, for a specified time and subject to conditions imposed by the court via a memorandum of understanding. The offender enters a conditional plea of guilt. (Conditions can include fees paid to a Diversion Fund.)
- M. Offender Fee System: The process of assessing, collecting, enforcing, accounting, auditing and depositing the monies to be paid by offenders into the Supervision and CICF funds.
- N. Pre-trial Diversion: A written agreement between the prosecutor and the offender whereby prosecution of an eligible and selected offender is suspended for a specified time and subject to conditions approved by the court. There is no plea entered for this diversion. (Conditions can include fees paid to a Diversion Fund)
- O. Radio Frequency Electronic Monitoring (RF): A type of electronic monitoring of offender presence or absence from a specific location utilizing radio wave signal.
- P. Sex Offender Registration Fee: Monies designated by the legislature to be collected from qualifying sex offenders as specified in TCA 40-39-201.
- Q. Supervision and Rehabilitation Fund (Supervision Fee): Monies designated by the legislature to be collected from offenders and set aside to partially defray the cost of probation and parole oversight in the community. (Referred to by fiscal staff as Fund #11.)
- V. POLICY: Offenders on Community Supervision shall be assessed monthly fees and shall be required to pay said fees to the TDOC as established by statute unless otherwise exempted.
- VI. PROCEDURES:
- A. Fee Amounts
1. All offenders on Community Supervision shall pay fees per monthly basis unless otherwise exempted through policy or court order.
  2. Fees are accrued on a monthly basis.
  3. Offenders on a suspended sentence of probation, under the jurisdiction of a Tennessee court, shall pay \$15 per month for the supervision fee and \$30 per month to the CICF totaling \$45 per month.
  4. Offenders on a suspended probation or parole sentence, being supervised in Tennessee on behalf of another state, shall pay \$15 per month for the supervision fee.
  5. Offenders under the supervision of the TDOC who are on probation supervision for a misdemeanor shall pay \$45 per month for the supervision fee.

Subject: COMMUNITY SUPERVISION OFFENDER FEES

6. Offenders on Judicial Diversion under TCA 40-15-105 shall pay \$0 to \$25 per month for the supervision fee and \$10 per month for the Diversion Fund, as established by sentencing court order.
7. Offenders on Judicial Diversion under TCA 40-15-105 who are sentenced in Shelby County only shall pay \$0 to \$25 per month as established in the Memorandum of Understanding and \$10 per month to the Diversion Fund.
8. Offenders on Pre-trial Diversion under TCA 40-35-313 shall pay \$0 to \$35 per month to the Supervision Fee.
9. Offenders on Community Supervision for Life, TCA 39-13-524, shall pay \$15 per month to the Supervision Fee.
10. Offenders on GPS monitoring must reimburse the TDOC \$50 per month.
11. Offenders who have lost or damaged their assigned GPS monitoring equipment shall reimburse TDOC for the cost of the lost or damaged equipment at the rate provided below.
  - a) Buddi SmartTag – GPS Lost Damaged - \$500.00
  - b) Buddi Charging Dock – GPS Lost Damaged - \$50.00
  - c) Buddi On-Body Charger – GPS Lost Damaged - \$200.00
  - d) Buddi Beacon – GPS Lost Damaged - \$250.00
  - e) Buddi Strap – GPS Lost Damaged - \$50.00
12. Offenders on RF monitoring shall not be charged a usage fee.
13. Offenders who fail a drug screen that is sent to the laboratory for confirmation must reimburse the TDOC for the cost of the confirmation.
14. Offenders requesting to transfer out of Tennessee shall be assessed a \$150 transfer fee. The officer shall enter the ISCT contact note code in the offender management system (OMS) to establish this fee in OMS when the application for transfer is completed or when reporting instructions are requested in the Interstate Compact Offender Transaction System (ICOTS).
15. Offenders shall reimburse the TDOC \$37 for each DNA sample collected and submitted to the Tennessee Bureau of Investigation (TBI). The officer shall enter the DNAS contact note in OMS to establish this fee when the sample has been collected and submitted to the TBI. The DNA sample is collected to maintain compliance with TCA 40-35-321.
16. Offenders whom the TDOC registers on the Tennessee Sex Offender Registry shall pay the agency \$150 per year per TCA 40-39-204.
17. Offenders required to participate in electronic monitoring and tracking shall pay a one-time electronic monitoring initial use fee of \$12. This fee is only collected on offenders who have never been on GPS for the current supervision or any prior supervision.

Subject: COMMUNITY SUPERVISION OFFENDER FEES

- B. Fee Hierarchy: Offender payments shall be applied to the offender's fees according to the established hierarchy of fees as follows:
1. Sex offender registration
  2. DNA
  3. Electronic Monitoring Fee
  4. Past due supervision fee
  5. Current supervision fee
  6. CICF
  7. GPS
  8. GPS Lost/Damaged fee
  9. Drug testing reimbursement
  10. Interstate compact transfer fee
- C. OMS entries
1. OMS entries shall be made timely and accurately within 72 hours for new offenders to ensure that the offender fee system is properly populated and ready to accept offender fee payments.
  2. Entries to be made shall include the following OMS conversation screens:
    - a. Arrival Departure (LIMD),
    - b. Staff Assignment (LCD3),
    - c. Supervision Plan (LCDF),
    - d. Diversion (LSTT); and
    - e. Contact Notes (LCDG).
      - (1) DNAS to generate the DNA fee when a sample has been collected and submitted to the TBI.
      - (2) ISCT to generate the ISC transfer fee when an application has been completed.
      - (3) GPSI to indicate that GPS tracking has been initiated and EMFI to generate the electronic monitoring one-time initial fee.

Subject: COMMUNITY SUPERVISION OFFENDER FEES

D. Exemptions

1. Offenders may be granted an exemption towards the payment of an assessed fee based on qualifying hardship factors. Offenders must provide documentation of such hardship factor in order to qualify.
2. Hardship exemptions are:
  - a. Sole income is from Social Security Retirement, Social Security Disability Insurance, or any other government funding program. This shall qualify the offender for a full exemption of the supervision fee, CICF, GPS, GPSI or EMFI, and sex offender registration fee.
  - b. Mental or physical disability as certified by a licensed medical doctor, psychiatrist, or psychologist practicing in the State of Tennessee. This shall qualify the offender for a full exemption of the Supervision Fee, CICF, GPS, GPSI or EMFI, and sex offender registration fee.
  - c. Court or Board of Parole order waiving offender fee obligations. This shall qualify the offender for a full exemption of the supervision fee, CICF, GPS, GPSI or EMFI, and sex offender registration fee.
  - d. If the offender is paying doctor, medical, or hospital expenses exceeding 25% of his or her total gross monthly income and he or she is not covered by insurance, worker's compensation or any other source of reimbursement, then the offender shall receive a \$10 reduction in the CICF fee. The offender must supply monthly documentation of actual payments in order to receive the reduction.
  - e. If the offender is paying in excess of 25% of his or her gross monthly income toward court ordered expenses, then the offender shall receive a \$10 reduction in the CICF fee. Court ordered expenses include:
    - (1) Alimony,
    - (2) Child support; and
    - (3) Court ordered fines and fees other than restitution
  - g. If the offender is ordered to pay restitution by the sentencing court or parole board, and he or she provides monthly documentation of payment(s), then the offender shall be exempted from the \$30 CICF fee.
  - h. If the offender falls below the poverty level as specified in the U. S. Census Bureau poverty guidelines, a copy of which can be found in this policy's companion handbook, he or she shall be exempt from the \$30 CICF fee and the sex offender registry fee. Only gross household income and qualified dependent(s) as specified as acceptable under the Internal Revenue Code to claim exemptions and dependents may be used to determine if an offender is below poverty level. Staff shall refer to IRS publication 501 for definitions of qualifying dependents.
  - i. Unemployed offenders shall be monitored on a monthly basis. If the offender provides proof that he/she is actively seeking employment, then the offender

Subject: COMMUNITY SUPERVISION OFFENDER FEES

shall be exempt from the \$30 CICF fee and the sex offender registry fee. Offenders must provide documentation they are currently seeking employment or provide documentation they are registered with the Tennessee Department of Labor and Workforce Development, if available in their county of residence in order to receive this exemption. If the offender fails to provide proof of an active employment search, prior to the 25<sup>th</sup> of the month, the offender's unemployment exemption shall be discontinued for that month. Registered sex offenders who are unemployed shall be exempt for the first 60 days during their intake period from providing documentation that they are currently seeking employment or are registered with the Tennessee Department of Labor and Workforce Development in order to be eligible to receive Indigent Sex Offender Treatment Notice, CR-3890.

- j. Full time students shall be assessed fees based upon their ability to pay. For example, a full-time student, who is supported by parents/spouse/other person, may receive an exemption based upon whether the household income is below poverty level, or upon unemployment if the offender is actively seeking employment. A student status does not automatically provide an exemption.
  - k. If an offender is unable to work due to being a primary care giver for a disabled individual, adult, or child, a verification letter from the disabled individual's primary care physician is required. The letter must state that the person for whom the offender is providing care is in need of such care. The officer shall make a home visit where the offender provides care to validate the offender's obligation. Any provided documentation shall not violate HIPPA laws. Information validated by the officer that is pertinent to the fee exemption shall be documented in the OMS.
  - l. Offenders sentenced to a misdemeanor sentence are eligible for hardship exemption amounts utilized for felony offenders. For example, a misdemeanor offender with an income below poverty level would pay \$15 per month with a \$30 exemption provided towards the supervision fee.
  - m. Community Supervision for Life (CSL) offenders are responsible for supervision fees and are not responsible for CICF fees if they are only on supervision for CSL. If the offender violates his or her CSL and is placed on probation in conjunction with the CSL sentence, then he or she would be responsible for the supervision fee, the CICF fee, and the GPSI or EMFI, if applicable.
  - n. Offenders who qualify to have their sex offender registration fee waived will be exempt if the eligibility occurs in the month that the fee is required to be paid.
3. No exemption shall be given for offenders on judicial or pre-trial diversion unless the sentencing court orders such fee waived.
  4. No exemption of reimbursements, such as damaged GPS equipment, RF equipment, DNA, GPSI or EMFI, or failed drug screen confirmation testing shall be allowed unless Section VI (D)(2)(a, b, or c) apply.
  5. No exemption of the Interstate Compact (ISC) Transfer Fee shall be allowed. Incoming ISC offenders who pay \$15 per month shall only become exempt under the provisions as laid out in Section VI. (D)(2)(a-d).

Subject: COMMUNITY SUPERVISION OFFENDER FEES

E. Collection of Fees on Administrative Status Offenders

1. Fees shall not be invoiced for offenders whose supervision plan reflects an administrative status.
2. Fees shall only be invoiced once the offender's supervision plan is updated to reflect that the offender is no longer in an administrative status.

F. Other Exemption Factors

1. If a sentencing court reduces a fee by court order, either diversion or regular probation, the officer shall obey the court order.
2. Officers shall not request a judicial exemption on behalf of an offender. Exception may be made for sex offenders who are on the sex offender registry and who permanently reside in a nursing home or in a mental health facility.
3. If the offender is issued a job waiver, by either the sentencing court or the Board of Parole, the exemption shall be entered for the full fee amount.
4. If the sentencing court or Board of Parole dismisses a violation for a fee arrearage, or upholds the violation but immediately reinstates supervision without addressing the offender's responsibility for unpaid fees, the officer shall seek clarification as to the court's intent regarding the fee arrearage. If the court does not intend for the offender to pay the arrearage, the officer shall submit a Request for Backdate Fee Exemption, CR-3829, to BI-CS-Offender.Fees@tn.gov.
5. All exemptions shall expire after a term of six months with the exception of:
  - a. Permanent judicial exemptions,
  - b. Day Reporting Center phase one,
  - c. Permanent Social Security Retirement exemptions,
  - d. Permanent Social Security Disability exemptions,
  - e. Three month temporary court ordered exemptions; and
  - f. Unemployed exemptions shall expire at six months or when the offender obtains employment, whichever comes first.
6. In the event of changed circumstances, the officer shall reissue an exemption and make a notation in the OMS. The officer's manager shall make the appropriate adjustment in the offender fee system.
7. If an offender has a credit balance at the time it is determined he or she qualifies for an exemption, the exemption shall not be entered until the full credit amount has been applied.

G. Documentation of Fee Exemption

Subject: COMMUNITY SUPERVISION OFFENDER FEES

1. The officer, upon determining the offender has a valid hardship, shall complete the exemption application form.
2. The form shall be signed by both the offender and the officer and forwarded to the appropriate approving authority.
3. No exemptions shall be approved without supporting documentation attached to the request.
4. The exemption must be entered into the fee program no earlier than the month prior to the exemption's start date and no later than the same month the exemption begins.

H. Backdate Fee Exemption Requests

1. If the exemption is not entered in a timely manner, a Request for Backdate Fee Exemption, CR-3829, must be submitted to Central Office, Community Supervision Division, Probation/Parole Program Specialist.
2. No request to backdate exemptions shall be submitted due to an offender's failure to provide documentation as exemptions start only after documentation has been received.
3. Requests for backdate fee exemptions must include an explanation of why the request is being made.
4. Managers shall make a determination upon each backdate request to assure officers receive remedial instruction if the request is being made due to officer oversight or negligence. Patterns of such negligence shall be documented in interim reviews and performance evaluations. Excessive backdate requests may lead to disciplinary actions.

I. Collection Procedure

1. The officer shall take the following actions during the first personal contact with the offender:
  - a. The officer shall ensure that the offender's responsibility regarding fees is explained and documented by use of the Assessment, Notice of Obligation, or Exemption of Fees, CR-3882, and in the OMS. Offenders shall be notified of their responsibility to independently verify fee payments as a condition of their supervision. Verification may include, but is not limited to, money order receipts, credit card/bank card statements, and printed third party vendor confirmation screens.
  - b. The officer shall determine the offender's eligibility and ability to pay fees using the criteria set forth in this policy and accompanying handbook. It is the responsibility of the offender to provide documentation of any alleged hardship.
  - c. Should the offender fail to provide documentation of an alleged hardship, an exemption shall not be granted at the time the fees are assessed, nor shall a backdated fee exemption be approved at a later date. Exemptions shall only begin once the required documentation has been provided.



Subject: COMMUNITY SUPERVISION OFFENDER FEES

- d. The officer shall carefully explain to the offender that any advance payments made are non-refundable unless the payment exceeds statutory limits. Statutory limits provide that the number of fee payments is equal to and not greater than the number of months under supervision. Should the offender's payment exceed statutory limits, a refund will be made only at the written request of the offender.
      - e. The officer shall explain to the offender the consequences of non-payment of fees. Upon reaching a delinquent status in excess of 30 days, intermediate sanctions shall be applied.
      - f. The offender shall be notified that fee payments are processed by a third party vendor for the TDOC. The offender shall be provided written instructions on how to make their fee payments through the vendor.
      - g. Officers shall provide assistance to offenders when requested, or otherwise determined necessary, in the preparation of fee payments to include assistance with addressing envelopes, instructions/assistance on filling out money orders, assistance completing the third party vendor mail-in form, questions regarding the navigation of the vendor's website, and access to the vendor's automated telephone payment hotline. At no time shall officers collect fee payments for or accept cash from offenders.
    2. The fee payment for the first month shall be determined by the month the offender is placed under supervision in that the actual payment of fees shall begin the first full month of supervision.
    3. All offenders must be current in fees prior to expiration of supervision. If the offender owes fees prior to expiration, then a payment plan shall be developed for the offender.
    4. If an error occurs in determining fees, which results in an underpayment of fees through no fault of the offender, the correct amount should be determined, the offender informed, and a payment schedule arranged. In this specific incident, a violation report is not required so long as the offender complies with the payment schedule.
      - a. When payments are made and incorrectly applied due to an error in determining fee eligibility, resulting in an overpayment, a request to correct the fee error must be made through the Probation Parole Program Specialist.
      - b. The Program Specialist shall maintain documentation of the change made to the offender's fees for audit purposes for three years per RDA 1696.
- J. Fee Program and OMS
  1. The Fee Program utilized to track and maintain offender fees on probation and parole shall interact with OMS.
  2. Staff shall ensure that data entry into OMS is accurate and timely to ensure that population of offender fees is accurate and timely.
  3. Staff shall update supervision plans in a timely manner to ensure that fees start and stop properly.

Effective Date:	Index # 705.11	Page 10 of 12
Subject: COMMUNITY SUPERVISION OFFENDER FEES		

- a. All corrections to supervision plans requiring assistance from the TDOC Helpdesk, must include a completed Offender Information Fee Waiver, CR-3831, that has been signed by a manager.
  - b. Requests should be emailed to the designated DCCO Community Supervision ASA with a copy to the Probation Parole Program Director.
  - c. The subject line shall include the offender name and TDOC ID along with an attached CR-3831.
  - d. If the request is approved by DCCO, the form will be sent to the TDOC Helpdesk and to [BI-CS-Offender.Fees@tn.gov](mailto:BI-CS-Offender.Fees@tn.gov). If the request is denied, a response will be sent to the manager and District Director including the reason for the denial.
4. Staff shall check the fee balance of offenders on their case loads quarterly to ensure that fee exemptions and balances are current and correct.

K. Access to Offender Fee System

1. All probation parole officers, managers, District Directors, and others who need access to the Offender Fee System as identified by the General Counsel/Deputy Commissioner of Administrative Services, or Assistant Commissioner of Community Supervision shall be provided access.
2. Access shall be revoked upon termination of employment or change in responsibilities.

L. Notification to Sex Offender Treatment Providers about Indigent Sex Offenders

1. Sex offenders under TDOC supervision who qualify for an exemption under Section VI.(D) of this policy may request an Indigent Sex Offender Treatment Notice, CR-3890, to be approved on their behalf.
2. The form is submitted to the offender's sex offender treatment provider by the Programmed Supervision Unit Manager for services rendered when he/she is indigent and is requesting the provider to bill the Sex Offender Treatment Board.
3. The form is invalid if it is not signed by both the probation parole officer and probation parole manager.
4. The form shall be valid for six months, the same amount of time that the offender's regular fee waiver is effective.

M. Fee Exemption Codes: The following codes shall be utilized in the Offender Fee System to document exemptions. All exemptions that are renewed yearly are annual exemptions.

Effective Date:	Index # 705.11	Page 11 of 12
Subject: COMMUNITY SUPERVISION OFFENDER FEES		

<u>Exemption Type</u>	<u>Exemption Code</u>	<u>Verification Type</u>	<u>Verification Type Defined</u>	<u>Exemption Length</u>
Court/BOP order	CORD	CORD	Court/Board Ordered	Permanent
Judge Ordered	JORD	CORD	Court/Board Ordered	Permanent
Temporary Court Order	TCOR	TCOR	Court/Board Ordered	3 months
Day Reporting Center (Phase One)	DRCI	OFOB	Officer Observation	3 months
Excessive Court Ordered Obligations	EXCO	CTRC	Court Clerk Receipt	6 months
Income Below Poverty Level	IBPL	DHUM, PCHK	-Department of Human Services Document -Paycheck stub	6 months
Incapable of Working	INCA	MEDO, VADM, DMEH	-Medical Documentation -Veterans Administration -Department of Mental Health Documentation	6 months
Restitution	REST	VIRC, CTRC	-Victim's Receipt -Court Clerk's Receipt	6 months
Social Security Retirement	SISS	SSEC	Social Security Verification	Permanent
Social Security Disability/Welfare	SSDB	SSEC	Social Security Verification	Permanent
Unemployed	UNEM	EMSE, OFOB	-Employment Security Documentation -Officer Observation	6 months
Excessive Medical Expenses	MEDI	MEDR	Medical Payment Receipts	6 months
Full Time Student or Primary Care Giver	EMPA	OFOB	Class Itinerary/Letter from Physician/Officer Observation	6 months

N. Fee Grievances: Offenders may file a grievance if he or she believes they were unfairly assessed any amount of fees. (See Policy #705.07)

O. Lost/damaged GPS Equipment:

1. In an instance where GPS equipment is lost or damaged, the supervising officer or manager shall provide documentation to the Fee System Administrator or designee to create an invoice with the fee system for the lost or damaged equipment. The provided documentation shall include:
  - a. Offender name,
  - b. Offender TOMIS ID,
  - c. Description of lost or damaged GPS equipment, and
  - d. Cost of lost damaged GPS equipment
2. In an instance where a fee has been assessed for lost or damaged GPS equipment and the GPS equipment is later found, the supervision officer or manager shall provide documentation to the Fee System Administrator to remove the current invoice for the stated lost or damaged GPS equipment. The provided documentation shall include:

Effective Date:	Index # 705.11	Page 12 of 12
Subject: COMMUNITY SUPERVISION OFFENDER FEES		

- a. Offender name,
- b. Offender TOMIS ID,
- c. Description of lost or damaged GPS equipment recovered, and
- d. Cost of lost or damaged GPS equipment recovered

3. An OMS contact note shall be entered to document the submission for GPS lost or damaged equipment fee for creation and or removal.

VII. APPLICABLE FORMS: CR-3829 (Rev. 10-22), CR-3831 (Rev. 11-22), CR-3882 (Rev. 11-22), CR-3890 (Rev. 11-22)

VIII. ACA STANDARDS: 4-APPFS-3D-25.

IX. EXPIRATION DATE: February 15, 2026



TENNESSEE DEPARTMENT OF CORRECTION  
Request to Back-Date Fee Exemption

**Offender Information**

TDOC Number: Enter TDOC Number. Offender Name: Enter Offender's Full Name.

**Staff Information**

Date: 11/28/2022

District Number: D##. Site ID: Enter Site ID.  
 Manager Name: Enter Manager Name. Manager Staff ID: Enter Staff ID.  
 Officer Name: Enter Officer Name. Officer Staff ID: Enter Staff ID.

**Supervision Information**

Supervision Type: Select Supervision Type. Case Type: Select Case Type.

**Back-Date Request** (Note: 24 hours must be allowed for system to credit arrearages before new staff assignments are opened)

Reason: Select Back-Date Reason.

Explanation (Note: Form will be returned if reason states "explanation required" and this section is not filled in properly):

Enter Detailed Explanation.

I have reviewed the case notes and this offender's record contains the back-date request explanation.

**Exemption Information**

Start Date	End Date	Fee Type	Exemption Amount	Exemption Type
Enter start date.	Enter end date.	Select Fee Type.	Enter exemption amount	Select Exemption Type.
Enter start date.	Enter end date.	Select Fee Type.	Enter exemption amount	Select Exemption Type.
Enter start date.	Enter end date.	Select Fee Type.	Enter exemption amount	Select Exemption Type.
Enter start date.	Enter end date.	Select Fee Type.	Enter exemption amount	Select Exemption Type.

**For Manager Use Only**

I hereby verify that the exemption documentation has been reviewed and I attest that all information on this request has been researched and found to be accurate.

Enter Manager Name.  
 Manager Name (Please Type)

Enter Today's Date.  
 Date

**For Central Office Use Only**

Request approved by:

Enter Approver's Name.  
 Approver's Name (Please Type)

Enter Today's Date.  
 Date

Print



TENNESSEE DEPARTMENT OF CORRECTION  
Offender Information - Fee Waiver

**Offender Information**

TDOC Number: Enter TDOC Number. Offender Name: Enter Full Name.  
Street Address: Enter Street Address City: Enter City State: Enter State Zip #####

**Staff Information**

Date: 11/28/2022

District Number: D##. Site ID: Enter Site ID. Manager Staff ID: Enter Staff ID.  
Manager Name: Enter Manager Name. Officer Name: Enter Officer Name. Officer Staff ID: Enter Staff ID.

**Supervision Information**

Supervision Type: Select Supervision Type. Case Type: Select Case Type.

**Reason Offender did not download** (Form will be returned if an explanation is required and "Explanation" section is blank.)

Choose an item..

Explanation: [Click here to enter explanation.](#)

**Additional Information**

Is this a sex offender?  Yes  No Is this offender SOR  Yes  No  
Is this offender on GPS?  Yes  No Is this a violent sex offender?  Yes  No  
Is this offender lifetime supervision?  Yes  No

**Start Date** (Enter original supervision date, specify if split confinement and actual date of release.) **MM/DD/YYYY**

Offender Date of Birth: MM/DD/YYYY. Assignment Type(NEWCS, RNO) Assignment Type.  
Diversion Type (D or M) Diversion Type. Staff responsible for entry: Staff.

**Enter amount owed as of this date for each item below:** (If nothing is owed, enter "0")

Enter Amount.	Enter Amount.	Enter Amount.	Enter Amount.	Enter Amount.	Enter Amount.
SO	SPA/SPR	CIC	GPS	Drug	DIV

**Any Exemptions?** (If YES, please specify)  Yes  No

Months Exempted	Fee Type	Exemption Amount	Exemption Type
Enter date range of exemption.	Enter Fee Type.	Enter exemption amount	Enter exemption amount
Enter date range of exemption.	Enter Fee Type.	Enter exemption amount	Enter exemption amount
Enter date range of exemption.	Enter Fee Type.	Enter exemption amount	Enter exemption amount
Enter date range of exemption.	Enter Fee Type.	Enter exemption amount	Enter exemption amount

**For Manager Use Only**

I confirm that this request has been reviewed and that the information is complete and accurate.

Enter Manager Name.

**For Central Office Use Only**

Request completed by:

Enter Approver's Name.



TENNESSEE DEPARTMENT OF CORRECTION

ASSESSMENT, NOTICE OF OBLIGATION OR EXEMPTION OF FEES

Print Offender Name \_\_\_\_\_ TDOC ID \_\_\_\_\_
Print Officer Name: \_\_\_\_\_
Date Supervision Began \_\_\_\_\_
Sentence Expiration Date \_\_\_\_\_

INCOME: Gross

Monthly Household Income: \_\_\_\_\_
Other Income (SSI, Welfare, etc.): \_\_\_\_\_
Total Monthly Household Income: \_\_\_\_\_
Number of Dependents in Household: \_\_\_\_\_

Table with 2 columns: Hardship Exemption Types and Abbreviation. Rows include: Income below the poverty level (Deduct \$30 CIC) - IBPL, Physically or mentally incapable of working (Total) - INCA, Judicial exemption (As specified by the Court) - CORD, Excessive Court obligated expenses (Deduct \$10 CIC) - EXCO, Unemployed (Deduct \$30 CIC-Renewed monthly-Must seek work) - UNEM, Excessive Doctor, Hospital, or Medical expenses (Deduct \$10 CIC) - MEDI, Sole income from Social Security Retirement (Total Exempt) - SISS, Paying restitution to a victim (Deduct \$30 CIC) - REST, Judicial Exemption (Temporary - 3 Months) - TCOR, Social Security Disability or Sole Income from Welfare (Total Exemption/Permanent) - SSDB, Judge Ordered - JORD, Full-Time Student or Primary Care Giver - EMPA, Day Reporting Center Phase one (Temporary-3 months) - DRCI

Explanation and Verification:

[Empty box for explanation and verification]

NOTICE TO OFFENDER: The General Assembly of the State of Tennessee enacted legislation providing that any person under Probation or Parole supervision shall pay a monthly fee toward the partial cost of their supervision and rehabilitation and a monthly fee to the criminal injuries compensation fund. You are to follow these rules:

- ❖ Fees shall be paid to the TDOC through JPay. JPay fee payments may be made:
❖ Via credit or debit card using JPay's secure website, http://jpay.com/,
❖ Via JPay's 24 hour a day/7 days a week toll free customer service line at 1-800-574-5729,
❖ Via JPay's mobile application available for free in the Apple App Store,
❖ By sending a money order with Offender Name and TDOC ID# printed on the front along with a deposit slip to JPay's centralized processing office: JPay, P.O.Box 260088, Pembroke Pines, FL 33026
❖ Offender must qualify for TOTAL EXEMPTION of fees to receive \$50 GPS fee exemption.
❖ Any fees owed by the offender at the time of discharge or revocation are still owed.

Standard Diversion Memorandum of Understanding
CIC \_\_\_\_\_ SPA/SPR \_\_\_\_\_ GPS \_\_\_\_\_ SPR only \$35.00 DIV \$10.00 SPR \$25.00

Select one

- ❖ Failure to make payments promptly and fully will result in sanctions.
❖ YOU ARE RESPONSIBLE for claiming and documenting any hardships EXEMPTIONS that you claim, so consult with your OFFICER. Ask your PPO to explain to you anything you do not understand about the assessment and the payment of fees.
❖ I have been notified of my fee obligations. I have discussed with my PPO. I agree to pay my fees in full.





Exemption Begins: \_\_\_\_\_ Expires: \_\_\_\_\_ CIC \_\_\_\_\_ GPS \_\_\_\_\_ SPR/SPA \_\_\_\_\_ SPR Only \_\_\_\_\_ DIV \_\_\_\_\_ SPR \_\_\_\_\_  
 Month-Year Month-Year \$30 \$50 \$15 \$35 \$10 \$25

Modified Expiration Date: (Enter when, if applicable)

\_\_\_\_\_  
 Month-Year  
 Approved

Not Approved

\_\_\_\_\_  
 Officer Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Supervisor Signature

\_\_\_\_\_  
 Date

Recommendation



TENNESSEE DEPARTMENT OF CORRECTION  
**Indigent Sex Offender Treatment Notice**

RE: Offender Name. TDOC ID #: #####.

Pursuant to T.C.A. §40-28-201, §40-28-202, §40-28-203, and the Tennessee Department of Correction Policy #705.11, the offender, **Enter Offender Name.**, is considered indigent for the purpose of sex offender psycho-sexual evaluation, treatment, and/or polygraph services. Claims for approved services by an approved provider may be submitted to the Tennessee Sex Offender Treatment Board for reimbursement at the established TSOTB rate.

**NOTE: This notice is only valid for the offender and dates specified below.**

Exemption Type and Duration	
Select Exemption Type.	Court Ordered Exemption <input type="checkbox"/>

Fee Exemption Effective Date	Duration	Fee Exemption Expiration Date*
Start Date.	6 Months	End Date

\*If permanent exemption, the expiration date **MUST NOT** exceed one calendar year from Fee Exemption Effective Date. Permanent exemptions **MUST** be renewed on a yearly basis.

**Polygraph**

- Offender is currently enrolled with a sex offender treatment provider.
- Offender is NOT enrolled with a sex offender treatment provider.

Enter the date of last **THREE** polygraphs dates  
*List chronologically with most recent first)*

	Most Recent	2nd Most Recent	3rd Most Recent
Click here to enter PPO Probation Parole Officer (type)			11/28/2022 Date
Click here to enter PPM Probation Parole Manager (type)			Date

**Probation Parole Officer Checklist**

- PSU PPM must email a signed copy to [TSOT.TDOC@tn.gov](mailto:TSOT.TDOC@tn.gov) with offender Full Name and TOMIS # in the body of the email. Provide a copy to the TSOTB approved provider
- Maintain original in offender case file
- Complete all fillable areas on this form.

**TSOTB Approved Provider Instructions**

- Email the signed copy to [TSOT.TDOC@tn.gov](mailto:TSOT.TDOC@tn.gov)
- It is your responsibility to communicate the expiration date to the offender and, if necessary, to the officer listed above. Alteration of the above information will invalidate the form and result in a delay of payment and/or non-payment. The submitted form must match the form on file submitted by the officer.
- Attach dates of treatment.



ADMINISTRATIVE POLICIES  
AND PROCEDURES  
State of Tennessee  
Department of Correction

Index #: 706.03

Page 1 of 3

Effective Date: April 26, 2023

Distribution: C

Supersedes: 706.03 (9/1/20)

Approved by:

Subject: OFFENDER CONTACT NOTES

- I. AUTHORITY: TCA 4-3-603, 4-3-606, TCA 40-28-601, TCA 40-28-602, and TCA 40-28-605.
- II. PURPOSE: To establish guidelines for documenting supervision activities and communication pertaining to offenders under Community Supervision.
- III. APPLICATION: Assistant Commissioner of Community Supervision, all Tennessee Department of Correction (TDOC) Community Supervision staff.
- IV. DEFINITION: Contact Notes: The written narrative of interactions with offenders that is recorded in the offender management system (OMS).
- V. POLICY: TDOC electronically records offender case activity and communications with and/or on behalf of offenders in a standardized, objective, and factual manner.
- VI. PROCEDURES:
  - A. General Guidelines:
    1. Staff shall document all contact with or on behalf of the offender in the TDOC approved OMS. All contacts shall be entered on a time frame established by this policy and in chronological order.
    2. All contact notes shall be entered within three working days of contact or case activity. Contacts made on the last working day of the month shall be entered no later than the end of the next business day. When entering the contact note, use the date and the time the event occurred.
    3. Contact notes “comments” shall conform to the following standards:
      - a. Comments shall be written using respectful and appropriate language. Comments shall be clearly stated using complete sentences and shall be free from acronyms.
      - b. Staff shall use language that is understandable to others, succinct, and void of slang or labeling.
      - c. Comments shall clearly indicate when statements are based on facts and when statements are made on professional judgment. All expressed opinions must be supported by observed behaviors and labeled as the author’s opinion.
      - d. When quoting another person or source, staff shall use quotation marks around the words quoted and reference the person or source being quoted.

Subject: OFFENDER CONTACT NOTES

- e. When referencing emails, memos, or other documents from other people in the comments, staff shall summarize the contents of the documents. Direct quotes shall be enclosed in quotation marks. Staff shall not cut-and-paste complete emails or other documents into the comments of the contact note.
  - f. Staff shall include the name or the source of contacts and case activity in the comments of the contact note. Exception: at no time shall the name, contact information, or address of the victim or victim's family be included in the contact note comment. Staff shall refer to victims by initials only.
  - g. When entering contact notes, officers shall provide detailed documentation outlining the interaction with the offender.
  - h. When required, the comment shall include information on the offender's compliance, case plan activity and progress, and observable behaviors. Staff shall document all topics discussed with the offender or on behalf of the offender during the contact. Staff shall detail specific special conditions that are addressed with the offender during the contact. All offender case plan goals and action steps completed or modifications shall be documented.
  - i. If contact is made with the offender or on behalf of the offender by someone other than the assigned officer, staff shall indicate the name and title of the staff making the contact.
4. Closing summary contact notes shall be entered for all offenders terminated from supervision. A supervisor review of the closing summary is mandatory and documented by the supervisor entering a ZZZC contact note. The closing summary TEPE contact note shall summarize the offender's performance during the entire period of supervision and include information on the following:
- a. New misdemeanor or felony convictions while on supervision
  - b. Brief history of prior violence, sex offense(s), absconding, incarcerations in Tennessee and other states, custody escapes, and bond jumping
  - c. Number of revocation hearings and dispositions. This includes a brief explanation of the circumstances surrounding the revocation.
  - d. Comments on positive drug tests, hospitalizations, and interventions
  - e. Termination reason(s)
  - f. Concerns for future contact with victim(s), if applicable
  - g. Known Security Threat Group affiliation
  - h. Explanation of fee, court cost, and restitution status at time of termination.

Subject: OFFENDER CONTACT NOTES

- B. Supervisory Review of Contact Notes: Supervisors shall review contact notes and comments during case file reviews to ensure that officers are entering contact notes pursuant to the guidelines set forth in this policy. Managers may use the Contact Notes Training Manual to assist in training and advising officers on the appropriate entry of contact notes.
- C. Contact notes shall not be printed and stored in the offender's case file. However, contact note case histories may be printed for reference in court or Board matters.
- D. In the event that an error occurs when entering a contact note, and a deletion or modification request must be made, (i.e., duplication, entered under incorrect offender, incorrect date/time, etc.), the author or staff person who found the error shall notify a supervisor.
1. The exact editing request shall be composed and forwarded to the supervisor (i.e., in an email). The supervisor and District Director shall review the requested correction(s) and, if appropriate, request the deletion of the contact note through the TDOC Helpdesk using the Contact Note Modification/Deletion Request, CR-4011. The CR-4011 shall be signed by the Supervisor and District Director and emailed to [TDOC.helpdesk@tn.gov](mailto:TDOC.helpdesk@tn.gov) with "Contact Note Modification/Deletion Request" in the subject line.
  2. The Correctional Administrators will monitor all deletion or modification requests through a centralized repository as a quality control measure on all requests sent to the TDOC.helpdesk.
- VII. APPLICABLE FORMS: CR-4011 (Rev. 02-2023)
- VIII. ACA STANDARDS: 4-APPFS-3D-29 and 4-APPFS-3D-30.
- IX. EXPIRATION DATE: April 26, 2026



TENNESSEE DEPARTMENT OF CORRECTION  
**Contact Note Modification/Deletion Request**

Date: Enter Date.

District: Enter District #.

Office Location: Enter Office.

The District Director (DD) will email this form to the [TDOC.Helpdesk@tn.gov](mailto:TDOC.Helpdesk@tn.gov) once approved with "Contact Note Modification/Deletion Request" in the subject line of the email.

**Contact Note Information**

Offender Name: Enter Offender Name

TDOC  
Number: Enter TDOC Number

Contact Date: Enter Date of Contact Note.

Contact Time: Enter Time.

Posted By: Enter Staff Member.

Site ID: Enter Site ID.

**Justification**

- Entered under incorrect offender
- Duplication
- General Edit
- Incorrect Date/Time
- Other: Enter Reason.

**Modification/Deletion Details:**

Give a detailed explanation for why the modification/deletion is needed.

**Update Contact Notes Details:**

Please provide the updated language for contact note.

Enter PPO  
Probation Parole Officer

Enter Submission Date.  
Date Submitted To Supervisor

Enter PPM  
Probation Parole Manager

Enter Submission Date.  
Date Submitted to District Director

Enter DD  
District Director

Enter Submission Date.  
Helpdesk Submission Date