

Developing a Competency Model for Parole Board Members

by

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Abstract

This project sought to identify competencies important for making quality parole decisions and to develop and validate tools to assess these competencies. In the first phase, a blended approach of competency modelling and job-analysis was used to identify six competencies for Parole Board Members (PBMs): Ethical Competence, Adherence to System Factors, Evidence-Based Risk Assessment (EBRA), Evidence-Based Decision-Making (EBDM), Effective Communication and Self-Improvement. Measures were subsequently developed to assess these competencies and administered to a group of volunteer PBMs ($n = 38$) through the Association of Paroling Authorities International. PBMs demonstrated fair levels of overall competence across all measures. Room for improvement was noted for both EBRA and EBDM. An evaluation of Cronbach's alpha and item-total correlations by subscale for each measure informed revisions to the original measures, thereby improving the reliability of the tools. Suggestions for training are discussed as are possible modifications to the tools.

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Developing a Competency Model for Parole Board Members

Parole plays an important function in many criminal justice systems worldwide and is assuming an increasingly important role in many jurisdictions within North America (Burke & Tonry, 2006; Council of State Governments (CSG), 2009, 2010; Solomon et al., 2008). There are a number of reasons for the recent emphasis on parole. Firstly, it is accepted that the vast majority of offenders will return to the community following a period of incarceration, whether under supervision for a period on parole, or simply by function of sentence completion (Solomon et al., 2008). Furthermore, while incarceration has been a primary response to crime, many conversations and discussions in criminal justice policy are now bracketed by the high financial and societal cost incurred as a result of high incarceration rates (Dagan & Teles, 2014; Wacquant, 2005; Wakefield & Uggen, 2010). This shifting situational reality has engendered a number of recent efforts to explore feasible and effective alternatives for responding to criminal activity (CSG, 2009, 2010, 2015; Fabelo, 2007), with community-based alternatives to incarceration such as probation and parole being seen as increasingly important mechanisms (Fabelo, 2007; Solomon et al., 2008).

Community-based corrections mechanisms such as probation and parole are not only cost-effective but have demonstrable benefits for public safety when used appropriately (Stohr & Walsh, 2011). Probation is a 'front-end' alternative to incarceration and is used where a judge sentences an offender to a community sentence as opposed to imposing a prison term (Herberman & Bonczar, 2014). Conversely, parole is not an alternative to prison, but rather a portion of the sentence served in the community under supervision, following a period of incarceration. Parole systems can be either

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determinate wherein the judge sets the parole date upon sentencing, or indeterminate wherein a parole board reviews the offender's case upon parole eligibility and makes a decision regarding whether the offender can be safely returned to the community (Caplan & Kinnevy, 2010). In the latter systems, Parole Board Members (PBMs) are responsible for making the decisions regarding the timing of release of offenders into the community, and in most cases for imposing special conditions that offenders must follow upon release to facilitate case management of risk levels (Burke & Tonry, 2006; Caplan & Kinnevy, 2010; Hood & Schute, 2000).

In addition to the responsibility for imposing special conditions on a period of conditional release, PBMs may also be responsible for imposing them as needed for offenders who are mandatorily released from prison (e.g. where legislated by law). In Canada, an example of this is statutory release, where most offenders are released at two thirds of sentence completion (PBC, 2013a). Furthermore, in some jurisdictions, PBMs impose release conditions for a period following sentence completion. In Canada, an example of this is conditions placed on offenders who have a court-ordered 'Long-Term Sentence Order', which permits supervision of the offender passed sentence expiry (CCRA, 1992, s. 134.1). Finally, PBMs may also be responsible for making revocation decisions following a violation of a parole condition upon release (Campbell, 2008). Although parole systems may take many different forms and eligibility criteria may vary considerably across jurisdictions, the overarching purpose of parole is to contribute to public safety and offender rehabilitation by facilitating the release of suitable offenders into the community prior to sentence completion (Campbell, 2008).

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Within the context of discretionary parole systems, to the extent that that quality release decisions are made to release individuals whose risk of re-offending is manageable in the community, and that such offenders are managed appropriately upon release, parole potentially contributes to public safety in a number of ways. Firstly, the period immediately following release is a high-risk period for many offenders (James, Eisen, & Subramanian, 2012; PBC, 2014a). Offenders released upon sentence completion without a period of supervision have diminished access to the programs and support to safely transition into the community (Petersilia, 2001). Furthermore, they are exposed to different stressors and situations in the community than in institutions, which can aggravate their levels of dynamic risk (Brown, St. Amand, & Zamble, 2009). A release on parole ensures that the offender receives a degree of support and supervision during this period of increased risk. Furthermore, research has demonstrated that programs delivered to offenders in the community are more effective than programs delivered in institutional settings (Smith, Gendrea, & Goggin, 2014). This suggests that community-based mechanisms such as probation and parole can facilitate the impact of appropriate programming on offender rehabilitation, resulting in improved public safety.

In addition to the concrete potential for improving public safety (Burke & Tonry, 2006), parole has the additional benefit of serving as a means of managing incarceration rates by providing a community-based option for serving sentences (CSG, 2009, 2010; Fabelo, 2007). This is a particularly important tool in the context of prison systems dealing with overcrowding and funding issues. Community supervision options such as parole are more financially viable for correctional departments than incarceration, as these offenders cost considerably less to maintain than those in institutions. A report from

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the PEW Center on the States indicated that to maintain an offender on parole costs approximately one tenth of the cost per day than an offender in prison (Pew Center on the States, 2009). Lastly, release of suitable offenders on parole demonstrates a commitment to upholding the respect for individual civil liberties and least restrictive sanctions, premises upon which many Western systems are built (Campbell, 2008; NIC, 2010; PBC, 2000). The release of offenders on parole, should their risk be deemed manageable in the community, provides offenders with increased opportunity for rehabilitation and decreased restriction on freedom.

Challenges to Overcome in Parole Systems

Despite the apparent public safety contributions of parole within criminal justice systems, parole is a mechanism that is subject to significant scrutiny by virtue of its function. Parole decisions made regarding an offender's suitability for release are under the assumption that the individual's behaviour can be predicted with a sufficient degree of accuracy.¹ Given that parole decisions are related to the timing of release of an offender from incarceration, the ultimate question is with respect to his or her risk posed in the community. Parole decision-makers must therefore endeavor to assess this risk as accurately as possible and make an informed and defensible decision regarding the suitability, timing and conditions of release. As parole decisions balance the respect of individual liberties and rehabilitation with public safety, there are high standards and high stakes involved in parole decisions. Fairness (a concept in this context comprising of consistency, proportionality and predictability of decisions), transparency, equality and accountability to key stakeholders are critical elements of parole decisions in any system

¹ Of note, predictive accuracy is but one, albeit critical, aspect of parole decision-making.

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(Burke, 2011; Burrell & Gelb, 2007; NIC, 2010; PBC, 2000). However, some evidence suggests that there is room to improve the integrity, accountability and overall quality in the parole decision-making processes (Caplan, 2007; Hood & Schute, 2000; West-Smith, Pogrebin, & Poole, 2000).

Results from previous research are inconclusive regarding the key factors considered in parole decision-making, with studies indicating differing results, with current offence, criminal history, institutional behaviour, release potential, and crime severity among those frequently cited (Caplan, 2007; Nuffield, 1982; Samra-Grewal, Pfeiffer, & Ogloff, 2000). However, as noted by Nuffield (1982), other studies have demonstrated the importance of the information source (MacNaughton-Smith, 1976) and parole officer recommendations (Léveillé, 1970) in the final release decision. As concluded by Scott and Serin (2006), this discrepancy in research findings suggests that there is an inconsistency in the factors considered by parole decision makers within and across various parole jurisdictions that must be addressed. Such instances of inconsistency are problematic in parole systems, as they suggest an incomplete consideration of the facts, increasing the possibility of inaccurate decisions. Inconsistency represents a failure to maintain a fair and transparent system, as each offender is evaluated on different criteria by different decision-makers.

The consequences of such inconsistency and unfairness in the decision-making process are exemplified by research from the 1970's, indicating that parole criteria for release varied based on offender ethnicity (Carroll & Mondrick, 1976). Overall, these studies demonstrate the potential for subjectivity and bias in unstructured and inconsistent parole decision-making, which must be addressed and understood to ensure

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fairness within the system. The consequences of such inconsistency are further illustrated by the frustrations expressed by offenders who feel unjustly denied release following a decision, when they had felt that they met the official requirements (West-Smith, Pogrebin, & Poole, 2000). A lack of clearly communicated guidelines and consistency in decision-making therefore potentially results in systematic issues relating to fairness and the transparency of the parole process, along with the quality of the parole decision. This research suggests that parole decision-making can be improved to facilitate more consistent and clear decisions, with increased accountability to stakeholders, optimally yielding improved outcomes.

Furthermore, the prediction of human behaviour is an undeniably challenging and inexact task. Within the context of parole decision-making, there are many factors at play that can impact an offender's success in the community and which cannot be known at the time of the decision (i.e. changes in dynamic risk). This poses significant challenges for parole decision-makers. While an accurate parole decision in terms of releasing only those offenders who will not reoffend upon release and denying those who would reoffend is the ideal, the complexity of factors at play renders this difficult to say the least. As such, a quality and accurate decision becomes an achievable target upon recognition of the imperfect nature of predicting behaviour, and the need to consider all known and accepted factors that may contribute to the offender's success or failure. There are a number of ways in which parole decision makers can ensure quality in the decision making process. One such way is to turn to evidence-based decision-making practices as a basis for parole decision-making.

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Evidence-Based Decision Making

Evidence-based practices (EBP) and evidence-based decision-making (EBDM) are integral to a number of fields, and particularly, where accountability to the public plays a significant role, such as health care (Brownson, Fielding, & Maylahn, 2009), psychology (Bieschke, Fouad, Collins, & Halonen, 2004), management, and other examples across the field of criminal justice (CSG, 2015; NIC, 2010). The two concepts are largely interchangeable, and each entail a professional using the best available evidence to incorporate scientific knowledge as demonstrated through research, into everyday practice and decisions (Institute of Medicine (IOM), 2003; Sosnowy, Weiss, Maylahn, Pirani, & Katagiri, 2013). According to Sackett, Straus, Richardson, Rosenberg and Haynes (2000), EBDM is the process of blending research evidence and clinical experience to make informed decisions based on those findings. EBDM implies the use of a framework or guidelines to incorporate the information appropriately, along with the use of sound evaluation, and engagement with the community to communicate decision rationale (Brownson et al., 2009; Sosnowy et al., 2013). Literature from the field of evidence-based management furthers this definition to suggest that it is something that takes place in conjunction with practitioner experience and expertise; and in consideration of the context in which it is to be applied (Briner, Denyer, & Rousseau, 2009).

The very notion of EBDM necessarily implies that evidence should be the foundational core of making decisions. However, some criticisms of the field introduce the concern regarding what is meant by the term ‘evidence’ (Sosnowy et al., 2013). The general consensus is that evidence is, “an available body of facts or information

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indicating whether a belief or proposition is true or valid” (Brownson et al., 2009).

Evidence may be imperfect or incomplete, although there are a number of criteria that can serve to bolster its validity. Evidence should be derived from studies using sound methodology, be able to be contextualized appropriately to the intended field of practice, be transparent, applicable and receive a consensus from multiple sources (Upshur, VanDenKerkhof, & Goel, 2001; Vishwanath & Farimah, 2012). Evidence that is derived in such ways constitutes the best available evidence. Other criticisms of EBDM, particularly within the field of evidence-based management suggest that it is used or intended to achieve a consistent application of a practice, at the expense of a pluralistic approach to decision-making. This limits diversity in decision-making, which should be celebrated (Morrell & Learmonth, 2015). While this may be a valid concern in the management context, EBDM is still appropriate for use where decisions require consistency and where considerable evidence exists to support a clear path.

EBDM is therefore particularly important in instances where public safety is at stake. It provides a reliable, transparent and valid technique for making effective decisions across a number of contexts. This ensures that decision-making is consistent with processes and principles that have been established through a systematic and rigorous study of the issue. It leads to more defensible and efficient interventions and policies (Brownson et al., 2009), and therefore ultimately leads to better outcomes. EBDM ensures quality of decisions by providing a guide to key information and how it must be considered, along with a structure for considering information within an individual case.

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Proponents within the health care field have been leaders in exploring the values and possibilities for EBDM, championing and furthering much of the understanding of the benefits of using EBDM (Brownson et al., 2009; IOM, 2003; Sosnowy et al., 2013). Nonetheless, it is apparent that a considerable number of challenges and barriers remain to ensure its effective implementation (Thompson, McCaughan, Cullum, Sheldon, & Raynor, 2005). Firstly, research from the health care field suggests that many health care practitioners, already facing significant time constraints, do not have the time to review research on decision-making (Bhugra, Easter, Mallaris, & Gupta, 2011; Yukio et al., 2013). Furthermore, they lack access to appropriate medical research and information resources to quickly and efficiently find specific information required to inform an evidence-based decision. Moreover, the political environment may not be conducive to expending the required resources to undertake such initiatives (Bhugra et al., 2011; Brownson et al., 2009; Sosnowy et al., 2013). Finally, some practitioners feel unprepared or ill-equipped to independently conduct and assess research in order to inform clinical decision-making (IOM, 2003). This is a legitimate concern as it is necessary to have the requisite knowledge and skills to incorporate scientific knowledge into practice to reach an evidence-based decision (Brownson et al., 2009).

The above concerns illustrate the importance of organizational support in providing an atmosphere that is conducive to the incorporation of evidence-based information into practice. These examples demonstrate that it is not sufficient to ask staff to take responsibility for EBDM, but rather that the organization has a key role in providing an atmosphere and structured mechanisms that are conducive to implementing EBDM in the professional context.

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A few key elements can help in overcoming the challenges associated with implementing EBDM organizational cultures. These include making evidence requirements a part of governing policies and legislation (Sosnowy et al., 2013) and ensuring the feasibility and practicality of the information that staff are expected to use (Brownson et al., 2009). Given professionals are not likely to change their practices as a result of passive methods of knowledge absorption such as mail outs or newsletters (Brownson et al., 2009), a more active approach to facilitating EBDM within an organization is also required. Furthermore, strong leadership encouraging its use among professionals is necessary to introduce and encourage EBDM practices among decision-makers (Brownson et al., 2009; Sosnowy et al., 2013). Organizations where EBDM is desirable should seek to increase awareness and acceptance of key findings among decision-makers, and ensure appropriate resources are available to implement and sustain the evidence-based practices (Wimpenny, Johnson, Walter, & Wilkinson, 2008). Follow-up mechanisms, quality assurance reviews and systemic evaluations would also help to track the implementation and success of adhering to EBDM principles, to the extent possible (Wimpenny et al., 2008). A possible solution within the parole context is to include a training mandate into legislation. In Canada, the Corrections and Conditional Release Act (CCRA, 2012, s. 101(d)) requires training be provided to Board members. As such, the PBC provides both initial orientation and continuous learning training activities to all of its Board members (PBC, 2012). This may be a best practice to be used as a model for other paroling authorities.

In addition to the challenges of implementing EBDM, it is important to understand the primary critiques of the practice. There are some vocal opponents who

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oppose relying on the practice of EBDM, arguing that it fails to take practitioner expertise into consideration (Polychronis, Miles, & Bentley, 1996), and that it limits options for the practitioner to deviate from the decision that results from using EBPs (Bhugra et al., 2011). Proponents of EBDM argue that this is not strictly true; the use of EBPs can suggest an appropriate decision, that may need to be modified based on contextual factors (Douglas, Cox, & Webster, 1999; Mulvey & Lidz, 1995). Furthermore, at least within the context of correctional research, options exist that recognize the importance of blending the nomothetic and ideographic approaches to using the information (Mulvey & Lidz, 1995; Douglas et al., 1999; Hart, 1998; Mills, Kroner, & Morgan, 2011). For instance, previous research examining structured parole decision-making has led to the development of the Risk Assessment Framework (RAF: Serin, Gobeil, & Sutton, 2009; Serin, Gobeil, Lloyd, Chadwick, Wardrop, & Hanby, 2016). The RAF offers a method of blending statistically derived information predicting the offender's likelihood for success with a structured framework that allows the decision maker to consider the information from a case-specific standpoint.

A second major concern with the use of EBDM is the implication on ethics. A common criticism in rendering of a decision via EBPs is that it may fail to be the most ethical decision (Miles, Polychronis, & Grey, 2006; Vishwanath & Farimah, 2012). Furthermore, a decision achieved through EBPs may be one that is rational but, "at odds with common morality" (Vishwanath & Farimah, 2012: p. 854). Hence, in the event of a systemic bias, what is considered to be in line with EBPs may in fact not be the most ethical decision. Vishwanath and Farimah (2012) use the example of a decision that makes sense at the overall level of the population, but that may seem ill-suited for the

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individual in question. The authors further summarize that personal attributes such as religion, personal experiences, gender and age may impact what a decision-maker feels is an ethical decision. The debate in this area remains ongoing, however proponents of EBDM suggest that decisions that align with and that reflect the best available evidence are by default more ethical and defensible decisions (Borry, Schotsmans, & Dierickx, 2006; Grove & Meehl, 1996). This is because decisions that yield the greatest likelihood of accuracy based on empirically yielded indicators are most likely the best decision for the individual. This is true especially in consideration of the alternative to EBDM, wherein intuition and subjectivity are the driving factors in decision-making (Vishwanath & Farimah, 2012), raising concerns of bias and prejudice in decisions.

This discussion introduces the question of the values towards parole and rehabilitation that may be important for Board members to possess to be effective parole decision-makers. There is little research in this area to date, but what exists suggests that attitudes of parole personnel may impact their decisions. Werth (2013) examined the attitudes of parole officers in California, and concluded that the prevalence of punitive attitudes among the staff was detrimental to achieving California's stated goals of rehabilitation and reentry. Another study by Travis, Brickley, Makarios and Steiner (2011) examined the attitudes of parole personnel supervising offenders and found that authoritative officers with low willingness to assist others were more likely to pursue parole revocation hearings for offender noncompliance. Finally, a study of PBMs and views towards sex offenders revealed that almost 20% of polled Board members disagreed or strongly disagreed that sex offenders could learn to change their behaviours with support and therapy (Tewksbury & Mustaine, 2012), and hence were not suitable for

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parole. Of note, almost half of the respondents within their study indicated that they believed offender registries and community notification measures could be effective in reducing recidivism for sex offenders, despite existing evidence to the contrary (Tewksbury & Jennings, 2010; Zgoba, Witt, Dalessandro, & Veysey, 2008). Combined, these studies suggest that punitive ideology remains prevalent among personnel involved in parole processes and parole decision-making, at the expense of achieving rehabilitative goals. Furthermore, this evidence suggests that these attitudes may lead to decisions that are at odds with existing research. This introduces the idea that values may also be important to an individual's capacity for EBDM, reinforcing the important role of EBPs in responsible parole decision-making.

Improving Evidence Based Decision Making in the Parole Context

Encouragingly, there are several examples of the shift towards a culture of EBDM occurring in corrections and criminal justice, particularly within jurisdictions in the United States. The shift towards EBDM and EBPs are seen from sentencing (National Conference of State Legislatures, 2011), to corrections (CSG, 2015; NIC, 2010) and parole (Carter, 2011); as well as from the overarching systemic perspective (Campbell, 2008). Recent efforts have been undertaken in notoriously punitive states to reform criminal justice policies to be more in line with EBPs (CSG, 2010; Fabelo, 2011). Much of this effort has been centered on improving public safety by turning to the focus to implementing EBPs demonstrated to improve offender rehabilitation while maintaining a strong support for victims. This research encourages incorporating sound risk assessment, treatment, intervention, supervision and sentencing practices in what has been identified through research as being the most effective for public safety and rehabilitation.

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EBDM is of particular importance in parole, as the process must be fair and transparent to all stakeholders to uphold its integrity and accountability. Furthermore, parole decisions must comply with various legal statutes and policy considerations (Stroker, 2003). Fortunately for criminal justice policymakers and decision-makers, there is an abundance of research dedicated to the study of offender rehabilitation, and several key findings have proven to be effective in assisting offenders to live crime-free in the community. Several principles that are key to offender rehabilitation, the risk, need, and responsivity (RNR) principles, have significantly advanced the quality of correctional programming delivered and have clarified the circumstances under which rehabilitation is most likely to occur. The risk principle states that risk can be predicted, and that treatment programs should match the offender's level of risk (Andrews & Bonta, 2006; Andrews, Bonta, & Wormith, 2006). As such, high-risk offenders should receive the bulk of the resources and programming, whereas low-risk offenders should receive low dosed interventions.

The need principle states treatment programs designed to rehabilitate offenders should focus on addressing criminogenic needs, that is to say, needs that are related to an offender's risk to re-offend (Andrews & Bonta, 2006). There are eight criminogenic needs that have been demonstrated through research to be related to criminal activity: antisocial personality, antisocial attitudes, peers involved with criminal activity, substance abuse, family relationships, problems with school or work, poor self-control, and lack of pro-social activities (Andrews & Bonta, 2006). Of note these are different from non-criminogenic needs, such as low self-esteem, lack of physical activity, low ambition and history of victimization (among other examples). While these non-

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criminogenic needs may also need to be addressed for personal well-being, they have not been linked with criminal behaviour and could be viewed as ancillary.

Finally, the responsivity principle states that delivering programs in accordance with the offender's learning style will be most effective (Andrews & Bonta, 2006). Programs should be culturally and gender sensitive, and should respond to the learning abilities of the offender to produce the best potential for rehabilitation (Andrews & Bonta, 2006). Adherence to evidence arising from this field in correctional practice has consistently demonstrated a reduction in offender recidivism and improved public safety (Andrews & Bonta, 2006; Dowden & Andrews, 1999; Smith et al., 2014; Hanson, Bourgon, Helmus, & Hodgson, 2009; Lowenkamp, Latessa, & Smith, 2006; Smith, Gendreau, & Swartz, 2009).

The RNR principles as such provide criteria that should be present in any treatment intervention to reduce an offender's risk. This is especially important in the context of parole decision-making, as the offender has limited opportunities within the prison setting to demonstrate a change that would lower his or her risk to a manageable level within the community. Participating in appropriate programming is one of the only avenues for offenders to pursue that could demonstrate their commitment to change and pursuit of a crime-free lifestyle upon return to the community. With the assistance of these treatment principles, among other evidence, PBMs have sufficient tools and resources available to assist in the process of quality decision-making.

Quality Decision Making

While EBDM is as such integral to parole decisions, in order to be most effective parole decision makers must also adhere to a considerable number of other criteria, to

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ensure quality in decision-making and integrity of the parole process. A quality in a parole release decision must balance the protection of society against the offender's individual right to liberty (NIC, 2010). It must be based on applicable legislation, policy and ethical frameworks specific to the jurisdiction within which it is made and meet any prescribed requirements therein (Stroker, 2003, 2010, 2011). It must be firmly grounded in evidence-based principles and practices, applying empirical research regarding criminal risk factors to ensure that risk is appropriately identified and criminogenic factors addressed (Campbell, 2008; Solomon et al., 2008). Furthermore, the decision should reflect an understanding of the individual offender's unique situation; the decision and any conditions on release should be tailored specifically to meet the offender's needs (Solomon et al., 2008). The decision should be arrived at ethically, and without bias, and should be sensitive to specific needs of special populations (Burke, Giguere, Gilligan, & Center for Effective Public Policy, 2011). Finally, a quality decision must be communicated clearly to all stakeholders, including the offender, victims and the general public (PBC, 2009; Stroker, 2010).

This conceptualization of a quality decision is consistent with the recent shifts within the correctional policymaking culture to bring policies in line with evidence-based findings, as well as recent attention in parole systems. However, the range of the criteria required to produce a quality decision poses a new issue. Given the complexities and breadth of requirements, quality parole decision-making requires a high degree of professional competence in decision makers. It is not enough to delineate the characteristics of a quality decision; it is equally necessary for decision makers to demonstrate the knowledge, skills, abilities, values and overall competence to make

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quality, evidence-based decisions, thus ensuring the integrity of the parole process and accountability to stakeholders.

This issue is especially challenging in the context of parole, given that PBMs tend to come from a variety of backgrounds. In 2009, Paparozzi and Caplan reviewed the appointment process for PBMs in US jurisdictions, arguing that the political appointment of these positions opened up the possibility of political influence into the decision-making process. Their results indicated that governors appointed PBMs, with no public advertisement of the position in the vast majority of states. Furthermore, most states did not have established pre-requisites for serving as a Board member in terms of educational level or previous work experience. Many serve short terms, lasting in many jurisdictions on average between three and five years. With such frequent turnover, new PBMs are constantly being included in parole systems. As there are few formal in-house training mechanisms, this engenders its own challenges (Paparozzi & Caplan, 2009). As such, there is not an accepted standard in terms of the base knowledge or competencies of incoming PBMs. This raises concerns that the competencies of candidates to make quality conditional release decisions may be secondary to political influence in some cases. Notably, despite limited mandatory, formal training options, there are a couple of national-level options available to interested Board members, presumably pending support from their home agency. Such options include an NIC voluntary parole board member training program which runs 2-3 times per year, as well as the Association of Paroling Authorities' International Annual Training Conference. While the NIC training program is a set curriculum designed for new Board members with six months to five years of experience (NIC, 2016), the APAI Annual Training Conference sessions vary by

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year (APAI, 2015) and as such are better suited to those with a base knowledge upon which they can build.

The Road to EBDM: Job Analysis or Competency Modelling?

There is some debate in the field of Industrial-Organizational (I-O) Psychology regarding the advantages and disadvantages of using job analyses or competency models as a means of achieving the desired outputs of an organization. Job analyses have been the traditional approach of formally documenting and assessing the behaviours required to successfully perform a given role within the organization. The job analysis has been defined as “a set of procedures designed to identify and describe those aspects of performance that differentiate most sharply between better and poorer workers” (Anastasi & Urbina, 1997 as cited in Shippmann, 2000). In comparison, competency modelling is a newer method, reflecting organizational needs and taking a human-centered approach, as opposed to being job-centered (Shippmann et al., 2000). Bartram (2004) describes the two methods as complementary. Of note, competency modelling can be done at the individual or organizational level.

Shippmann et al. (2000) reported their findings, which were compiled over two years, of the respective advantages and disadvantages of each approach. They noted that job analyses are more formal and structured, and typically employ a more rigorous analysis of the job, using multiple methods of input to inform the final result. This involved using various sources to inform the initial list of tasks for the job analysis, using a structured protocol to do so, and including precise indicators and categories of work, among other characteristics. They found that competency modelling did not typically have the same degree of rigor in the identification of the descriptive list of tasks.

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However, it permitted a more flexible approach with potentially more meaningful information about which knowledge and skills were important to support the mission and vision of the organization. As such, competency modelling facilitated a forward-thinking approach, better able to support the strategic direction of the organization.

Prahalad and Hamel (1990) detailed advantages of organizational competency modelling in their Harvard Business Review article. They argued that companies should limit decisions based on achieving short-term, tangible results and instead focus on identifying the areas in which they desire competence to stay competitive over a longer-term in ever-evolving fields. They use an example where several companies, believing that the field of colour televisions had reached its limits in terms of technological advances, abandoned their pursuits in this field. However, in doing so they also removed themselves from future video-based opportunities that were based on advances and technologies in colour television. Prahalad and Hamel argue that there are three tests to identify company competence, though only one can be extrapolated to broader organizations (as opposed to purely for-profit companies); competencies included in the model should make a significant contribution to the end product. They view company competencies as building blocks to successful and competitive companies that are sustainable over a long period of time.

Individual level competency modelling involves instead recognizing the importance of individuals within the organization. It centers on identifying the knowledge, skills, abilities and attributes of its human resources that are required to work effectively towards not only achieving the desired outputs or results, but also achieving the mission and vision. Lawler (1994) makes the case for competency modelling as a

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means of ensuring that organizations are flexible in responding to changing needs. As opposed to relying on job analysis and finding people capable of performing tasks associated with a static job description, competency modelling encourages focusing on the skills required for individuals to execute their functions effectively in one role, but adapt with relative ease should the required duties change.

The above information suggests that competency modelling is an appropriate way forward to incorporate EBDM into organizational practice. Although an understanding of the specific job elements is required, EBDM necessitates a human-centered approach. This is because it is a complicated practice, and relies on people to complete the tasks. Furthermore, it is not a static concept, but is ever-changing based on new research and new practice that can be considered as ‘evidence-based’. As such, although an understanding and context of the job is important, the compilation of knowledge, skills and abilities that must be able to be practiced by individual decision-makers cannot be overlooked.

Implementing EBDM: Lessons from Other Fields

Other fields have laid the foundation for using competency models as a means of incorporating EBDM into practice. In the health care field, the IOM expended considerable effort in the late 1990s critically examining the state of the American health care system, noting that there were several existing systematic and large scale deficiencies negatively impacting health care delivered to participants (IOM, 2000). These deficiencies resulted in negative patient outcomes, high financial cost to the system, and a loss of public trust. This review prompted subsequent reports by the IOM looking to resolve these issues (IOM, 2001, 2003), and led to the eventual

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conceptualization of five core competencies for health care practitioners. The shift towards implementing competencies to resolve systemic deficiencies is notable; the IOM determined that the best means of rectifying the observed issues was through the use of skilled personnel (IOM, 2003).

Evidence-based practice was included among the five identified competency areas required for improving the health care system, along with patient-centered care, interdisciplinary teams, quality improvement and informatics (IOM, 2003). The committee surmised that health care practitioners must be capable of knowing and applying current research in clinical decisions to offer the best standard of care for patients. It was determined that this could be achieved by improving professional competence in those areas. While not intended to be an exhaustive list of professional requirements (IOM, 2003), the IOM sought to delineate the broad-scale requirements that would lead to improved decision-making and outcomes within the health care system. The competencies were intended to facilitate decision-making in adherence to a pre-determined set of guidelines for modern health care, including providing patient care, operating in a transparent manner, making safe and effective decisions, and increasing resource efficiency. They looked to the competencies required to achieve these tasks, believing that qualified and capable staff were important to lead the impending cultural shift in the provision of health care services and meet the high standard of expectations by stakeholders.

The lessons from the health care field illustrate how competency models can delineate the knowledge, skills and abilities required for professionals to effectively carry out their duties, particularly where the tasks are complex and varied. It further

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demonstrates how evidence-based practices and decision-making can be incorporated into such models, while respecting that other criteria be involved in quality professional outputs.

Competencies Models as Tools for Quality Control

A number of fields, including psychology (Rodolfa et al., 2005), health care (Brownson et al., 2009), corrections (NIC, 2010; Stroker, 2010), hospitality (Wang, 2013), and various other public and private enterprises have worked to establish competency models that delineate the key knowledge, skills, abilities and attitudes required for professionals to effectively perform their tasks and responsibilities. Despite variations in language, the accepted definition of competence implies a combination of practical, measurable and observable traits that can be used to assess an individual's ability to carry out their professional duties (Epstein & Hundert, 2002; Kaslow, 2004; Kaslow et al., 2004; Leigh et al., 2007; Marrelli, Tondora, & Hoge, 2005; Rodolfa et al., 2005; Rubin et al., 2007). The discussion of competence is thus strongly rooted in a results-based approach to success. The presence of sound judgement, analysis, critical thinking and decision-making are basic requirements to demonstrate competence in a task, as is a commitment to perform duties in accordance with industry ethical standards (Rodolfa et al., 2005). Rubin et al. (2007) stress the complex and dynamic nature of competencies, while Marrelli et al. (2005) continue to note that most tasks require the presence of multiple competencies.

Professional competencies are composed of a number of building blocks, that is the knowledge, skill, ability, and/or personal value, required for the successful execution of any given task. Knowledge can be concrete or abstract, but reflects, "an awareness,

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information, or understanding about facts, rules, principles, guidelines, concepts, theories or processes needed to successfully perform a task” (Marrelli et al., 2005). A skill is, “a capacity to perform mental or physical tasks with a specified outcome”, and ability is, “a demonstrated cognitive or physical ability to successfully perform a task with a wide range of possible outcomes” (Marrelli et al., 2005). In contrast with knowledge and skills that can be learned or gained through experience, abilities imply an element of natural aptitude, though they can be enhanced with practice. Equally important components of competencies are the personal characteristics involved in executing each task. The personal characteristics implicated in professional competency situations include the attitudes and emotions that enable individuals to work effectively. Marrelli et al. (2005) propose that most personal characteristics can be either innate or taught.

The move towards competency models across these fields reflects the widespread desire to create mechanisms through which performance standards can be set and against which individual professionals can be assessed. The expectation is that this will achieve a consistent and accepted standard of quality within the field. To date, this shift has occurred largely in areas where secondary education programs exist, and competency models that delineate the expected competencies of graduates are emerging as alternatives to core curriculums that have been previously emphasized (IOM, 2001; Kaslow, 2004). Whereas core curriculums focus on what is being taught to students, competency models shift the focus to what is being learned and demonstrated. It thereby encourages increased assessment flexibility and accountability by systematizing the requirements for the knowledge, skills and abilities that graduates are expected to display prior to entering into practice, as opposed to relying on prescriptive-approach core

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curriculum (Kaslow et al., 2004; Rodolfa et al., 2005). This shift further provides increased opportunities for relevant training and provides markers against which students can self-assess and self-manage, by clearly communicating the levels of competence required for success in each area. Finally, competency models serve to increase the elements of transparency and accountability to key stakeholders, such as the public, legislators, and other implicated parties, and clarify all expectations of the roles performed by professionals (Kaslow et al., 2004; Rubin et al., 2007).

As such, competency models represent complicated paradigms attempting to capture the key characteristics of professionals successfully completing their duties. They must therefore be flexible but complete, usable without being overly prescriptive, and must set clear behavioural expectations to communicate clear standards for conduct and service within a given industry. Once competencies are identified, model developers then have the challenging task of determining appropriate methods for assessing each competency.

Given the extent of the information encompassed by competency models, it is not surprising that achieving consensus on model components is a common challenge (Bieschke et al., 2004; Kaslow, 2004; Lichtenberg et al., 2007). Many different opinions and interpretations of work requirements and expected tasks for a given role can result in difficulty in reaching consensus on the competencies required. Finally, the usefulness of competency models may be questionable in instances where there is little to no variability in the high performance of professionals. As noted by Lichtenberg et al. (2007), if no variability of competence exists among the target population, there is little value to developing a competency model. As such, the context for using a competency model

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must be appropriate. The model should plausibly add value to the field or organization prior to undertaking the significant amount of work that is entailed in competency model development.

The American Psychological Association (APA) in its 2006 Paper summarizing the efforts in the psychology competency movement to date, provided a list of key principles and recommendations to follow when developing a competency model. This list was created in an effort to list strategies to counteract the challenges met in gaining consensus for the key attributes required. Within this paper, the APA emphasized the need to focus on competency assessment as a means of overcoming the lack of consensus, and ensuring that appropriate tools existed allowing for the evaluation of multiple competencies (APA, 2006).

Competency Assessment

Previous efforts to assess competencies have typically focused solely on knowledge, and as such the introduction of skills and abilities-assessments are novel (Kaslow et al., 2004). Although their inclusion provides a deeper understanding of an individual's capabilities, these are more complicated to assess than knowledge alone (Kaslow et al., 2004). Within professional psychology, Roberts, Borden, Christiansen and Lopez (2005) proposed that skills should be assessed by examining a range of behaviours from a variety of perspectives, to achieve a global understanding of an individual's capabilities. The authors stress the need to clearly delineate the criteria of assessment and expectations in advance for all areas of testing (e.g. skills, abilities, personal values). This is especially important regarding personal values, as the authors note that values extraneous to the job position are not at issue, but rather that competency assessment

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must have a reliable method of testing relevant values for professional conduct, for example acting in accordance ethical standards.

In a 2007 article, Leigh et al. further review and clarify a number of requirements and considerations for the assessment of competencies, offering solutions and guidelines to ensure that appropriate assessment tools are employed. They stress that quality competency assessment must ensure validity, reliability, and fidelity to actual practice², while being practically feasible options. The authors note that the assessment method must be valid, ensuring that the tool or method used is adequately measuring the concept in question, and that the method be reliable, in that it will produce similar results if re-administered in similar conditions, and that inter-rater reliability issues, where appropriate, be taken into consideration. Furthermore, such assessments must be realistic as cost, resources, and time available to administer and compile results are all factors that must be considered in selecting an appropriate method (Leigh et al., 2007). This is particularly important with the addition of skills, abilities and personal characteristics to competency model assessments, as they can be more challenging to assess or require more comprehensive methods to appropriately capture an assessment of demonstrated capabilities. The introduction of these three competency components also elicit additional challenges and requirements to selecting assessment methods that represent a degree of realism and relevance to actual practice.

To assist with the selection of appropriate assessment methods, Leigh et al. (2007) analyzed available models from other professions and categorized findings into four

² The current research benefited from an advisory group consisting of Robbye Braxton (National Institute of Corrections); Jean Sutton (Canada); Nancy Campbell (USA) and Cathy Banks (USA); to increase the fidelity to actual practice in the parole context.

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themes, based on measures of interest: i) measures of knowledge; ii) measures of professional decision making; iii) measures of practice performance; iv) assessments of practice-based skills. They suggest that measures of decision making, which are of particular interest in the current research, can be evaluated through the use of written, audio or visual situations wherein the respondent must delineate their thought process and decision-making. The authors urge the use of multiple cases to get an accurate sense of the processes involved, and reinforce the importance of having standard cases and trained evaluators to promote consistency in rating and scoring.

Kaslow et al. (2004) also note that assessment strategies should be linked with training goals. This allows for increased relevance in the assessment strategy and competencies can be assessed at varying degrees of formality depending on the intention. For instance, formative assessments can be conducted throughout training or teaching to provide the learner with feedback; whereas a summative evaluation of competencies could be administered as a gate-keeping mechanism, to ensure that the individual meets the requisite standards prior to entering into practice.

The assessment of ethical decision-making is a particularly interesting concept reviewed by Leigh et al. (2007). The authors note that this competency has typically been assessed in core curriculum formats by examining candidate's knowledge of ethical codes, as opposed to their ability to apply them. Leigh et al. note that advances in moral psychology research now provide for increased opportunities to examine and assess not only the knowledge of codes, but also an individual's ability to recognize and act appropriately within ethically precarious scenarios. This can be achieved primarily through written, audio or visual situation-based examinations.

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Overall the available literature on competency models demonstrates that they can be useful in the appropriate context, but that there are difficulties in achieving consensus on model components and their measurement.

Developing a Competency Model

Competency models yield benefits in terms of role clarification, standardization and accountability, but there are challenges in terms of development, measurement and implementation. Such models also require updating and refinements to enhance applicability. One strategy endorsed within the competency development literature that may help to address the challenges to achieving consensus on a competency model is to take an outcome-based approach to the process (Grigoryev, 2006; Langdon & Marrelli, 2002; Marrelli et al., 2005). Grigoryev (2006) offers a practical approach to competency model development, wherein she emphasizes the importance of taking a highly analytical approach to the model development, linking the essential job components to organizational goals. Otherwise stated, she recommends the identification of desired organizational outcomes as well as behaviours required to achieve these outcomes.

Langdon and Marrelli (2002) endorse a similar results-focused approach to competency model development. Their recommended approaches include the use of a competency database or menu to gather ideas or select from a pre-set list of competencies, and adapting them to the specific workplaces roles. Examining and adopting models used in similar organizations, and tailoring the competencies to suit the specific needs is also recommended. These methods have the benefit of offering readily available wording for potentially suitable competencies, but still requires awareness and

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analysis to ensure that the competency model will be functional, transferrable and applicable within a specific organization.

Langdon and Marrelli (2002) also include brainstorming as a method to establish a ground-up competency model, by defining what elements are present in the performance of high functioning employees through a specific job evaluation. Noting that this approach is commonly used, the authors caution that this method is vulnerable to bias and subjectivity of those involved in creating the model. While examining the traits and demonstrated competencies of high functioning performers as the basis the competency model, they caution that without an accurate job description, this approach may result in an incomplete model that does not take all relevant requirements into account.

Regardless of the preferred method used, the authors encourage first taking an outcome-based approach to creating a job model. Langdon and Marrelli (2002) note:

Each job produces certain outputs (deliverables), which will result in related consequences (desired results for the customer, organization). To produce the outputs and consequences, the individual will use certain inputs (resources & triggers), governed by conditions (rules, regulations, policies), through a series of process steps, aided by feedback (facilitating and reinforcing communication).

(p.18).

The authors continue to indicate that once these aspects of a work role have been identified, the competencies (e.g. the knowledge, skills, abilities and personal characteristics) required to successfully achieve the noted outputs can be more clearly, easily and accurately incorporated into a competency model. They argue that these should stem from the behaviours required primarily throughout the 'process steps', but

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note that competencies at all stages should be considered and included, and that the abilities to successfully and effectively completing these tasks in accordance with job standards need also be considered. The authors acknowledge the difficulty in achieving accuracy in developing competencies associated with required abilities.

In a follow-up 2005 article, Marrelli, Tondora and Hoge elaborate upon the process and considerations for developing a competency model. They note the need to define the objectives of establishing the competency model, and consider the end use of application throughout to ensure that the final product is usable. With regards to specific methodology, they include several ways to gather data to input into the competency model. They stress the importance of gaining valid, reliable, accurate data, that is feasible to obtain and that will be accepted among the target population as useful and appropriate within the context of their work. To this end, the use of multiple groups to provide information and validate proposals is required to gain a complete understanding of the job model. They promote a focus on high functioning performers as a best practice. In terms of specific methods of collecting data, they note that options exist in the form of conducting literature reviews regarding the ideal job model and performers, involving team members through conducting focus groups, structured interviews or administering surveys, or observing employees within the workplace to identify required work traits. They suggest using multiple methods where possible to balance the advantages and disadvantages associated with each method.

The authors reinforce the use of the behaviour-based approach to job modeling (by considering input, processes, outputs, consequences, conditions and feedback), and suggest that the competency model stems directly from this process. This results in an

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initial list that should then be reviewed for accuracy and content by Subject Matter Experts (SMEs), and updated to include feedback. Finally, once a competency model has been established and agreed upon, behavioural examples should be included in the model. The resulting competency model can then be implemented in the workplace setting. Such a model can be incorporated into selection processes, training sessions, and performance management. Moreover, recognition and compensation can be linked to the individual's demonstration of the competencies.

Towards a Competency Model for Parole Board Members

Developing a competency model for parole decision makers using the process described above therefore holds promise of the benefits of increased accountability, transparency and fairness in decision-making. While there have been previous efforts to compile core competencies for PBMs, including by the NIC (Stroker, 2010); and the PBC (2013b), the current effort seeks to use the described outcome-based language for job modeling (i.e. identifying the ideal output, consequences, inputs, conditions, process steps and feedback related to making parole decisions) to ensure a thorough consideration of all Board member roles. While it is important to identify the output, consequences and inputs for parole decision-making, the competencies are associated with the process steps and conditions under which decisions are made, along with addressing the feedback of these decisions. Competencies are identified within the relevant sections.

As an aside, the use of this method permits consideration of competencies that are important for both the individual and the organization, therefore benefiting from the advantages of each. In particular, items identified throughout this process are not only important in terms of the knowledge, skills, abilities and attributes that should be held by

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ideal candidates to achieve success; but are also important to achieve the strategic objectives of the organization, thereby also achieving ‘organizational competence’.

Lastly, it integrates aspects of job analysis as it stems from the output; or what is required for effectively completing a specific task. As such, this method is ideal as it blends job analysis and competency modelling, and identifies competencies at both the individual and organizational level. It is therefore proposed that these are strengths that support the integrity of the resulting model.

Output.

There are three primary decision types that PBMs may be responsible for across jurisdictions. These include decisions on the suitability and timing of release from a period of incarceration, special conditions to impose upon a period of conditional release (or following sentence completion in some cases), and revocation decisions following the violation of a special condition in the community (Campbell, 2008). While each involves a different decision-context, the role of the PBM within the criminal justice system is to make quality decisions regarding the suitability of an offender’s release into the community, balancing considerations of risk and the protection of the public with the offender’s rehabilitation.

Decisions regarding the initial timing and suitability of release from incarceration are ideally informed largely by assessing the offender’s risk to re-offend for the duration of the parole period (Campbell, 2008; Solomon et al., 2008). The decision output is straightforward, and results in a decision either granting the offender’s release from prison, or denying the period of parole pending a re-assessment in the future, if applicable. As previously indicated, special parole conditions should be manageable and

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attainable for the offender, relevant to risk and criminogenic needs, and informed by evidence. Finally, ideal parole revocation decisions should demonstrate a commitment to implementing a reasonable, graduated response to violations (Burke, 2004; Murphy & Turner, 2009). They should not unduly return an offender to a prison setting, provided that risk to the community remains within an acceptable threshold. Overall, the primary roles of PBMs of issuing ideal decisions on the suitability, timing and conditions of release, along with subsequent parole violation/revocation decisions can be summarized in a single output: a quality release decision.

In their current form, the degree of quality associated with these outputs varies across jurisdictions. Significant recent research suggests that parole decision-making can be improved by adhering to and incorporating a number of standards into the decision-making process (Burke, 2011; Campbell, 2008; Gobeil & Serin, 2005; Samra-Grewal et al., 2000; Solomon et al., 2008). For initial release decisions, improvements in quality can be achieved by ensuring offender risk is assessed in accordance with evidence-based practices. PBMs should utilize risk assessment information and an understanding of criminogenic needs to inform the risk evaluation and ultimate release decision (Solomon et al., 2008).

Furthermore, special conditions should be tailored and unique to individual circumstances (Solomon et al., 2008). Currently, many PBMs rely on using excessive and generic conditions, which are extremely cumbersome on the offender with little to no value for public safety (Burke & Tonry, 2006; Campbell, 2008; Travis & Stacey, 2010). They are not related to an offender's risk to reoffend, and arbitrarily inflate parole revocations by setting unreasonably high expectations upon offenders, increasing the

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likelihood of failure (Burke & Tonry, 2006; Grattet, Petersilia, Lin, & Beckman, 2009). As such, PBMs can improve decision-making regarding the imposition of special conditions by making them realistic, relevant, and research-based (Solomon et al., 2008). PBMs should seek to impose as few conditions as necessary, and regulate risk-inducing offender behaviour, based on individual criminogenic needs as identified by research (Solomon et al., 2008).

Excessive parole conditions also lead to an issue of increased parole revocations. Currently, parole revocations are a significant issue for the criminal justice system (Fabelo, 2007; Grattet, Petersilia, & Lin, 2008; Warren & Doctors, 2013), accounting for as much as two thirds of prison admissions in some jurisdictions across the United States (Solomon et al., 2008). From a systems-perspective, this is an inefficient use of resources as it means that offenders who may still be safely managed in the community are almost automatically returned to prisons. This fails to adhere to the principle of reserving resources for the highest risk offenders. Revocations for parole violations should instead be risk-based; in that the PBM has reason to believe that a violation confirms an increased risk posed by the offender to the community safety (Solomon et al., 2008).

Consequences.

The ideal consequences, or desired results from such quality decisions are to achieve public confidence in the criminal justice and parole system (Burke & Tonry, 2006; Serin, 2006); ensure offender confidence in a fair process (Campbell, 2008; Carter, 2011) and contribute to improved public safety and offender outcomes, while ensuring an efficient use of resources (Campbell, 2008; Solomon et al., 2008). This is achieved by

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producing quality decisions that are transparent, consistent, and firmly grounded in evidence-based decision-making practice.

Inputs.

The inputs that initiate and inform the parole decision-making process are varied. Parole eligibility dates for offenders are determined at sentencing (Paparozzi & Caplan, 2009) and are not under the responsibility of PBMs. As such, the primary inputs for PBMs can be conceptualized as the information that is analyzed in the decision-making process. PBMs will typically receive a range of information upon which to base decisions, ranging from offender file information, detailing the criminal history and case plan information; police reports; assessments from various sources such as judges, parole officers, psychologists, and others as applicable; community assessments; risk assessment instrument scores; programming information; information gathered from the parole hearing (if applicable); and victim information; among others (Caplan, 2007; Campbell, 2008; Scott & Serin, 2006). Ideally, inputs will be sufficient to allow the PBM to make an informed, evidence-based decision that takes into account relevant information from a multitude of sources.

Process steps.

There are three main components in terms of the ideal process steps required for PBMs to make quality release decisions. Quality decision-making depends not only on what information is considered to inform an evidence-based risk assessment, but also *how* it is considered to facilitate evidence-based decision-making (Serin, 2006). Finally, the decision must be clearly communicated to stakeholders, describing the decision and how it was reached.

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What to consider: The process of conducting an evidence-based risk assessment.

As per the ideal output, the decisions regarding the suitability and timing of release should be based largely on an offender's risk to re-offend (Campbell, 2008; Soloman et al., 2008). This requires a solid understanding on the part of the PBM of the factors that are relevant to consider in assessing an offender's risk and how to interpret the risk prediction of any risk assessment tools on file for a given offender.

Research demonstrates that risk can be predicted (Andrews & Bonta, 2006); and that actuarial and structured professional judgement tools are vastly superior than clinical intuition (Andrews, Bonta, & Wormith, 2006; Bonta, Law, & Hanson, 1998; Grove & Meehl, 1996; Hanson & Morton-Bourgon, 2009). Actuarial tools are defined by the manner in which the information is calculated, using strict rules or algorithms to produce a risk estimate for the offender (Yang, Wong & Coid, 2010). They are primarily derived from static, or unchanging risk factors, but as with structured professional judgement (SPJ) risk tools, they can include both static and dynamic factors (Yang et al., 2010). Static risk factors are historical factors that contribute to an offender's risk such as number of prior offences, age at first offence and history of substance abuse (Campbell, French, & Gendreau, 2009). Dynamic risk factors are those that can change to either increase or decrease an offender's risk (Andrews & Bonta, 2006), and as such may be of particular interest to PBMs. Examples of dynamic risk factors include impulsivity, negative affect, antisocial attitudes, psychosis, treatment and others (Douglas & Skeem, 2005; Serin, Chadwick, & Lloyd, 2015). They can change quickly, such as when an offender with substance-abuse issues relapses; or they can be more stable, such as if an offender gains a more pro-social group of friends. Dynamic factors are seen as

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increasingly important in risk assessments as they serve as treatment targets as that can be modified, and more fully capture the complex circumstances leading to recidivism than tools that rely on primarily atheoretical static factors (Douglas & Skeem, 2005). As such, risk assessment tools that include dynamic factors overcome a challenge associated with those informed only by static factors, as they are better able to capture changes in an offender's risk level.

Both actuarial and SPJ tools include factors that have been empirically and/or theoretically derived from previous research to be related to offender recidivism. SPJ risk tools differ from actuarial methods, as they do not have strict rules for interpreting the coded information, and as such allow increased flexibility on behalf of the administrator to assign a risk rating to the offender (Yang et al., 2010). Previous meta-analyses support the use of actuarial or SPJ tools over clinical risk prediction, which relies solely on professional expertise and intuition. Research has demonstrated the latter form of risk prediction to be an ineffective method of predicting offender risk as it is subject to bias (Campbell et al., 2009; Yang et al., 2010), and has poor predictive validity in comparison with actuarial and SPJ methods (Bonta et al., 1998; Andrews et al., 2006).

Considerable research has been devoted to examining the specific risk factors and success of varying risk tools in predicting risk for subsets of offender populations. Common risk assessment tools for violent offenders include the Psychopathy Checklist-Revised (PCL-R: Hare, 2003); Historical, Clinical, and Risk Management Violence Risk Assessment Scheme (HCR-20: Webster, Douglas, Eaves & Hart, 1997); Violence Risk Assessment Guide (VRAG: Quinsey, Harris, Rice, & Cormier, 1998); Level of Service Inventory-Revised (LSI-R: Andrews & Bonta, 1995); among many others. Although each

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tool includes slightly different risk factors, meta-analyses have not identified a clear advantage to using one tool over another in terms of predictive risk capabilities for violent re-offending (Campbell et al., 2009; Yang et al., 2010). In fact, in 2005 Kroner, Mills and Reddon compared the predictive validity of the PCL-R, LSI-R, VRAG and GSIR to that of four instruments that were randomly generated by pulling factors from a pool of the original scale items. They found that the four randomly compiled instruments yielded equivalent predictive accuracy to the established tools. The authors thereby concluded that while these existing scales are useful in predicting risk, future efforts should be devoted to building theoretically-driven risk measures that are better able to explain outcome behaviours. Yang et al. similarly suggest that as such the selection of the best tool for the case may be the intended purpose and circumstances for its use, as opposed to its predictive validity. Although PBMs do not actually complete the risk scales, this information is used in conditional release decision-making. For this reason, PBMs should be aware of the various types of scales that predict risk violence, the information is considered within each, and the intended purpose in order to most effectively use the risk prediction estimate in their overall assessment of an offender's risk.

Meta-analyses have also been useful in terms of identifying accepted risk factors for other offender subsets. Bonta, Law and Hanson (1998) reviewed research to identify the risk factors for offenders with mental disorders. Their analysis revealed that historical involvement in crime was predictive of both general and violent (where the offender had a history of violent offences) re-offending among the population, as were antisocial personality disorder and family dysfunction. However, mood disorders and treatment

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history were not predictive of general recidivism, and a diagnosis of schizophrenia was in fact negatively associated with recidivism. Ogloff (2001) noted that there are challenges in determining the proportion of prisoners afflicted with mental illness, but that estimates ranged from 3-59% of the Canadian prison population, depending on the criteria used and location in question. An understanding of the risk factors for offenders with mental disorders is thus particularly important, not only due to the prevalence, but also as those afflicted are a population with varied and distinct needs, which may require specific treatment accommodation, depending on the severity (Ogloff).

Research on sex offenders has been equally informative. In 2009, Hanson and Morton-Bourgon conducted a meta-analysis of the predictive accuracy of a variety of tools used to predict sexual recidivism among sex offenders. As with risk assessment tools to predict recidivism among violent offenders, the tools for sex offenders contain unique risk factors. For instance, the STATIC-99 (Hanson & Thornton, 2000) is a purely actuarial tool comprised of 10 static, empirically derived risk factors such as number of prior offences, offender age, and characteristics of victims to determine a risk score; whereas the Sexual Violence Risk-20 (SVR-20: Boer, Hart, Kropp, & Webster, 1997), which is a SPJ tool that includes such items as supervision failure, psychopathy and sexual deviation. Although Hanson and Morton-Bourgon's results indicated that purely actuarial tools outperformed SPJ and clinical risk predictions, the authors acknowledged that circumstances may exist that require the use of structured professional judgement.

Importantly, the results from Hanson and Morton-Bourgon's 2009 study also demonstrated that the tools developed to predict a certain type of recidivism (e.g. violent, sexual or general) yielded to best results in terms of predicting those outcomes. For

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instance, actuarial tools developed to predict sexual recidivism were more accurate than general or violent tools in terms of predicting sexual re-offending; whereas tools developed to predict violent or general recidivism performed better than tools developed to predict sexual recidivism in terms of predicting general and/or violent re-offending. This reinforces Yang et al.'s (2010) previous point that it is important to understand the factors that go into a risk tool, and make an informed decision about which tool is most appropriate in a given situation.

There are a few notable challenges and common criticisms with respect to the use of such empirically derived tools. The first is a concern of the generalizability of risk factors within a tool that has been validated on one sample to another (e.g. adult males in Sweden versus adult males in the United States). Where this is a concern, it is advisable to ensure that the tools have been validated on the population on which they are being used (Grove & Meehl, 1996; Yang et al., 2010). A second concern pertains to the possibility of having multiple risk tools on file with conflicting information. Hanson and Morton-Bourgon (2009) note that although this tends to (unduly) make decision-makers more confident in the event of tools that reinforce the risk score, there is no accepted standard of how to deal with scores that present conflicting information. The authors acknowledge that in the absence of a clearly superior risk assessment tool, professional judgement is necessary to interpret such results.

The above information suggests that risk prediction for offenders is common across correctional jurisdictions, although the specific tools may vary. The actual process of risk prediction in terms of assigning a risk score pertaining to a statistical likelihood to re-offend in a given period following release is produced by those completing the

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actuarial and SPJ tools (and not by PBMs). Regardless, PBMs must possess a thorough understanding of these tools to use this information effectively and incorporate it appropriately into their overall assessment of an offender's suitability for release. Specifically, PBMs should be aware of the actuarial and SPJ tools available for their offender populations, and how to use and apply risk scores to understand the risk posed by the offender in question (Campbell, 2008; Carter, 2011; Grove & Meehl, 1996). They should further understand the applicability and limitations of a given risk tool, and have a general sense of how the risk score is produced (e.g. in terms of which factors are considered). PBMs should also be aware of the key terminology used in risk assessments, and understand the concepts of static and dynamic risk to ensure a complete understanding of the risk posed by an offender. As noted, PBMs should be particularly aware of dynamic factors and their influence on an offender's likelihood to succeed upon release. Furthermore, PBMs should be aware of the community resource options available to mitigate any of the applicable risk factors (Campbell, 2008; Stroker, 2010).

It is also essential that PBMs have an intricate understanding of the Risk-Need-Responsivity principles. These principles are the pillars of understanding what works in offender rehabilitation (Andrews & Bonta, 2006; Carter, 2011; Hanson et al., 2009; Smith et al., 2009), and as such PBMs must be aware of how they apply to each offender. These components of understanding risk are important not only to the decision of suitability and timing of release (both for the initial decision and any subsequent parole revocation decisions), but also in the application of special conditions. A solid understanding of risk assessment is key to ensuring that special conditions are risk-relevant and necessary to impose upon a period of conditional release.

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However, it is not sufficient for PBMs to have the knowledge of risk assessment, they must also have the ability and analytical skills to ascertain the pertinent information from input sources that are relevant to informing the risk assessment for the offender. This requires the ability to synthesize information from a variety of sources, and assess and address any gaps or discrepant information; for all types of parole decisions. For instance, this requires excellent interviewing skills to gather the necessary, risk-relevant information from the offender during the hearing process, in those instances where hearings are used.

PBMs must also have the interpersonal skills to interact appropriately with other stakeholders involved in the process, particularly with victims who may wish to participate in the parole process, and to use this information to inform the risk assessment as appropriate. Teamwork skills are also necessary to work with other PBMs, in the event that there is a quorum requirement of two or more members to render a decision (Caplan & Kinnevy, 2010; PBC, 2014b). Finally, high-performing PBMs would also possess leadership skills, and promulgate a culture of implementing EBPs within parole decision-making organizations (Campbell, 2008).

It is worthwhile to note here that an understanding of risk assessment tools does not mean that only offenders thereby designated to be ‘low risk’ are acceptable candidates for release; nor that such risk tools will form the sole basis of rationale for release decisions. Overall, the combination of the knowledge, skills and abilities described thus far equip Board members with the ability to contextualize the case of any offender. For instance, if a PBM is assessing the case of an offender presenting to be moderate risk according to an actuarial tool based primarily on static factors, the PBM

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will recognize that to fully understand the current risk level posed by the offender, they need to understand what the dynamic risk factors are, how the offender has addressed these, what community support is available; and overall to assess if this is sufficient to reduce the risk to a manageable level for release to the community. Polaschek (2013) describes some key interventions that are being used across the world to address the needs of high risk offenders, some with demonstrable success at reducing recidivism rates. While it may be unlikely that high risk offenders will be considered as good candidates for release, an understanding of this information can help PBMs contextualize information in such cases to make sound decisions on release conditions and in post-suspension cases; when deciding if an offender's risk really has become unmanageable in light of a technical violation. Overall, possession of the key points of knowledge detailed herein; along with proficiency in the skills and abilities described above suggest that a PBM is competent in analyzing risk; which is a critical component of release decision-making.

How to consider risk: The process of evidence-based decision-making.

In addition to the research indicating what factors are associated with increased or decreased risk for offenders upon reintegration into the community, PBMs must be able to apply this information and use it within the decision-process (Serin, 2006). While the risk assessment forms a considerable component of this process, PBMs must be capable of using a structured method of incorporating this knowledge into a final parole decision. This is necessary to ensure the integrity and fairness within the parole process; and to ensure that the previously described risk assessments lead to consistent and fair parole decisions for individual cases (Burrell & Gelb, 2007; Scott & Serin, 2006; Samra-

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Grewal, Pfeiffer, & Ogloff, 2000). Some research is already available to help parole decision-makers assemble this information and make it usable in the parole decision process. This is perhaps detailed most thoroughly in the RAF (Serin et al., 2009; Serin et al., 2015). This describes the process steps that can be taken by Board members to reach a parole decision that is firmly grounded in evidence. The RAF provides a structured framework within which all risk-relevant information for parole decisions can be considered (Serin et al., 2009; Serin et al., 2015).

Firstly, all decisions should be anchored in the statistical risk estimate. Such estimates provide critical information about the offender's likelihood to succeed upon their return to the community. The RAF provides a structured mechanism within which PBMs can use the statistical estimates as an anchor for the individual decision, by using it as a basis against which other risk-relevant information can be considered and interpreted. The other factors derived from research that are of interest to decision-makers include criminal history; self-control (e.g. tendencies towards impulsive behaviour); institutional adjustment; offender change through correctional programming; release plan; and case-specific factors. PBMs should consider these factors and note whether each domain is an aggravating, neutral, or mitigating factor in the offender's case (Serin et al., 2009). For instance, a longer and more severe criminal history would indicate an aggravating factor for an offender, given the increased likelihood to reoffend, and the likelihood for the offence to have significant community ramifications (severity). Alternatively, mitigating information would be an offender who has developed a solid release plan that takes into account criminogenic needs, and has available support in terms of secured employment.

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The RAF also encourages consideration of interview information, discordant information and case-specific information within the Board members' assessment. This provides the PBM an opportunity to determine if there is further relevant information provided by the offender during the interview and assess how it may relate to their risk on parole. Consideration of discordant information provides a reminder that there may be a difference between what is self-reported by the offender versus what is contained on file or varying opinions from different sources. Finally, case-specific information allows for any factors not otherwise covered that could plausibly impact an individual's risk in the community. Each aggravating or mitigating domain should be considered to determine if that information is sufficient to warrant a change to the risk score, or to clarify the risk posed by the specific offender in the community. As such, the RAF serves as one example of a structured professional judgement method of using research-based evidence to render and support a release decision. It permits the blend of nomothetic and idiographic information in decision-making, by providing a framework informed by research and evidence on key risk factors, which can be applied to individual cases with unique risk factors.

Finally, once the PBM has reached a parole decision based on the complete and thorough use of EBPs and EBDM, the decision must be communicated to key stakeholders. This requires communication skills on the part of the PBM, to record a written summary that demonstrates how the legal and policy criteria are met, and that clearly demonstrates how the decision was reached. A quality decision should be defensible, and should allow the implicated stakeholders, primarily the offender, to understand the decision process. To this end, while the stakeholders may not agree with

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the outcome, they will at least understand the factors considered for release and how they were weighted to reach the ultimate decision.

The above description of the processes entailed in incorporating all relevant information in a structured and complete manner suggests a competence in evidence-based decision-making.

Conditions.

The conditions within a job model refer to the external factors influencing the context under which the output is achieved. In the current context, this refers to the rules, regulations and policies within which PBMs make parole decisions. Although the specific requirements vary by jurisdiction, these include various legislative, policy, ethical prescriptions and parole system factors that a PBM must consider and adhere to in each decision (Campbell, 2008; Stroker, 2010, 2011); along with ensuring the respect for prescribed timelines. This also includes a requirement for PBMs to embrace a philosophy of the potential of rehabilitation, given the implications from research previously discussed indicating that a failure to do so may hinder EBDM (Werth, 2013).

Adherence to the legislated, policy and parole system requirements encompass a number of criteria. Agency-specific legislation and organizational policies and mission statements for parole are of utmost importance as they provide specific direction to further guide and structure the parameters of parole decisions. PBMs should know and apply any and all such relevant requirements in decision-making. Furthermore, PBMs must also know and be able to apply the vision of parole, and its larger function and contribution to public safety within the context of the criminal justice system (Stroker, 2010, 2011). The ethical considerations and parameters within which PBMs must operate

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also form a critical component of the conditions under which decisions are made (PBC, 2011; Stroker, 2003, 2010). Any situation regarding an ostensible financial or personal benefit from a parole decision for a given offender, or other potential where an appearance of bias may reasonably exist must be recognized as inappropriate by the PBM, and appropriate action must be followed to remedy the situation (Stroker, 2010). PBMs should also recognize that they are making important decisions that have serious outcomes and implications for the lives of the offenders for whom they render decisions, as well as for the public. To this end, PBMs must take appropriate considerations and accommodations for special offender populations such as women, offenders with mental health needs, and demonstrate cultural sensitivity (Burke, 2011).

As such, for PBMs to work effectively within the parameters of these conditions, they must display ethical competence in terms of their abilities to uphold the integrity of the parole process. They must further demonstrate competence in adhering to system requirements to respect the primacy of legislation, policy and other systematic elements that dictate the standards of a fair and transparent organization.

Feedback.

The final stage to consider in the job model is the role of the feedback received by PBMs to influence their decisions. PBMs may receive feedback from a number of sources including through investigations; if they were a panel member where an offender seriously re-offended upon release; appeals from offenders that are dissatisfied with their result; communications from victims of crime; public attitudes towards the parole system; portrayals of parole in the media; and political pressures regarding how parole decisions

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should be made and which types of offenders should or should not be released. It can be challenging to incorporate appropriately such feedback into the decision process.

As discussed, quality decisions are those based in evidence. Therefore, while Board members must be able to incorporate relevant feedback into their decisions, they must also be able to exclude that which is not relevant for improving the quality of their decisions. This requires the Board member to be able to identify relevant information and understand what is within their capacity to improve and incorporate into evidence-based decision-making, without incorporating other feedback that will ultimately attenuate the quality of decision. As such, PBM competency for self-improvement is desirable to ensure a constant process of critical thinking and engaging in opportunities to better their parole decision-making.

The Competency Model

The above discussion and description of the ideal job model for PBMs demonstrates the overarching context for parole decisions and processes undertaken to achieve quality decisions. Using Langdon and Marrelli's (2002) approach, the job model leads to competency identification in terms of the knowledge, skills, abilities and personal values that lead into the overarching competencies required to reflect EBP in parole decision making. The competencies identified through this process are: i) ethical competence, ii) adherence to system expectations, iii) evidence-based risk assessment, iv) evidence-based decision-making, v) effective communication and vi) self-improvement. Figure 1 provides a visual representation of the competency model basics, including the overarching competencies required at each stage of the model. The complete competency model including all knowledge, skills, abilities, personal values and associated

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behavioural indicators are included in the *Competency Model for Parole Board Members*, in Appendix A.

Notably, consistent with recommended practice, the resulting *Competency Model for PBMs* was reviewed by an Advisory Committee of four experts within the field of conditional release. The four members have each contributed significantly to the field of conditional release, either through research, reports or by holding high-level positions within parole organizations. Each member was selected for their roles in advocating for evidence-based approaches to conditional release decisions, as this was a key objective for the current work. It is possible that in future, the model may be revised and refined by others who play a key role in the parole process, such as offenders, victims, family members, and individuals from community groups.

Current Research

The current study seeks to address the current void in parole evaluation literature, by gathering descriptive data on the competencies held by PBMs that are purportedly relevant for making quality parole decisions. The purpose is to conduct an initial assessment of the competencies that have been identified through this review and confirmed by the advisory committee as those that will lead to quality decisions. The study thereby seeks to gather the initial proof of concept that will allow for future research to more thoroughly examine the implications of a relevant and appropriate competency model for PBMs. This initial assessment will yield an overview of PBM profiles, and provide a summary of how PBMs fare on the identified competencies of ethical competence, adherence to system requirements, evidence-based risk assessment, effective communication, self-improvement and evidence-based decision-making.

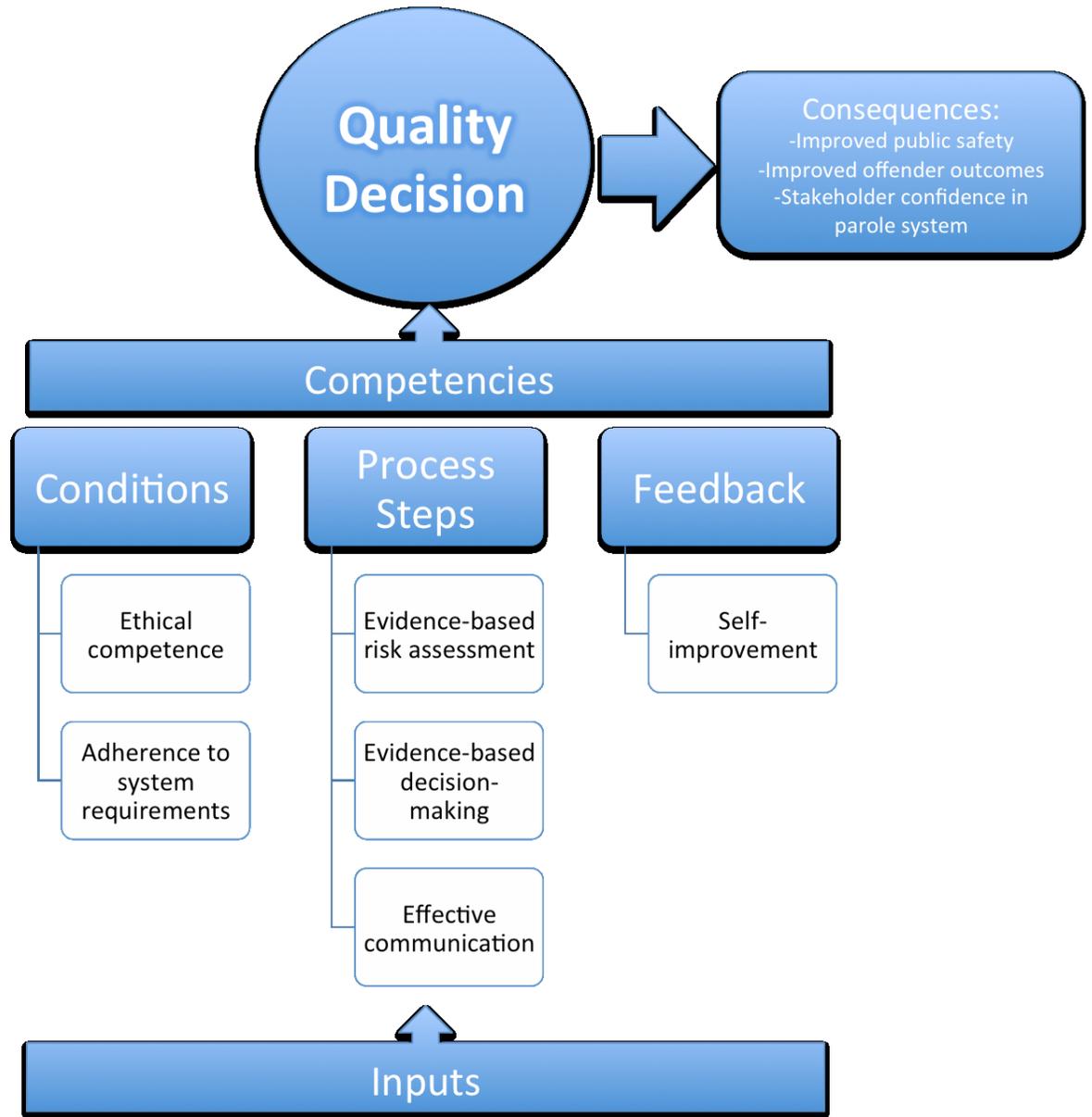
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Cognitive style in decision-making will also be explored to determine if PBMs vary in their approach to decision-making. Although not included in the competency model, previous research has hypothesized a connection between cognitive style and release decision-making. Gobeil (2006) explored if differences in cognitive style were related with subsequent release decisions in terms of release rates, information used to inform the decision and decision confidence. Although results in the study were not significant, the theoretical claim that a PBM's cognitive style and information processing may impact decision-making remains plausible and will therefore be explored in the current study.

Given that this is exploratory research, and that the nature of the study is intended to gather normalizing data, no specific hypotheses are proposed. Rather, the research questions focus primarily on exploring the overall profiles of PBMs, testing the psychometric properties of both newly developed and modified measures (those from existing research within the field adapted for use in this study), and conducting an initial exploration to determine if the competencies are related with decision quality (while recognizing that the study design is limited in this capacity). As noted below, for the purpose of this research, decision quality is to be assessed by comparing each PBM score to the 'most correct' score on the evidence-based decision-making vignette questions. Research from the industrial-organizational psychology field support the applicability of this method as an indicator of what a Board member is likely to do when making a real-life decision. Literature demonstrates that, at least within the context of staff turnover studies, a person's thoughts and intentions influence their behaviours. Hom (1992) in a meta-analytic review of structural equation models of employee turnover confirmed that

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Figure 1. A Language of Work Approach to a Competency Model for Parole Board Members.



an employee's intention to quit (as influenced by their job satisfaction, intent to search for other employment, etc.) was significantly predictive of their likelihood of quitting. This link between intention and action lends support to the credibility of using an individual's answer of their vote intention on a questionnaire as a proxy for their likeliness of doing so when faced with a real case with similar information. As such, it is

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sufficient for the purpose of this research to use a participant's result on their intended vote on the evidence-based decision-making vignettes as a proxy for actual decision-making.

Research Questions

- (1) What are the Board member profiles for each proposed competency?
- (2) What are the psychometric properties of the newly developed and modified scales?
- (3) What are the relationships among the variables, and are any competencies or demographic characteristics linked with increased quality in decision-making (wherein quality is defined as the degree of accuracy as reflected by a composite score across case vignettes, explained in the methods section below)?
- (4) Does a significant relationship exist between a Board member's overall level of competence and overall decision quality, wherein increased competence predicts increased quality?

Methods

Participants

Participants were recruited for this study through the Association of Paroling Authorities International (APAI). An email describing the purpose of the study and containing a link to the survey was sent to Parole Chairs, with a request for them to forward to Parole Board Members within their jurisdiction. The informed consent and debriefing forms are included as Appendix B.³ Although 92 individuals clicked the

³ Although the survey was initially designed solely in the electronic version, there were subsequent requests for a paper version. The informed consent was modified for that purpose but as no hard copy surveys were returned only the e-version is included.

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survey linked, thirty-seven participants remained in the sample once blank responses, individuals withdrawing from the study and those with insufficient data were removed from the sample.⁴

Regarding missing data, 59.4% of participants ($n = 22$) were missing some data throughout the survey. Subsequent independent samples t-tests confirmed no significant difference between those with complete data and those missing data on either age or years of experience as a Board member. Descriptive statistics of the subscales, including the number of missing responses is included for the participants in the results section, and noted within each section as relevant. Given the low sample size, and as the purpose of this study was in large part to get the profile of Board members, the data were not suitable for multiple imputation or full information maximum likelihood. Data were excluded pairwise for correlational analyses, unless otherwise noted.

Materials

Demographics and background information.

Each participant was asked to complete basic background information. The scale comprised of 15 items, requesting participant information on a variety of demographic information including age, gender, and length of time served as a Board member, among other questions. It also contained items regarding the participant's experience in the parole selection process and training received as a Board member.

Competency assessment scales.

The competencies established via the literature review and detailed in Appendix A were measured: i) ethical competence; ii) adherence to system factors; iii) evidence-

⁴ One completed only the demographic information and was therefore excluded.

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based risk assessment; iv) evidence-based decision-making; v) effective communication; and vi) self-improvement. Appendices D through I contain the competency assessment measure for each area, respectively. Notably, all of these measures except for that for evidence-based risk assessment were developed by the researcher specifically for use in this study. Scale items were informed by a review of the knowledge, skills, abilities and attitudes included in the model. The evidence-based risk assessment measure was developed within Dr. Ralph Serin's Criminal Justice Decision-Making Laboratory, and has been used in other studies (see for example Pardoel, 2015). All materials for this study were reviewed by the Advisory Committee of experts in the field of parole and Dr. Serin for appropriateness of use in this work, with modifications made to scales in accordance with feedback received.

Ethical competence measure.

The ethical competence measure has three subscales: a) ethical values in decision-making (12 items); b) knowledge and application of ethical codes (6 items); and c) commitment to evidence-based practice (3 items). Subscales a) and c) contain statements purported to assess the specified construct, and respondents are asked to respond on a 5-point scale the extent to which they agree or disagree (ranging from *strongly disagree* to *strongly agree*). One question is phrased to assess the self-reported likelihood that the Board member engages in the stated behaviour, and as such is rated on a 5-point scale ranging from *never* to *always*. Sample items from subscale a) include, "It is important to show respect for offenders throughout the parole process", and "Making transparent and fair decisions are necessary to making a quality parole decision". Sample items from subscale c) include "it is important to make decisions based on the best available research

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evidence” and “I rely on my intuition to make parole decisions” (reversed scored).

Subscale b) blends true or false, multiple choice and fill in the blank answers to assess Board member knowledge of ethical codes and ability to make ethical decisions by identifying if ethical concerns are present in various scenarios.

Adherence to system requirements measure.

This questionnaire has four subscales that assess various components of a Board member’s competence in adhering to the systematic requirements for parole decisions: a) attitude in support of offender rehabilitation (5 items); b) knowledge of the purpose of parole (8 items); c) knowledge and application of legislation and policy (4 items); and d) responding to time constraints (5 items). Subscales a), b) and d) are each rated on a 5-point scale with responses ranging from *strongly disagree* to *strongly agree*. Sample items for each scale include, “An offender should receive programming in order to enhance parole performance”, “Parole can help offenders become law-abiding citizens”, and “I manage my time effectively at work”, respectively.

Evidence-based risk assessment measure.

The Board member’s competence in performing evidence-based risk assessment is assessed using a number of scales and questionnaires. It is split into an assessment of knowledge required to perform an evidence-based risk assessment, along with an assessment of the requisite skills and abilities.

The knowledge scale is further broken down into six subscales, assessing knowledge of static and dynamic risk factors (5 items), risk assessment tools (6 items), risk-need-responsivity principle (7 items), general risk (13 items), community resources (4 items) and special conditions (5 items). Knowledge is primarily assessed via a blend of

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multiple choice and true/false format, with the latter two subscales (community resources and special conditions) assessed using a 5-point scale with possible responses ranging from *strongly disagree* to *strongly agree*.

Board member skills and abilities for evidence-based risk assessment are those in subscales measuring capacity for interviewing skills (4 items), interpersonal skills (4 items), teamwork skills (5 items), leadership skills (4 items), and ability to identify and assess quality of file information (5 items). These subscales are each rated on a 5-point scale with possible responses ranging from *strongly disagree* to *strongly agree*.

Evidence-based decision-making vignettes and questionnaire.

The evidence-based decision-making competency is assessed using three case vignettes. Notably, this measure is used not only as an assessment of Board member competency in the area of EBDM, but also as an indicator of quality decision-making. For this measure, the participant is requested to render a conditional release decision based each vignette (revocation or initial conditional release); and indicate the offender's estimated risk score; what special conditions should be imposed upon release; which factors were considered in the decision-making process; and if they considered certain factors to be aggravating, neutral, mitigating or not applicable to the offender's case in a given decision.

The questions for each vignette were completed by three of the Advisory Committee members. The scoring system was developed to award points where a two thirds majority of the Advisory Committee selected the same response. Vignette details were subsequently adjusted to achieve improved consistency in the responses (e.g. if there was a split among Advisory Committee members to grant or deny release, details

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were amended to make the correct answer more apparent). Where there was a clear agreement among members for either the release decision or risk level of the offender, two points were awarded. In cases of ambiguity, only one point was awarded (e.g. if two thirds of the Advisory Committee placed the offender in a moderate-high or high risk bin; this was awarded two points, but a response of moderate was awarded 1 point. A response of low-moderate in this scenario would be neutral, and a response of low valued at -1 point. This ensures points are allocated or removed depending both on the degree of consistency from Advisory Committee members and along a sliding scale depending on how 'close' the response was to the correct answer). Points were removed where participants selected a response 'opposite' to a two thirds majority (for instance if the correct response was to grant parole, denying parole resulted in a loss of one point). Zero points (e.g. a neutral score) were awarded in cases of ambiguity in the scoring of the advisory committee (for instance, if only a third of the Advisory Committee selected to impose a special condition, no points were awarded or removed from respondents who indicated the same). A similar scoring structure was implemented for the identification of risk factors, special conditions and estimate of risk. This method ensures points are awarded for clearly accepted 'correct' answers, without penalizing for those that are ambiguous. To this end, some subjectivity is permitted, improving the flexibility of the measure while maintaining fidelity to practice.

Effective communication measure.

Effective communication is assessed with five items, using a 5-point scale with responses ranging from *never* to *always*, or *strongly disagree* to *strongly agree*, to assess Board member self-reported use of effective communication practices. Sample items

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include, “I make sure that the decision is plainly written so that the offender understands the rationale”, and “I reference examples and include analysis to support my decision”.

Self-improvement measure.

The Self-Improvement measure is a nine-item scale designed to assess Board member understanding of and commitment to self-improvement in parole decision-making. Items are scored on a 5-point scale, ranging from *strongly disagree* to *strongly agree*. Sample items include, “There is little I can do to improve my parole decision-making” (reverse scored), and “I am able to incorporate lessons learned into my future parole decisions”.

Views towards punishment and rehabilitation

This is a modified 9-item version of a scale has been used in previous research to assess views towards punishment and rehabilitation and the potential organization impacts of these views (Taxman, Young, Wiersema, Rhodes, & Mitchell, 2007; Friedmann, Taxman, & Henderson, 2007). It is used for the purpose of this study to gauge Board member values towards punishment and rehabilitation, given the potential implications of such attitudes on implementing evidence-based correctional practice (Friedmann et al., 2007). Sample items include, “We should keep criminals in prison/jail and off the streets”, and “We should deter future offenders by severely punishing criminals who are caught and convicted”. Items are scored based on a 5-point scale, with possible responses ranging from *strongly disagree* to *strongly agree*.

Cognitive style in decision-making

Given the previous interest in exploring the relationship between cognitive style and decision-making (Gobeil, 2006), the following three scales were used to gather an

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overall cognitive decision-making profile of PBMs: *Need for Cognition Scale* (NCS: Cacioppo, Petty, & Kao, 1984; 18 items); *Personal Need for Structure Scale* (PNS: Thompson, Naccarato, Parker, & Moskowitz, 2001; 11 items); and *Personal Fear of Invalidity Scale* (PFI: Thompson et al., 2001; 14 items). Each scale will be scored using a six-point Likert scale ranging from *strongly disagree* to *strongly agree*, consistent with previous research efforts (Gobeil, 2006).

Procedure

Upon clicking the survey link, potential participants were brought to the informed consent page and electronic survey, which was administered using *Qualtrics* software. It is estimated that each survey took approximately 30-45 minutes to complete. The survey design blended items from each subscale when presented to participants, such that one round of Likert scale self-assessment statements contained items from all competency measures. This was done in an effort to prevent response fatigue effect in the data for any given competency. These items were then randomized when presented to participants to further protect against response fatigue effects in the overall data.

Participants were offered the opportunity to enter into a draw for one of two coffee cards valued at \$25, as well as a personalized overview of their competency profiles as compared with the mean scores. For this reason, this survey was confidential, but not be anonymous to permit the necessary follow-ups with Board members. Furthermore, as this is the first phase in an anticipated multi-phase process to identify core competencies of Board members, allowing participant identifiers permits future research to build on the current findings. This may include linking results from anticipated future surveys to

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competency profiles developed from the present research; as well as assessing if competency profiles are in fact related with offender outcome on periods of release.

Data Screening

All analyses were conducted using SPSS version 23. Obvious data entry errors are noted in the following section and were removed. Missing data challenges were discussed previously. Normality was assessed visually and through standardized estimates of skewness and kurtosis for each subscale, combined competency measure (e.g. all subscales for a given competency), and overall. This was done for both the original and revised measures. Tables 2 and 4 identify the descriptive statistics, including standardized estimates of skewness and kurtosis for the original and revised measures, respectively. Some issues with normality were observed, however this is perhaps not surprising with the small sample size. These are noted in their respective sections.

Data were examined for univariate outliers by identifying those z-scores outside of the ± 2.58 range of the mean, and were noted on seven scales. In all but two instances, values were within the range of ± 3 units. Raw values outside of this ± 2.58 unit range were examined on a case-by-case basis. In no instances were cases removed from the analyses, as the purpose of this work was exploratory in nature to gather an idea of Board member profiles in these areas. Linearity was also assessed using bivariate scatterplots, with no obvious issues noted.

Analysis

Sample Demographics

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Of the 37 participants included in this study, age ranged from 42 to 69 ($n = 35$, 1 missing and 1 excluded as invalid number⁵). The sample was comprised of 56.8% ($n = 21$) male participants and 44.7% ($n = 16$) female participants. Years of Board Member experience ranged from two years or fewer (21.62%; $n = 8$), between two and five years (37.84%; $n = 14$), or over five years (37.84%; $n = 14$), with one value excluded as invalid⁶. Most were full-time PBMs (78.4%, $n = 29$), while the remainder were part-time members. The vast majority indicated having over 10 years working in criminal justice (89.19%; $n = 33$), with 43.24% ($n = 16$) indicating having over 30 years of experience. The majority possessed criminal justice or police backgrounds (78.38%, $n = 29$). Within the sample, 94.6% ($n = 35$) identified themselves as working within the United States. This was a well-educated sample, as most respondents had a university education: 35.1% indicated a Bachelor's degree as their highest level of education ($n = 13$), and 51.35% possessed a graduate degree ($n = 19$).

Regarding selection criteria, 91.89% ($n = 34$) indicated that they were required to meet selection criteria prior to being appointed as a Board Member. A breakdown of the requirements is provided below in Table 1. Regarding training upon appointment, 78.37% ($n = 29$) indicated that some amount of training was received, whereas 21.62% ($n = 8$) did not receive any training. For those that received training within the first three months, 43.24% ($n = 16$) noted that they had received less than a week (40 hours) of training or had received informal, on-the-job training. Eight (21.62%) estimated having received between 40 to 120 hours of training and 10.81% ($n = 4$) estimated having

⁵ Value = 7623

⁶ Value = 2323

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received 120 hours or more of training upon appointment. Over 70% of respondents had received training in the areas of decision-making ($n = 27$) and legislation/policy ($n = 26$) upon appointment. Just shy of 60% ($n = 22$) indicated that training was received on risk assessment. Training upon appointment was primarily received in the form of reading training materials (67.6%, $n = 25$), or mentoring provided by a senior PBM (70.3%, $n = 26$); although 32.43% ($n = 12$) also reported having received a one-week training from either the National Institute of Corrections or Department of Corrections. Figure 2 below provides a visual representation of the training received *at any point during their tenure* in different areas by Board members upon appointment.

Table 1. Summary of Selection Criteria Requirements (Pre-Appointment)

Criteria	% required (n)
A degree in the human sciences (law, criminology, psychology, etc.)	37.83 (14)
Knowledge of the criminal justice system and associated issues	72.97 (27)
Comprehensive decision-making skills	43.24 (16)
Extensive communication skills	37.83 (14)
Strong ethical fortitude	48.64 (18)
Political Affiliation	24.32 (9)
Other	16.21 (6)

*Note. 'Other' criteria included teamwork skills, managerial experience, victim advocacy and committee and Senate confirmation.

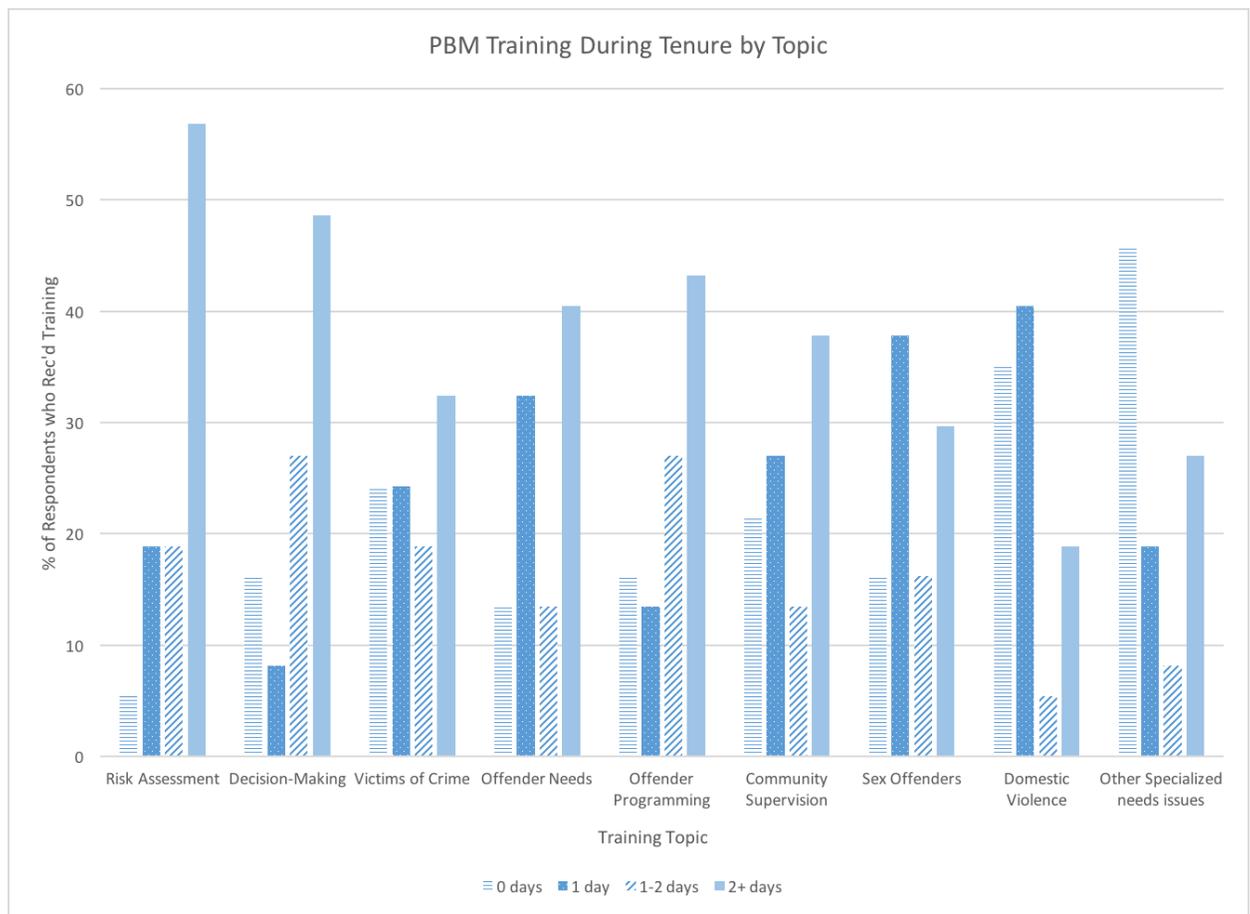
Psychometric Properties and Descriptive Statistics: Original Scales

Cronbach's alpha was used as a measure of internal scale reliability, and values for each subscale for the original measures are reported in Table 2, with values greater than 0.7 indicating acceptable levels (Kline, 1999) as per the threshold identified *a priori*.

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Item-total correlations for each competency scale were assessed to determine the extent to which each item contributed to the overall score for each competency measure. Again, as per thresholds identified *a priori*, those that failed to meet the .30 threshold were considered for removal from the measures. These are reported in Appendix N and elaborated upon in their respective sections below as relevant. Kendall's tau (τ) is the most appropriate correlation when the sample size is small and where multiple scores have the same rank (Howell, 1997), and was therefore used to determine the item-total correlations for Likert-scale subscales.

Figure 2. Overview of PBM Training During Tenure.



Note. For purpose of this question, missing responses were taken to indicate no training was received in the area. *Note.* Four participants indicated that additional training was received on ethics, mental illness and risk.

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Point biserial correlations using Pearson's r were used with discrete items, and are noted accordingly. For correlation analyses, missing values were excluded pairwise.

As per the *a priori* intention of this project to reduce the number of items and to adjust scales to improve reliability estimates, scales were revised based on information derived from the below analyses. Explanation of scale modifications, descriptive statistics and reliability estimates for the revised scales are elaborated upon in a subsequent section.

Ethical competence.

This competency was assessed through three subscales. As evidenced by Figure 3, participants demonstrated fair ethical competence as per responses to questions in these items, with the overall mean score reaching just shy of 80% of the highest potential score ($M = 80.58$, $SD = 6.02$). As per Table 2, competence was demonstrated across all three subscales, though the highest scores were achieved on *Subscale B: Knowledge and Application of Ethical Codes*. Responses were not visually normally distributed on the individual subscales, although they were normally distributed for the composite ethical competence score, reflecting the information for all subscales. This is confirmed by the standardized estimates of skewness and kurtosis.

Subscale A: Ethical Values in Parole Decision-Making demonstrated questionable reliability in its original form ($\alpha = .682$), although this increased to .714 with items 8 and 9 removed (*On occasion it is acceptable to discuss the details of a specific case with other Board members* (reverse scored) and *On occasion it is acceptable to discuss the details of a specific case with family or friends if they have relevant expertise* (reverse scored)). Of note, these items both failed to reach a minimum item-total correlation

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threshold of $\tau = .3$ threshold. All other item-total correlations were significant. As variance in items 8 and 9 is possibly due to differences in legislation across jurisdictions dictating what is appropriate in terms of disclosure of the offender's case to others, these two items were removed to improve the scale's reliability in assessing ethical values in parole decision-making. Note that cases were excluded pairwise and this was based on $n = 35$.

On the second subscale, *Ethical Competence Subscale B: Knowledge and Application of Ethical Codes*, all but one item reached the $\tau = .3$ cutoff for the item-total correlations, however as 35 of 36 respondents answered correctly, this item added little value to the scale. This subscale showed poor internal reliability ($\alpha = .112$). The breakdown of responses provides some insight into the low reliability of this subscale, as 67.5% ($n = 25$) of respondents indicated complete knowledge of the code, however only 48.6% ($n = 18$) validated this by providing the name of the code as requested. Very few participants felt they had low knowledge of the codes, or were reluctant to so indicate. Furthermore, 91.89% ($n = 34$) indicated that they adhered completely to the code. Finally, nearly all PBMs scored full points on the case vignettes of ethical dilemmas. The first vignette was answered correctly by 34 respondents (91.89%, n missing = 1), and the third by 35 participants (94.59%, n missing = 1).

The third subscale, *Ethical Competence Subscale C: Commitment to Evidence-Based Practice*, is comprised of three Likert scale questions assessing respondent's commitment to evidence-based practice. This scale did not meet an acceptable threshold for internal reliability ($\alpha = .641$). Projected alphas did not improve with item deletions. This is perhaps as a commitment to EBP was not universally valued among respondents.

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Table 2. Descriptive Statistics and Reliability Estimates for Original Competency Measures.

Variable	valid <i>n</i> (<i>n</i> miss.)	α	<i>M</i>	<i>SD</i>	Median	Range		Skew ^a	Kurtosis ^a
						Potential	Actual		
Ethical Competence									
Subscale A	35 (2)	.682	45.09	4.69	45	12-60	37-54	.39	-1.05
Subscale B	36 (1)	.112	23.42	2.86	25	0-26	15-26	-2.95	1.04
Subscale C	33 (4)	.641	12.27	1.74	12	3-15	7-15	-2.02	1.872
Overall	33 (4)	n/a	80.58	6.02	80	15-101	72-94	.84	-.68
Adherence to System Requirements									
Subscale A	35 (2)	.301	19.74	2.92	20	5-25	15-25	.22	-.30
Subscale B	35 (2)	.704	35.57	2.78	36	8-40	29-40	-1.16	-.74
Subscale C	36 (1)	-	9.82	2.66	11	0-12	3-12	-2.83	.25
Subscale D	35 (2)	-.351	14.26	1.63	14	5-25	12-19	2.56	1.14
Overall	35 (2)	n/a	79.33	6.17	80	18-102	64-92	-.349	.02
Evidence Based Risk Assessment									
Subscale A	32 (5)	.178	17.03	4.37	15	0-25	10-25	-.007	-.73
Subscale B	24 (13)	.471	20.2	6.67	20	0-30	5-30	-1.44	-.28
Subscale C	30 (7)	.280	25.00	5.87	25	0-35	10-35	-1.60	-.04

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Subscale D	27 (10)	-.043	44.63	6.92	45	0-65	35-60	.946	-.665
Subscale E	33 (4)	.698	16	1.99	16	4-20	12-20	-.53	.174
Subscale F	34 (3)	.448	17.35	2.17	17	5-25	10-22	-.782	.651
Knowledge SubTot.	21 (17)	n/a	140.24	16.69	139	9-200	107-167	-.513	-.435
Subscale G	35 (2)	.219	15	1.75	15	4-20	12-19	.704	-.364
Subscale H	35 (2)	.588	17.66	1.61	17	4-20	14-20	.261	-1.06
Subscale I	32 (5)	-.033	19.94	1.98	20	5-25	15-24	-.674	.512
Subscale J	35 (2)	.347	16.89	1.84	17	4-20	11-20	-2.1	2.05
Subscale K	33 (4)	.148	20.12	2.16	20	5-25	15-24	-.648	.006
Skill-Abil SubTot.	30 (7)	n/a	89.27	5.84	88.5	22-110	77-100	.319	-.750
Overall	20 (17)	n/a	228.4	20.92	225.5	35-310	184-265	-.488	-.199

Evidence Based Decision Making

Case 1	25 (12)	n/a	15.28	4.9	17	-11 to +24	5-21	-1.996	-.051
Case 2	24 (13)	n/a	12.96	2.46	14	-10 to +18	7-16	-1.636	.041
Case 3	22 (15)	n/a	19.95	5.49	21	-14 to +28	10-28	-.849	-1.161
Overall	20 (17)	n/a	48.5	11.46	52.5	-35 to +70	24-60	-1.896	-.217

Effective Communication

Scale	33 (4)	.599	19.12	3.46	19	5-25	10-25	-1.007	.206
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Self-Improvement

Scale	35 (2)	.469	34.43	3.0	35	9-45	27-40	-1.053	.405
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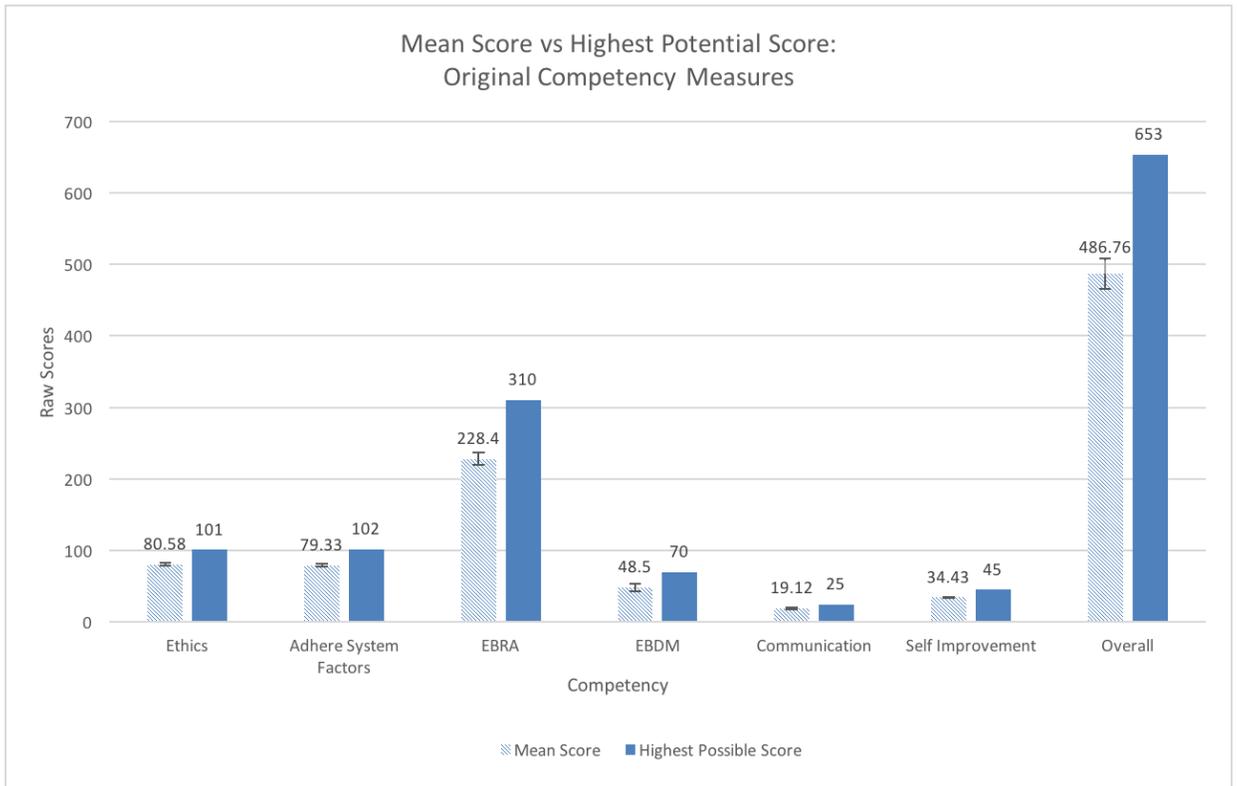
Overall

Composite Score	15 (22)	n/a	486.77	39.46	486	47-653	391.5-545	-1.398	1.637
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^a = standardized score. n/a = reliability estimate not applicable. - = reliability estimate not calculated.

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Figure 3. PBM Mean Competency Scores vs Highest Potential Scores by Measure.



Note. Error bar denotes 95% Confidence Interval.

Although all but one respondent indicated agreement or strong agreement to make decisions on the best available research evidence, 13.51% ($n = 5$) noted that they only sometimes strove to ensure the offender's risk was based in research evidence, and 40.54% ($n = 15$) indicated that they sometimes or often relied on intuition to make parole decisions. This suggests that although respondents may have agreed in principle with the desirability of a commitment to evidence-based practice, this was not always achieved in actuality.

Competence in adherence to system requirements.

This competency was assessed through four subscales. Some issues with normality were observed for Subscale C, although this is not surprising given the structure of the scale and observed results. The overall score for this competency did not

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violate the normality assumption. The first, *Adherence to System Factors Subscale A: Attitude in Support of Respect for Offenders and Victims*, is comprised of five questions arranged on a five-point Likert scale. Item-total correlations using Kendall's tau indicated that all items were significantly correlated with the overall score, however item 3 (*An offender should receive programming in order to enhance parole performance*) was below the $\tau = 0.3$ threshold. Cronbach's alpha indicated unacceptable internal reliability of the scale ($\alpha = .301$).

For the second subscale, *Adherence to System Factors Subscale B: Knowledge of the Purpose of Parole*, there was little variation among respondents on the items, with most responses on each item suggesting participants possessed a very strong knowledge of the purpose of parole. Participants scored well overall ($M = 23.42$, $SD = 2.86$), achieving a mean of equivalent to 90% of the highest possible score. The lowest scoring item was item 4 (*One benefit of parole is its potential for cost-savings to the criminal justice system*; $M = 3.75$, $SD = .906$), as interestingly 10.81% ($n = 4$) either disagreed or strongly disagreed with the statement. It is acknowledged that response bias may have played a role in the uniformity of observed responses, as participants may have been reluctant to indicate that they were not familiar with their mission statements or the purpose of parole in their jurisdictions. Reliability was acceptable with this subscale ($\alpha = .704$).

Adherence to System Factors Subscale C: Knowledge and Application of Legislation and Policy, was not assessed using the Cronbach's alpha as it contained only four items. Two were self-assessments of awareness of the legislation and of the policy, and the others were validation questions where a nil response scored 0 points and a

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validated response scored 1 point. As with Subscale B, it appears that response bias may have played a role with participants selecting the most desirable answer. Although participants overwhelmingly stated that they were very familiar with legislation (75.67%; $n = 28$) and policy (81.08%; $n = 30$), only 21 and 20 participants validated the name of the legislation and policy, respectively.

Finally, for *Adherence to System Factors Subscale D: Responding to Time Constraints*, internal reliability was poor (Cronbach's $\alpha = -.351$). The negative value suggests that there was a negative covariance between items, which was due to a pattern in responses. Items were based on a five-point Likert scale. Although respondents indicated that they managed their time effectively at work ($M = 4.17$, $SD = .568$), they also largely noted that they have difficulty staying on top of the workload (reverse scored; $M = 2.23$, $SD = .877$); sometimes have to sacrifice quality to stay on track with the quota (reverse scored; $M = 1.74$, $SD = .852$); and have to stay late at work (reverse scored; $M = 2.2$, $SD = .964$). With items two (*My expected workload is reasonable*) and five (*I manage my time effectively at work*) deleted from the measure, the internal reliability of the remaining three items (*I have difficulty staying on top of the workload, I sometimes have to sacrifice quality to stay on track with the quota* and *Too often I have to stay late at work to stay on track*) was acceptable (.824).

Once again, participant profiles suggest a fair degree of competence in adherence to system factors, except on Subscale D (*Responding to Time Constraints*). While the mean score on the other scales approximated 80-90% of the highest possible scores, the mean score on this subscale was closer to 50%. This suggests that PBMs across the board have heavy and challenging workloads.

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Evidence based risk assessment.

Knowledge, skills, abilities and personal characteristics required for competence in evidence based risk assessment were evaluated using 11 subscales. Knowledge was assessed through six subscales, while the skills and abilities were assessed through the remaining five. Visually, most subscales did not appear to conform with the normal distribution, however standardized values of skewness and kurtosis did not suggest any significant departures from the normal range, except for Subscale J. Furthermore, data were normally distributed for the aggregate score on this competency.

The first four subscales (A through D) assessing knowledge were comprised of factual true/false and multiple choice questions where incorrect answers received 0 points and correct answers received 5 points (to place the same weight on these items as the Likert scale items). Subscales E and F were self-report assessments of the respondent's knowledge of community resources and special conditions, respectively; as rated on a five point Likert scale (ranging from Strongly Disagree to Strongly Agree).

Regarding the participant profiles on competency in evidence-based risk assessment, the overall mean was 228.4 out of a possible score of 310 ($SD = 20.92$; equivalent to 73.68% of the highest possible score). This reflected a mean score of 140.24 ($SD = 16.69$) on the knowledge component (70.12% of the highest possible score) and a mean score of 89.26 ($SD = 5.84$) on the skills and abilities components (81.15% of the highest possible score). Considering that at least for the knowledge component, most of these were factual questions and answers, it is somewhat surprising that higher mean scores were not achieved. While some items were unanimously answered correctly, others had high rates of incorrect answers. For instance, Subscale A, item 3 (*Which of the*

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following dynamic risk factors has the strongest empirical relation with criminal conduct) was answered incorrectly by 18 participants (48.64%). Subscale B, item 6 (*Clinical judgement is generally less accurate than actuarial or statistical assessment*); and item 9 (*Which of the following does not provide any information about how to manage or reduce a sex offender's risk?*) each had poor success rates as well with only 54.05% and 24.32% answering correctly for each question respectively.

Responses on other items suggest that there could yet be a wide discrepancy in terms of best practices for parole. That 27 respondents (72.97%) indicated that the statement '*It is best to focus on offender's criminogenic needs and to not spend time reviewing other issues in parole hearings*' was false, in combination with the fact that 15 of 32 respondents noted that the statement '*When dealing with a violent offender, interventions that focus on instilling morals and increasing empathy are generally more effective*' was true suggests that the risk-need-responsivity principles and evidence based practices may not be the primary target for many Board members. Whether this is a personal choice or indicative of a need of improved organizational direction is a matter for further consideration.

Responses on the EBRA skills and abilities portion again suggest that although there may be widespread support for a given principle, practical applications in terms of achieving the principle may vary. For example, although participants largely agreed that it is important to ensure sufficient file information is available prior to making a decision (32 of 35 respondents agreed with the statement), 5 of 34 indicated that they often or sometimes ignore information if it does not fit with their understanding of the offender's risk and 11 of 34 respondents indicated that they never, rarely or sometimes use their

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judgement to weigh discrepant pieces of information if presented with conflicting information to determine which is more credible. It therefore appears from this set of responses that practices to ensure that file information is suitable to make a quality decision differ widely across PBMs. This is possibly due either to variations in jurisdictional standards or practices, or alternatively may suggest that training is required to assist PBMs in understanding what appropriate actions might be in a given situation to achieve a fair decision.

Regarding the reliability of the measures, the internal reliability of the knowledge subscales was unacceptable ($<.05$) for subscales A to D and F; but approached acceptable levels ($\alpha = .698$) for *Subscale E: Knowledge of Community Resources*. Regarding item-total correlations, most items across all subscales A, B, C, E and F were above the $\tau = .3$ item-total correlation threshold. Those that did not meet this cutoff were *Subscale B: Knowledge of Risk Assessment Tools*: item 2 (*Which risk assessment tool is most appropriate for use with sex offenders*); and *Subscale C: Knowledge of Risk-Need-Responsivity Principle*: item 3 (*As a general rule, offenders are adult learners and respond best to program models that are cognitive-behavioural and skills based*). Removing these items did not yield substantial improvements to the reliability estimate. Item-total correlations for *Subscale D: General Risk Knowledge* were poor, suggesting that there was considerable variance among those correctly identifying the response. In fact, eight of the thirteen items on this scale did not meet the $\tau = .3$ item-total correlation threshold: 1, 5, 6, 8, and 10-13. Internal scale reliability was negative indicating that there was a negative variance among items (e.g. that knowledge on one question was negatively associated knowledge on another).

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Regarding the skills, abilities and personal characteristics required for competence in evidence based risk assessment, these were assessed using subscales G through K, assessing interviewing skills, interpersonal skills, teamwork skills, leadership skills and ability to identify the quality of file information. These were all comprised of five-point Likert scale self-assessment items, where the respondent indicated the extent to which they agreed or disagreed with a statement. Here again, none of these scales achieved a reliability estimate of .7 or above. Item deletions from the scales achieved improvements, but again failed to meet the threshold for acceptable reliability. Subscale I (*Teamwork Skills*) had a negative value for reliability, indicating a negative covariance among items. Item-total correlations were adequate across most subscales, with the following items failing to meet the $\tau = .3$ item-total correlation threshold: Subscale G, item 4 (*I ask specific questions about the release plan, including details on employment plan, housing and family situation*); Subscale I, item 3 (*Where my co-panelist and I have differing opinions, I default to their opinion if I am unsure – reverse scored*); Subscale K, item 5 (*If a piece of information does not fit with my understanding of the offender's risk, I ignore it in my final decision – reverse scored*).

Evidence based decision-making.

This competency was assessed using three case vignettes, wherein participants indicated if they would grant or deny release to the offender based on case information, the level of risk of the offender, which risk factors applied and if they were aggravating or mitigating, and what special conditions they would impose. Reliability for the EBDM measures was in part achieved during the development phase of the measure through the participation of the advisory committee and subsequent adjustment of scenarios to foster

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more consistent results. Support for the reliability of this measure is bolstered by its high reliability estimate ($\alpha = .845$), and as total scores achieved on all three case vignettes were strongly and significantly correlated to one another as well as to the composite competency score (see Table 3 below). This suggests that those who scored well on one case also scored well on the others, and that therefore the same construct was being assessed across all three cases.

Visually, data were not normally distributed for any of the individual vignettes, nor for the composite score on evidence-based decision-making competency; however standardized estimates of skewness and kurtosis demonstrated a departure only for the first vignette. Notably, the mean scores for all vignettes were in the positive range; however, the means were approximately 70% of the total possible scores on the vignettes.

Table 3. Inter-Correlations and Item-Total Correlations for EBDM Cases

	EBDM Case 1	EBDM Case 2	EBDM Case 3	Item-Total Corr.
EBDM Case 1	-	.798**	.744**	.973**
EBDM Case 2		-	.611**	.831**
EBDM Case 3			-	.915**

Note. Pearson's r correlations used. ** $p < .01$

Effective communication.

This five-item scale assessed the competence of participants in effective communication, by having participants indicate the extent to which they agreed or disagreed with a statement. The scale was not normally distributed, but did not depart significantly according to the skew and kurtosis statistics. The mean score for effective communication competence ($M = 19.12$, $SD = 3.46$) suggests that participants possessed a fair degree of competence in this area (highest possible score of 25), though not without room for improvement. Overall, there was considerable variation in the responses to

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many of the scale items. Although participants generally agreed that it was important the offender understand the reason for decision ($M = 4.24$, $SD = .769$) and use plain language to facilitate this ($M = 4.49$, $SD = .742$) response trends on these items suggest that participants do not consistently reference the legal criteria in their decisions ($M = 3.24$, $SD = 1.415$) or reference examples and analysis for support in their decision ($M = 3.2$, $SD = 1.389$).

The Cronbach's alpha was .599, indicating that the internal reliability did not meet acceptable thresholds. Item-total correlations were all above $\tau = .3$, except for the first item (*It is important that the offender understand the reason for decision*). Given the importance of this item in the context of parole decision-writing, it is recommended to maintain this item in the scale.

Self-improvement.

Competency in self-improvement was assessed with a nine-item Likert scale questionnaire, where participants indicated the extent to which they agreed or disagreed with a statement. Data did not deviate significantly from the normal distribution at the overall level of self-improvement measure according to the skew and kurtosis statistics. The mean score on this scale suggests participants demonstrate a degree of competence in self-improvement to some extent ($M = 34.43$, $SD = 3.0$; 76.51% of highest possible score). Most indicated a commitment to improving the quality of their decisions, with 34 of 35 respondents indicating that they agreed or strongly agreed with the statement. Of interest, some participants did note that negative coverage of parole in the media did make them stricter in their release decisions (13.5%, $n = 5$).

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Only item 2 (*I find the negative coverage of parole in the media upsetting*) did not achieve an item total correlation of at least $\tau = .3$. Removing this item from the scale increased the internal reliability from $\alpha = .469$ to $.548$, though this still did not meet the accepted threshold.

Descriptive Statistics and Psychometric Properties: Revised Scales

One purpose of this work was to make the measures used to assess each competency more parsimonious. At the outset, this was to be achieved by way of exploratory factor analysis. However, the small sample size was not sufficient to support this procedure. As such, item-total correlations and consideration of the theoretical structure and value of scales and items led to scale revisions, for which the descriptive statistics and psychometric properties were re-assessed. Descriptive statistics and reliability estimates for the revised measures are presented in Table 4. The final composition of all revised measures are available in Appendix O.

Ethical competence: Revised.

Several modifications were made to the assessment measure of ethical competence. Firstly, *Subscale B: Knowledge and Application of Ethical Codes* was removed, as it did not add any value to the overall score (recalling that there was very little variation in responses). Secondly, the first subscale from the *Competence in Adherence to System Factors (Subscale A: Attitudes in Respect of Offenders and Victims)* was added to the *Ethical Competence* umbrella, as further reflection by the researcher determined that such attitudes are more indicative of ethical competence than the action of implementing legislation, policy and organizational mission statements (which may be done effectively despite personal beliefs on the role of offenders and victims in the parole

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process). Item-total correlations and reliability estimates were then re-calculated for the entire scale (as opposed to by subscale), with the view that there was insufficient theoretical difference among the constructs. Recalling that items 8 and 9 of *Subscale A: Ethical Values for Parole Decision-Making* were removed for reasons previously stated (regarding likely differences across jurisdictions in acceptable practices), only two items in the revised scale failed to meet the item-total threshold of $\tau = .3$ (*Ethical Competence Subscale A*, item 7: *On occasion it is acceptable for Board members to render parole decisions where they have a personal link to the offender's case* (reverse scored); and *Attitudes in Respect for Offenders and Victims* item 1: *Most offenders should be released on periods of conditional release prior to sentence completion*). With these items removed, the Cronbach's alpha of the scale was excellent ($\alpha = .815$). It is worth noting here that the reliability assessment may be susceptible to changes across samples given the small sample size of this project. It is also noted that there were no significant departures from the normal distribution.

Encouragingly, as per Figure 4, participant profiles on the revised measure of *Ethical Competence* were very similar to those obtained on the original measure, with a mean score ($M = 64.97$, $SD = 6.73$) achieving 81.2% of the highest possible score. This compares with 79.78% on the original scale.

Competence in adherence to system requirements: Revised.

With *Subscale A: Attitude in Support of Respect for Offenders and Victims* now attached to the ethical competence measure, adherence to system requirements is assessed through three subscales. *Subscale B: Knowledge of the Purpose of Parole* already demonstrated acceptable reliability ($\alpha = .704$). Two items were removed from Subscale

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D: Responding to Time Constraints, leaving a three item scale (*I have difficulty staying on top of the workload* (reverse scored); *I sometimes have to sacrifice quality to stay on track with my expected quota* (reverse scored); and *Too often, I have to stay late at work to stay on track* (reverse scored)); wherein the reliability was excellent ($\alpha = .824$).

Subscale C: Knowledge and Application of Legislation and Policy was not assessed for reliability given its structure, and the researcher suggests that this remain as part of the suite of measures to assess adherence to system factors given that this is a critical piece of demonstrating competence in this area. Notably, the revised subscales C and D displayed significant departures from normality, confirmed by estimates of skewness and kurtosis. Additionally, the overall competency is no longer normally distributed, which means that correlational analyses must be interpreted with caution. The mean for the overall revised score on this competency ($M = 51.5$, $SD = 4.89$) is proportionate with that derived from the original measures, with the mean of the revised scores achieving 76.87% of the highest possible score on this competency as compared with 77.77% on the original measures.

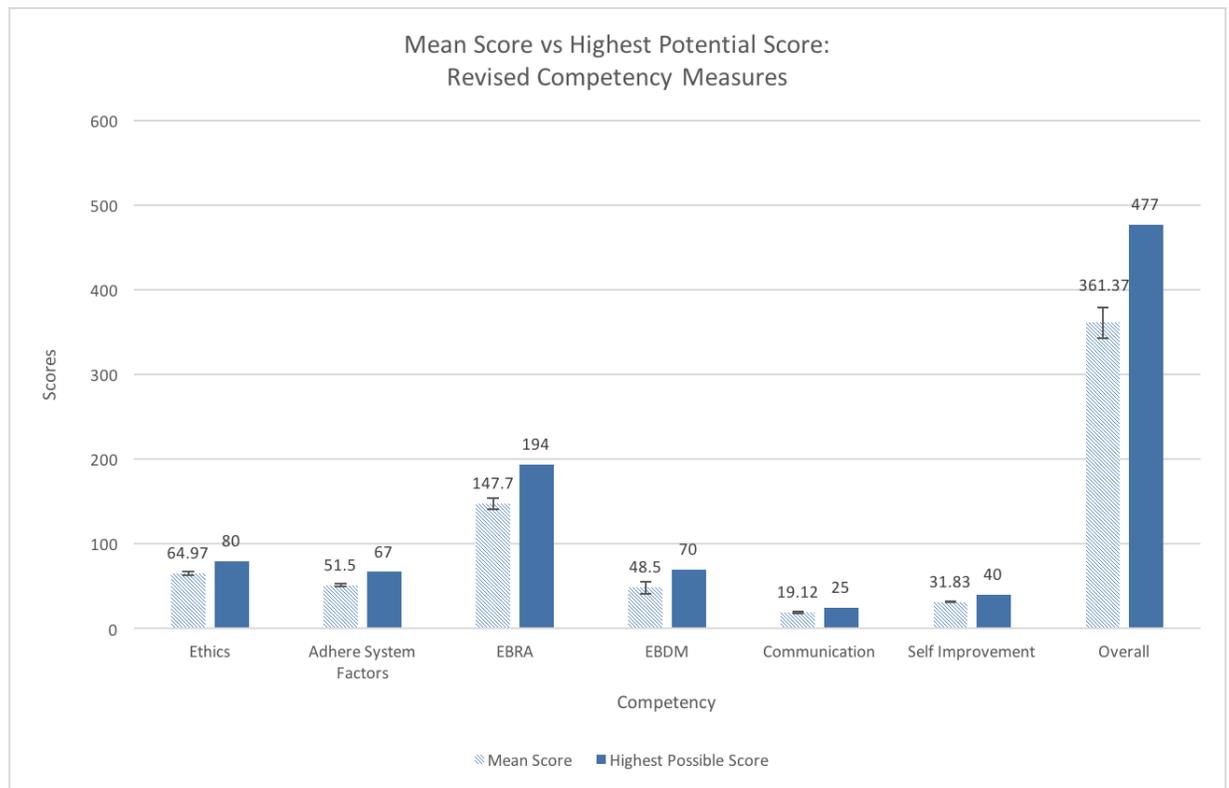
Evidence-based risk assessment: Revised.

The poor reliability for the subscales assessing the knowledge components of EBRA was surprising given that they are factual question and answer items. As with the ethical competence measures, it is possible that the differentiation between subscales was theoretically insufficient to warrant different subscales. As such, subscales A, B, C, D, and F were combined and re-assessed for item-total correlations and reliability estimates. Subscale E (*Knowledge of Community Resources*) had demonstrated near-acceptable reliability in its original form ($\alpha = .698$), and was therefore not included in this.

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Item-total correlations combining subscales A-D and F were calculated. Items not meeting the $r = .3$ threshold were removed from the analysis, leaving 18 items in the final measure (noted in Appendix O). Reliability for this revised scale reached acceptable levels ($\alpha = .719$). As this measure initially comprised of many items assessing knowledge, this is now a more concise measure. Participant profiles confirm that similar information is obtained in the shorter version. While the mean percentage of the overall potential score for the original scales was 70.12%, it was 69.53% for the revised knowledge measures ($M = 76.48, SD = 15.56$).

Figure 4. Mean Scores vs Highest Potential Scores for Revised Competency Measures.



Note. Error bar denotes 95% Confidence Interval.

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Table 4. Descriptive Statistics and Reliability Estimates for Revised Competence Measures.

Variable	valid <i>n</i> (<i>n</i> missing)	α	<i>M</i>	<i>SD</i>	Median	Range		Skew ^a	Kurtosis ^a
						Potential	Actual		
Ethical Competence									
Overall-R	33 (4)	.815	64.97	6.73	65	16-80	53-78	.256	-.461
Adherence to System Requirements									
Subscale B-R	35 (2)	.704	35.57	2.78	36	8-40	29-40	-1.16	-.74
Subscale C-R	36 (1)	-	9.82	2.66	11	0-12	3-12	-2.83	.25
Subscale D-R	35 (2)	.824	6.17	2.32	6	0-15	3-12	2.761	.591
Overall-R	35 (2)	n/a	51.5	4.89	51	11-67	40-60	-2.19	-.603
Evidence Based Risk Assessment									
Subscales (A to D, F)-R	25 (12)	.719	60.2	14.96	61	0-90	30-85	-.713	-.355
Subscale E-R	33 (4)	.698	16	1.99	16	4-20	12-20	-.53	.174
Knowledge-R	25 (12)	n/a	76.48	15.57	77	4-110	46-100	-.871	-.463
Interview/Interpers/	32 (5)	.626	52.41	3.71	52	9-45	33-45	.054	-1.467

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Teamwork-R									
Subscale J-R	36 (1)	.694	12.97	1.66	13	3-15	7-15	-3.486	4.303
Subscale K	33 (4)	.148	20.12	2.16	20	5-25	15-24	-.648	.006
SKAB-R	31 (6)	n/a	71.52	5.32	72	17-85	62-81	.033	-1.395
Overall	24 (13)	n/a	147.7	18.54	149.5	4-195	108-179	-.0775	-.199

Evidence Based Decision Making

Case 1	25 (12)	n/a	15.28	4.9	17	-11 to +24	5-21	-1.996	-.051
Case 2	24 (13)	n/a	12.96	2.46	14	-10 to +18	7-16	-1.636	.041
Case 3	22 (15)	n/a	19.95	5.49	21	-14 to +28	10-28	-.849	-1.161
Overall	20 (17)	n/a	48.5	11.46	52.5	-35 to +70	24-60	-1.896	-.217

Effective Communication

Eff. Comm.	33 (4)	.599	19.12	3.46	19	5-25	10-25	-1.007	.206
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Self-Improvement

Self-Imp-R	35 (2)	.548	31.83	8.38	32	8-40	24-37	-1.41	-.716
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Overall

Overall	15 (22)	n/a	361.37	35.11	363	9-477	271-419	-1.547	2.095
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^a = standardized score.

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For the skills and abilities portion, the subscales for interpersonal, interviewing and teamwork skills were combined as these are theoretically similar constructs. Item-total correlations of all three as a combined measure were performed. Items G1 (*Details of the offence should be revised extensively during the hearing process – reverse scored*), H1 (*It is important to allow both the offender and victims to speak during the hearing*), I3 (*Where my co-panelist and I have differing opinions, I default to their opinion if I am unsure – reverse scored*) and I4 (*Where my co-panelist and I have differing opinions and I am confident in my decision, I engage in a spirited debate to convince them to change their mind – reverse scored*) were removed as they failed to meet the $\tau = .3$ cutoff and as the items were not crucial to gain a well-rounded perspective of the respondents' skills; either similar information was garnered in other, more reliable items or the items were too subjective to effectively assess the desired construct. However, G4 (*I ask specific questions about the release plan, including details on employment plan, housing situation and family situation*) failed to meet the cutoff but was kept given its intrinsic importance in assessing Board member interviewing skills. Reliability for the revised scale was improved from the original iterations, though remained questionable ($\alpha = .626$). Subscale J on leadership skills had one item removed (*I avoid discussing decision making practices with colleagues*), to improve reliability (Cronbach's alpha increased from .347 to .694, now verging on acceptable levels). Subscale J was negatively skewed, although the other measures did not depart from the normal distribution as per standardized estimates of skewness and kurtosis.

Participant profiles again confirm that the revised measures provide similar information to the originals. While the mean percentage of the overall potential score for

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the original EBRA skills and abilities scales was 81.15%, it was 84.14% for the revised knowledge measures ($M = 71.52$, $SD = 5.322$).

Finally, there were serious issues with the reliability of Subscale K (*Ability to identify and assess quality of file information*), with a Cronbach's alpha of .148. This subscale does not fit theoretically with other items, and projected improvements with minor modifications to the scale were not substantial. Furthermore, there was negative covariance among some items in this scale. Given the importance of this scale for evidence-based risk assessment competence, it is recommended to maintain it in the overall EBRA measure, but re-evaluate its reliability and consider possible modifications using a larger sample size.

Evidence-based decision-making.

No changes were made to this measure.

Effective communication: Revised.

Although this scale did not achieve a good reliability, it is recommended that most items remain in the measure. The reliability of the scale in its original form was .548; with improvements to $\alpha = .680$ with items 1 (*It is important the offender understand the reason for the decision*) and 2 (*I make sure that the decision is plainly written so that the offender understands the rationale*) removed. However, it is recommended to maintain all items in the scale regardless of the projected improvements, as these are important areas and denote areas of potential improvement for Board members. To potentially improve consistency, this measure should be rephrased to reflect 'stakeholders' in place of 'offenders' (e.g. it is important that stakeholders understand the reasons for decision' and 'I make sure to write in plain language so that stakeholders understand the

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rationale’). Although minor, this shift re-focuses the question onto the quality of the written decision itself as opposed to the audience for whom the decision is written. Reliability would likely increase with awareness and training on the importance of effective communication and strategies for incorporating these skills into decision writing. Many offenders have limited education, therefore it is important to write in plain language to facilitate communication of ideas and reasons for decisions.

Self-improvement competence: Revised.

This scale did not achieve acceptable levels of reliability. Removing item 2 (*I find the negative coverage of parole in the media upsetting* (reverse scored)) increased reliability from $\alpha = .469$ to $.548$. As this item does not necessarily reflect poor competence in self-improvement, it was removed from the measure. The overall profile of respondents on the revised measure ($M = 31.83$, $SD = 8.38$; 79.58%) is similar to that achieved on the original measure ($M = 34.43$, $SD = 3.0$; 76.51%).

Overall competence: Revised.

The overall total competency scores were similar between the original and revised measures. Participants achieved on average 74.54% of the highest possible score on the original measures, as compared with 75.76% of the highest possible score on the revised measures.

Relations Among Variables

Among the original scales, the inter-correlations among competencies documented in Table 5 demonstrate a wide range in the strength of the relations among competencies. Notably, no correlations exceeded the $r = .8$ threshold, suggesting no issues with multicollinearity, and hence that the set of competency measures were in fact

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assessing separate constructs. The constructs were moderately or strongly related to one another in seven of 15 correlations. Such relationships are particularly strong in instances where the competencies have stronger theoretical links, such as between ethics and adherence to system values ($r = .681$; $p < .01$); adherence to system factors and effective communication ($r = .375$; $p < .05$); and adherence to system factors and evidence-based risk assessment ($r = .557$; $p < .05$). Such cases provide evidence supporting the construct validity of the measures, by confirming relationships where one would expect to see them.

However, the correlation between evidence-based risk assessment and evidence based decision-making ($r = .182$; $p = ns$) was weaker than expected given the strong theoretical link between these two competencies. There was also a weak-moderate negative, but non-significant relationship between EBDM and communication skills, indicating that improved evidence-based decision-making was related with poorer communication skills (and vice versa).

Most competencies as assessed by the original scales significantly contributed to the overall competency score. Those that did not were the *Effective Communication* and *Self-Improvement* measures. Although not significant, the correlations between these were still in the moderate to moderate-strong range.

Table 5. Correlations Among Competencies: Original Measures.

	Ethics	Adh. Sys.	EBRA	EBDM	Comm.	Self-Imp.	Comp-Tot
Ethics	-	.681**	.385	.044	.323	.093	.671**
Adh. Sys.		-	.557*	.344	.375*	.356*	.920**
EBRA			-	.182	-.004	.299	.873**
EBDM				-	-.267	.263	.556*
Comm.					-	.073	.346
Self-Imp.						-	.508

** $p < .01$; * $p < .05$.

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Encouragingly, the inter-correlations and item-total correlations were similar for the revised competency measures, as per Table 6. Overall, this suggests that the revised competency constructs behave similarly to their original forms in relation to other competencies and the total score. Notably, two correlations that had been significant among the original measures remained moderately related but were no longer significant with the revised scales (*EBRA-Effective Communication* and *EBRA-Self Improvement*). The relationship between *Ethical Competence* and *Effective Communication* became significant with the revised measures ($r = .353, p < .05$), though the strength of the relationship was similar to that observed with the original measures. Regarding item-total correlations, evidence-based decision-making no longer significantly contributed to the total competency score despite not being modified and maintaining a moderate-strong correlation, although self-improvement did become significant in this regard.

EBRA and EBDM again had a weak correlation for the revised measures ($r = .103; p = ns$). Further exploration revealed that, curiously, for both the original and revised measures, the knowledge component of the EBRA measure was not at all related with EBDM (original scales: $r = .085; p = ns$; revised scales: $r = .019; p = ns$).

Table 6. Correlations Among Competencies: Revised Measures.

	Ethics	Adh. Sys.	EBRA	EBDM	Comm.	Self-Imp.	Comp-Tot
Ethics	-	.552**	.371	-.005	.353*	.257	.643**
Adh. Sys.		-	.584**	.407	.314	.301	.881**
EBRA			-	.103	.031	.245	.861**
EBDM				-	-.267	.403	.512
Comm.					-	.097	.302
Self-Imp.						-	.571*

** $p < .01$; * $p < .05$.

Another purpose of this work was to assess if higher levels of competence were related with quality decision-making. The relation between the original competence

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scales (combined construct of all competencies except EBDM) with the EBDM score was existent but weak, and approaching the moderate threshold ($r = .292, p = ns$). It was only slightly weaker for the revised scales ($r = .249, p = ns$). These results demonstrate some support for the notion that competencies in the identified areas are related with quality decision-making, although the lack of significance renders this inconclusive and in need of further exploration.

Cognitive Scales and Views Towards Punishment and Rehabilitation

As per Table 7, Board members also completed scales assessing their cognitive styles in decision-making and views towards rehabilitation and parole. Overall, Board members tended to have fairly strong need for cognition ($M = 81.92; SD = 9.583$), with moderate scores of need for structure ($M = 38.16; SD = 7.105$) and fear of invalidity ($M = 39.52; SD = 7.66$). They also tended to have values in support of rehabilitation ($M = 37.4; SD = 3.317$).

Table 7. Descriptive Statistics for Supplementary Measures.

Scale	valid <i>n</i> (<i>n</i> miss.)	<i>M</i>	<i>SD</i>	Mdn	Range		Skew ^a	Kurtosis ^a
					Potential	Actual		
Need for Cognition	25 (12)	81.92	9.853	83	18-108	60-104	-.116	.277
Personal Need for Structure	25 (12)	38.16	7.105	37	11-66	25-52	-.060	-.396
Personal Fear of Invalidity	25 (12)	39.52	7.66	38	14-84	25-57	1.343	.628
Values towards Rehabilitation & Punishment	25 (12)	37.4	3.317	38	9-45	32-45	.957	-.253

Correlation analyses of supplementary measures.

The correlations between the cognitive traits and values towards punishment and rehabilitation with EBDM are negligible and non-significant. Of interest are the two moderate correlations observed between the *Need for Cognition* and *Values towards Punishment and Rehabilitation* with total competency scores. These relations, though non-significant, suggest that a high need for complex thinking and values in support of offender rehabilitation over punishment are related with overall competency scores. This is perhaps an unsurprising result but may again serve to support construct validity for the measures as these are well-established tools.

Table 8. Correlations among Supplementary Measures.

	EBDM	Total Comp.
Need for Cognition	-.102	.422
Personal Need for Structure	.073	-.148
Personal Fear of Invalidity	-.181	.007
Values towards Rehabilitation and Punishment	-.104	.531

Discussion

This project set out to identify competencies required for quality parole decision-making, validate newly developed measures to assess these competencies, and describe the profiles of existing PBMs in these areas. To this end, four research questions were examined, and are addressed below. Of note, one significant limitation to the current project is the low sample size, which restricted statistical analyses. This, in combination with the possibility of sampling bias (discussed in this section) may make the observed

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results susceptible to changes across samples.⁷ It must be stressed at the outset that these two limitations mean that the trends observed in this sample may not be replicated in future studies. As such, although the results were used to inform modifications to the assessment measures, it is not necessarily expected that these revisions will apply equally in future studies. This is discussed further within this section and in terms of the next steps for this work.

Despite these limitations, the results overall provide tentative support of a proof of concept for the competencies identified through this model. However, while the knowledge, skills, abilities and personal characteristics identified by the competency model may be universally important for PBM work, the results from this sample suggest that some of the indicators used to assess these constructs are not. As discussed in more detail below, the variation in responses on some items suggest that practices may vary across jurisdictions. This notion of ‘jurisdictional practice’ does not negate the importance of the knowledge, skills or abilities targeted by the measures, but does suggest that some indicators may need to be re-visited to ensure that they assess the desired construct without unduly penalizing for differences in local customs. Areas where differences in jurisdictional practice is believed to account for some of the variation in responses (and therefore have implications for the general competency profile and/or reliability of the measure) are identified and discussed below.

What are the Parole Board Member Profiles for Each Competency?

There were high expectations of competency performance by PBMs given that participants were well educated and on average had considerable experience in both the

⁷ This is a low sample size, as it is estimated that each of the 65 member states of APAI would have at least 5-8 voting members; and as such this sample represents less than 10% of the potential pool of participants.

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field of criminal justice and parole decision-making. PBMs performed fairly on almost all competencies, achieving overall average scores of between 70-80% of the highest possible score on each measure. Overall, they performed the best on the *Ethical Competence* scale, for both the original and revised measures. This suggests that Board members in general possess strong ethical attitudes, skills and abilities; with values largely consistent with a commitment to incorporating evidence-based practice into decision-making. Board members also performed well on the *Adherence to System Factors* measure, suggesting that they possess considerable knowledge of the purpose of parole and of the legislation in their jurisdictions. However, the results from the *Responding to Time Constraints* subscale suggest that the workload is challenging across jurisdictions, with PBMs experiencing difficulty staying on top of the workload and sacrificing quality to meet quotas. This reinforces that time management skills are an important component of Board member work.

It was noted that response bias may have been an issue for some items from *Ethical Competence Subscale B: Knowledge and Application of Ethical Codes* and *Adherence to System Factors Subscale C: Knowledge and Application of Legislation and Policy*. These were self-report assessments of their knowledge and application of the ethical codes, legislation and policy. Each had a subsequent validation question asking for the name of the relevant code/legislation to help confirm the knowledge thereof; which was left unanswered by a considerable portion of those who indicated that they their knowledge of the construct was ‘complete’. Where possible, and should jurisdictions look to adapt these measures in selection or training processes, such

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knowledge and application should be validated by factual questions on the respective codes.

The two lowest scores among the original and revised measures were the EBRA and EBDM measures as indicated by the percentage of the mean score from the highest possible score for that measure (although it must be noted that for the revised measures, four of the six measures ranged within a single percent). EBRA and EBDM are such critical components of parole decision-making, that achieving an average score of 73.68% and 69.29% respectively, falls somewhat short of the expectations for professionals in this field of work. In addition to the lower than expected scores, it is unclear why the results were so inconsistent for Board members on general risk knowledge; with individuals performing well on some questions and not others. By all accounts, PBMs should have been ubiquitously familiar with the content contained within these questions and been able to respond correctly, regardless of their home jurisdiction.

Potential causes for these low scores and low reliability warrant further exploration and consideration. One possible explanation is a lack of training. The results indicated that a quarter of the PBMs did not receive training upon appointment. Of those that did receive training upon appointment, it is unclear if enough time was allocated; with almost half indicating that it was 40 hours or less in duration. These figures are cause for serious concern. It is this researcher's opinion that all PBMs should be provided with training on risk assessment at the onset of each appointment, given the complexities involved in assessing risk by different offender type, thorough the use of different risk instruments, and given the importance of the decision being made from both a public safety and individual liberty standpoint. A higher number of participants indicated that

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training was received at some point during their tenure (as opposed to upon appointment) in the areas of decision-making and risk assessment. However, such training was evidently either insufficient in depth or breadth to fully provide the foundations to PBMs to perform EBRA. Should organizations already be providing training, it may be beneficial to review the content to ensure that it adequately covers the information needed to inform effective risk assessment. Alternatively, the question of knowledge transfer is relevant here as well. If organizations are providing adequate training opportunities, the delivery method of these trainings may need examining. Studies have demonstrated that training does not always result in modified behaviours in the workplace (Day, 2001). As such, training delivery method is important to consider. Methods that build upon behaviour which can occur naturally in the workplace such as mentoring and action learning may be worthwhile techniques to promote application of new knowledge (Skylar Powell & Yalcin, 2010).

Regardless of the reason for the poor scores and reliability, EBRA is central to parole decision-making, and it is crucial that PBMs master the knowledge, skills and abilities required to conduct effective risk assessments. PBMs must be held to a high standard on this particular competency to facilitate their role of contributing to public safety by making informed release decisions. Parole organizations should take note of the scores obtained on these measures as a reminder of the need to provide regular training on established and emerging risk assessment research.

Results on the EBDM measure similarly suggest a need to improve PBM capacity in this area. It is possible that structured decision-making practices to guide the decision-making process have not been implemented in all jurisdictions, making this a novel

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practice for many PBMs. In a recent survey of fourteen parole organizations, only six had structured decision-making guidelines in place (Wardrop & Serin, 2016). Regardless, EBDM is another core function of the Board member's role to ensure fairness in the final decision and to ensure that all factors are weighted and considered similarly for all offenders. This is therefore not only an area for training, but also indicative of a need at the organizational level to foster structured approaches in decision-making. These recommendations are supported by the PBMs theoretical commitment to implementing EBP as per their scores on *Ethical Competence Subscale C: Commitment to Evidence-Based Practice*.

Finally, PBM profiles suggest a fair degree of competence on the *Effective Communication* and *Self-Improvement* measures; though again with room for improvement. In terms of overall competency profile scores, the *Effective Communication* scale seems particularly susceptible to jurisdictional variations, as decision documentation requirements and best practices may differ depending on location. For instance, PBMs may not be required to cite legislation in their decisions, or indicate how their decision meets legislation and/or policy criteria. Regardless, these items were retained in the revised measure given their theoretical value-added. It is in part for this reason that this tool may need to be adapted to suit the jurisdictional idiosyncrasies if it is to be used for informing selection processes and/or training requirements. Alternatively, it suggests to organizations that this is an effective practice for increasing transparency in decision-writing that may be worthwhile to incorporate into local policies.

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Overall, the observed profiles suggest that PBMs possessed some of the knowledge, skills and abilities relevant for the work, but came short in other areas. This is particularly troubling given that the observed results were likely effected by a sampling bias. As this was a voluntary survey, it is likely that this was an enthusiastic group of participants. In fact, as the main draw offered to respondents in return for their participation was a profile of their results in relation to others, they already arguably demonstrated one competency (self-improvement), by seeking feedback about their performance. In this sense, it is plausible that the scores obtained are exaggerated as compared with those that would be observed among PBMs in general. By this, it is suggested that competency and overall scores are likely higher than what would be observed in other PBMs, and that problem areas are likely muted. For instance, the challenges in responding to time constraints may be more pronounced in the general population of PBMs. To this end, although the profile of the scores does not raise alarm in the current form, the likelihood that actual profiles are lower suggests that there is a need for leaders of parole organizations to systematically assess and address areas for improvement in the identified competency areas. Fortunately, options are available to effectuate such self-assessments. The National Parole Resource Center (NPRC) has created a *Paroling Authority Self-Assessment Toolkit*, to help parole organizations identify strengths and weakness in critical areas such as using empirically-based tools for risk assessment, developing policies that facilitate evidence-based decision-making, and more. Furthermore, the NPRC offers Technical Assistance to organizations to target areas of need (NPRC, 2015).

What are the Psychometric Properties of the Newly Developed and Revised Measures?

The scales developed at the outset of this project suffered from poor reliability, with only one subscale of 20 meeting the $\alpha = .7$ threshold for acceptable reliability (*Adherence to System Factors Subscale B*). Other scales approached but did not meet the threshold (*Ethical Competence Subscales A and C; EBRA Subscale E*). Possible explanations for the poor reliability of the original measures vary by the subscale and competency in question. For *Ethical Competence*, the original *Subscale A: Ethical Values in Parole Decision-Making* achieved an acceptable reliability estimate of $\alpha = .714$ with just two items removed from the scale. The two items that were removed dealt with questions of discussing details of a case with others if they had specific expertise that the respondent felt could benefit their decision. Although for the purpose of scoring the measure it had been coded as ‘less ethical’ to engage in these discussions, it is feasible that acceptable practices vary across jurisdictions, and that discussing details of a case with other Board members may not pose privacy concerns in the same way that it does in other jurisdictions.

Subscale B: Knowledge and Application of Ethical Codes was removed from the revised measures of ethical competence given the limited-value added that it provided. However, this is an essential component of quality parole decision-making, and therefore alternative methods of assessment will be required in future iterations of this tool. Although some questions may have been influenced by response bias, it is difficult to fully explain why this measure was not more effective. Case vignettes and situational examples are typically fairly valid methods of assessing what an individual would do in a

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given situation, provided that the questions are appropriate (Hom, 1992; Leigh et al., 2007). It is possible that the cases used were too basic to add valuable information as to which PBMs possessed the ability to identify and navigate ethical dilemmas.

Alternatively, it is possible that PBMs are well attuned to ethical codes; in part as many had to meet such a requirement prior to appointment, and in part as this is a high profile job where PBMs are accustomed to being held to a high ethical standard.

The results for the *Adherence to System Factors* competency measure confirmed that time management skills are critical for quality Board member work. The revisions to the scale resulted in a now three-item scale assessing this construct. Although it achieved excellent reliability, it is important that the revised time management subscale be validated to ensure that these three items are sufficient to identify individuals who can manage time effectively. Alternatively, depending on the future use of this competency model, an alternative assessment may be worthwhile to discriminate between those who do and do not manage time well in the face of such significant time constraints. This could take the form of a revised questionnaire, reference check, or practical exercise assessing commitment to quality despite a high workload.

Reliability for both the knowledge and skills and abilities components of the EBRA measure was generally poor. Of particular surprise is with the knowledge component of the EBRA measure. Given that these were primarily fact-based true-false and multiple choice questions, the variation cannot be accounted for by difference in jurisdictional practice and it is surprising that these were not more reliable measures. The poor reliability on each subscale suggests that Board members did not consistently answer questions correctly throughout the subscales (e.g. that among PBMs who did well

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overall, they did not all do well on the same questions). While it is possible that some of the questions used were unclear or too challenging, it is surprising that none of these four subscales achieved higher than $\alpha = .471$. *Subscale D: General Risk Knowledge* even scored a negative alpha, suggesting that knowledge of one item in the scale did not necessarily translate into having knowledge on another item in the scale (and in fact, that it was negatively associated with knowledge on at least one other item in the scale). The low reliability of the EBRA knowledge subscales suggests that PBMs have knowledge in some areas, but not a complete and robust understanding of risk. The revisions to the EBRA subscales resulted in significantly improved reliability in the measures. However, while the final EBRA knowledge scale maintains questions from all four original subscales, the compromise is a less robust assessment of various knowledge domains. Future iterations of these measures or applications should explore if training can improve the reliability of the measure, and it is suggested that the original measure be re-tested for reliability following a general risk training session to obtain a better estimate.

In contrast with the knowledge component, the possibility of varying jurisdictional practice plausibly accounts for a portion of the low reliability among many of the EBRA skills and abilities subscales, including for instance, EBRA *Subscale G: Interviewing Skills*. This scale was comprised of four items, designed to assess various aspects of the Board member's interviewing skills (see Appendix F for items). Full marks on this subscale would indicate that a PBM conducted interviews in such a way as to glean the information required in accordance with evidence-based practices, while minimizing time spent on other areas not relevant for assessing the risk or case factors of the offender in question. The poor reliability suggests that PBMs did not uniformly

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consider certain answers to be more appropriate. They tended to agree with the need to ask questions about the release plan and ask for clarification from the offender if needed, but were split as to if the details of the offense should be reviewed extensively during the hearing or if it was required to ask the offender their plan for abstention from drugs and alcohol, regardless of whether or not the offender had issues with this as part of their crime cycle.

Of note is that the revised scales achieved significant improvements both in terms of the parsimony of the information and in terms of reliability estimates. The revised *Ethical Competence* and *Adherence to System Factors* subscales achieved excellent reliability estimates. Furthermore, the final composition of each respective subscale contributes to a theoretical understanding of the competency, which was not sacrificed at the expense of achieving improved reliability estimates.

It is acknowledged that the reliability estimates may fluctuate across samples given the small sample size on which these results were obtained, and therefore the revised scales may not maintain the observed reliability estimates, or stay above the $\alpha = .7$ threshold. Therefore, while the results for the revised measures are promising as a proof of concept, results must be interpreted cautiously and replication is essential to confirm what has been observed with this sample.

Relations Among Variables

The observed relationships among the original variables were similar to those obtained for the revised measures. Overall, the results suggest that moderate (though not always statistically significant) predictable relationships exist among the competencies; for instance, between ethical competence and adherence to system factors. The most

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perplexing result observed within both the relationships among original variables and revised variables is the weak correlation between EBRA and EBDM. Knowledge of evidence-based risk assessment does not appear to translate to applying this to decision-making practices in general. It is plausible that despite a knowledge of risk factors, Board members may be less adept at consistently incorporating these into their decision-making. Notably, this reinforces that these are indeed two separate constructs. It also serves to confirm the importance that PBMs know and understand relevant research evidence, and that their home agency has a responsibility to provide them with tools and mechanisms to structure their application of this knowledge in decision-making. Training on the application of evidence-based knowledge to decision-making may help to increase the consistency (and thereby the reliability) of this measure, in addition to more accurately representing the relation between EBRA and EBDM. Such training could be provided on tools such as the Risk Assessment Framework, which encapsulate key risk factors and help PBMs to put them together in such a way as to place the appropriate amount of weight on each factor. Having PBMs complete this measure pre- and post- EBDM training would help to clarify the particular issues and foster a better understanding of PBM practices on this construct.

Is Overall Competence Related with Quality Decision-Making?

Ultimately the results were inconclusive in respect to the question of the relationship between overall competence and quality decision-making, given that the weak-moderate relationship observed was not statistically significant. Further research is required to validate that the competencies identified, though theoretically sound, endorsed by an expert Advisory Committee, and of importance to PBM work, translate

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into actual predictors of quality decision-making. Providing training on EBRA and EBDM and engendering a general cultural shift towards the importance of EBDM practices at the individual and organizational level will help to make this an achievable goal.

Concluding Remarks

The value of having a competency model for PBMs has been detailed throughout this paper. PBMs make important decisions affecting public safety and concerning the liberties of offenders. This process inherently requires individuals of high competence to render decisions which reflect careful analysis of all relevant aspects of each case. This is particularly important when PBMs are the sole decision-makers on cases. In such instances, there is no external force to provide oversight or ‘sober second thought’ on decisions; which rest unilaterally with one individual. This recipe of high stakes decision-making with minimal oversight necessitates highly competent individuals to maintain the transparency, fairness and accountability in the parole system process. Furthermore, these standards apply across jurisdictions and should be openly communicated to facilitate these important system attributes.

While a considerable portion of this discussion has focused explicitly on the benefits of these competencies for release decisions, it is important to also consider their advantages specific to decisions on release conditions, including those made in response to violations of such conditions. The issue of imposing special conditions and responding to violations is complex. According to Rhine, Petersilia and Reitz (2015), special conditions should be relevant to risk and needs, realistic, and evidence-based. Taken together, this implies that parolees should be assigned a reasonable number of conditions,

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which, according to research, will help change behaviour and manage their risk and needs.

A significant portion of readmissions to prisons is comprised of offenders who have incurred noncriminal technical violations of parole conditions, with the six to twelve-month period immediately following release being the highest risk period for offenders (Grattet et al., 2009; Petersilia, 2001; Rhine, Petersilia, & Reitz, 2015; Soloman et al., 2008). In Grattet et al.'s study of the Californian prison population, 49% of parolees in their sample incurred a violation upon release, with 24% incurring multiple violations. A third of the violations were for noncriminal, technical violations. This suggests that noncriminal 'failure' (e.g. drug use, absconding) is a fairly normal part of the parole process. However, in their sample, 85% of technical violation cases were returned to prison. Recalling that one of the purposes of parole within the context of the criminal justice system is to provide an alternative to incarceration and help transition the offender to community re-entry, these figures suggest that current practices in the imposition of special conditions and responses to the technical parole violations are counterproductive. In light of these practices, Grattet et al. recommend employing a parole violation matrix to ensure that responses to parole violations are graduated, consistent and are proportionate to the original risk level of the offender as well as the severity of their parole violation. Ultimately, these actions would result in parole violation decisions that are more transparent and defensible; while simultaneously allowing parole to fulfill its role as a true solution to issues of over-incarceration. Once again, such actions require competence by the decision-makers to effectively assess the risk in the context of known risk factors, as well as the ability to use a risk matrix to reach

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an evidence-based decision. This once again reinforces the need for qualified and competent decision-makers.

In light of the above discussion, the benefits of having competent parole decision-makers is clear. The outstanding question at issue is whether or not the competency model and assessment measures developed herein are sufficient to address the needs, or if they require further revisions. A few key conclusions can be drawn from the observed trends regarding the competency model and assessment measures. To begin, the purpose of the model itself must be considered. The idea of the competency model is to define the standards that PBMs should possess or be capable of obtaining within a set amount of time from their appointment to facilitate quality decision-making. As such, the competency model has several practical applications; namely informing the selection of capable PBMs and identifying training requirements, by highlighting areas of need across competencies. In consideration of this purpose, and as the identified areas of competency remain theoretically sound and endorsed by the Advisory Committee of experts, this lends support to these domains as being of critical importance in quality parole decision-making. The model is flexible and broad; yet does not include superfluous competencies. The ones within this model are also measurable. Finally, as the correlations among measures suggest that these are all different constructs, it is proposed that this competency model be accepted as the foundation of knowledge, skills, abilities and personal attributes which are critical to effective PBM decision-making.

The assessment measures are however in need of further consideration. The main challenges of the measures were that they demonstrated poor reliability in their original form, and contained some items that were subject to variations attributable to differences

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in jurisdictional practice. Yet, despite these weaknesses, several findings of key importance were noted. These included the lower than ideal competency profiles for the EBRA and EBDM measures, as well as poor reliability estimates for the EBRA measures. As detailed above, these are problematic findings. While it may be that the assessment measures are in need of further revision, they have suggested even in their current form that these are areas that can be improved among PBMs within this sample. As such the competency model and assessment measures have thereby already proved useful in fulfilling their intended purpose.

This reaffirms that there are several factors at play when considering the extent of modifications required to the assessment measures, and this discussion must also be contextualized with the purpose of the competency model. Having clarified that the purpose of the model is to define the competencies that are critical for effective and quality parole decision-making, we can also conclude that the competency model should be ubiquitously important for PBMs. The competencies included here are theoretically independent of differences in jurisdictional practice. To facilitate transparency, accountability and fairness; decision-makers should possess ethical competence, skills and abilities to apply their legislation and policies, a robust knowledge of risk assessment, the capacity to use this to inform decisions, communicate decisions and self-improve as needed. Not only do these attributes necessarily apply indiscriminately across parole systems, there is a great value in endorsing them across states and nations. Doing so directly identifies the targets and establishes the standards for such decisions; fostering the desirable attributes of transparency, fairness and accountability at the system-level as well as in the decisions. Unanimity in the adoption of these standards sends a clear

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message that parole decisions are being taken seriously, and that competent, qualified decision-makers are required to make them. This also provides some legitimacy and foundation of accountability in the unfortunate event that a parolee commits a high profile offence. It is far more defensible to note that the decision-maker followed an appropriate decision process while considering relevant and key information if they have also been found competent in these areas and if they have received appropriate training.

To this end, the issue of jurisdictional practice must be carefully considered in the assessment measures. While the competencies may be sound, items which are subject to jurisdictional differences should be removed or adapted to better reflect national standards for behaviour in any given domain. As per the results observed here, this would likely primarily touch items on the skills and abilities portion of the EBRA measure as well as on the *Ethical Competence* and *Effective Communication* measures. Importantly, the adoption of national standards does not trivialize important differences between jurisdictions, nor does it ignore differences in legislative criteria across states. While the outcome of a decision (release or not release) may necessarily differ by varying levels of risk tolerances in jurisdictional legislation; the process and analysis undertaken to reach the final decision should remain constant.

Another factor for consideration in the assessment measures of these competencies are the methods used for assessment. Leigh et al. (2007) confirm that multiple-choice questions and answers are common and acceptable and an efficient method of assessing knowledge, provided that questions are appropriate. They caution however, that these kinds of assessments suffer from low fidelity as decision-makers are not often faced with straightforward, multiple-choice questions in actual practice. The

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same authors confirm that case vignettes are acceptable for use in assessing decision-making constructs, again provided that the question quality is appropriate. Hom's research (1992) identifies that a person's intention for action is an acceptable proxy for their subsequent behaviour. Combined, this information suggests that the methods deployed for this study were likely appropriate for the intended purpose, especially regarding assessments of knowledge and decision-making. Regardless, there is room for improvement; in particular, regarding the assessments of skills, abilities and personal attributes. Leigh et al. recommend the use of portfolios (wherein a candidate submits examples of how they have demonstrated key attributes in their previous experience), or simulated role-plays for demonstrating skills and abilities. A significant restraint however, is the financial and human resources required to implement assessment methods that demonstrate better fidelity to actual practice. Those involving training multiple raters on the indicators of acceptable responses are time-consuming and resource intensive to plan. Given these restraints and in consideration of the advantages discussed for a national-level competency assessment, it is proposed that the assessment methods used herein are the most appropriate for the current purposes, but replication on a larger sample is required. Options remain available to develop more in depth and tailored assessments at a jurisdictional level should these be desired and required for certain competencies or domains.

At this point, several concrete next steps are proposed. Firstly, the items used to assess each knowledge, skill, ability and personal attribute should be reviewed to remove or adapt those that impose undue restrictions or penalties for variations in jurisdictional practice. It is likely that they can simply be rephrased to more generally assess the desired

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construct. Notably, respecting differences in jurisdictional practice does not automatically mean removing items if practices differ. In some instances, the value of the item in achieving transparency, fairness and accountability in the decision-making process will outweigh the benefit of accommodating differences by jurisdiction. In such instances, the onus is on the jurisdiction to assess their own practices and determine if improvements are required. Secondly, the psychometric properties of the measures should be re-tested, preferably in a pre- and post-training setting. This would permit a confirmation of the hypothesis formulated in the present study that training would help to improve the competency profiles and reliability of the measures. Finally, the model should be validated in a more tangible and relevant way, by linking PBM competency profiles with actual offender outcomes. This will ultimately clarify the efficacy of the model and illustrate the need for highly competent PBMs by demonstrating if in fact highly competent PBMs (as assessed by the model) make more accurate decisions in reality. It is recommended that such actions be taken for both the original and revised measures as the latter demonstrated improved reliability in this study while providing similar information to the original measures. However, given the low sample size, it is unclear if these more parsimonious measures will yield similar results in future iterations. It is therefore wise to assess both sets of measures.

Overall, the results observed here suggest that the sample of PBMs on average possess a fair degree of competence in areas that are important for quality parole decision-making, with room for improvement in the areas of EBRA and EBDM. The competencies included in the model can largely be reliably assessed using the revised measures, though this needs to be replicated through future research; in particular, once

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the items have been subsequently reviewed for applicability across jurisdictional practices. It is expected that training on EBRA and EBDM would improve not only the Board member competencies in these areas, but also the reliability of the respective measures to assess these constructs. Regardless, it appears that these results provide support for the importance of these particular competencies for PBMs, and that the measures have been able to identify areas of strength as well as areas for improvement and self-reflection.

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Appendix A: Job Model Approach to a Competency Model for Parole Board Members

Output
Quality decision: Suitability and timing of release, imposition of special conditions, and parole violation
Consequences
Improved public safety Stakeholder confidence in parole system (offender, victims, public, legislators) Improved offender outcomes
Inputs
Offender file information Hearing information Victim information

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Conditions			
Legislative framework	<ul style="list-style-type: none"> • Ethical competence • Adherence to system standards and expectations 	<ul style="list-style-type: none"> • Knowledge of governing legislative framework within which parole decisions must be made • Ability to make decisions within the legislative framework 	<ul style="list-style-type: none"> • Identify legal requirements for decision context • Adhere to legislated requirements in decision-making • Demonstrate respect for individual civil liberties
Policy requirements		<ul style="list-style-type: none"> • Knowledge of governing policy framework within which parole decisions must be made • Ability to make decisions within the policy framework 	<ul style="list-style-type: none"> • Identify policy requirements for decision context • Adhere to policy requirements in decision-making
Ethical considerations		<ul style="list-style-type: none"> • Knowledge of applicable ethical codes and requirements • Ability to make decisions in accordance with ethical codes • Knowledge of specific cultural needs within the jurisdiction • Ability to incorporate cultural sensitivity into decision-making • Commitment to respecting offender and victim rights, and facilitating atmosphere of respect for stakeholders • Commitment to adhering to evidence-based practices in risk assessments and decisions 	<ul style="list-style-type: none"> • Identify situations where potential ethical concerns exist (e.g. financial or appearance of bias) and provide examples of effective remediating action • Demonstrate commitment to making decisions in accordance with ethical standards, ensuring confidentiality, objectivity and impartiality are maintained • Ensures that the rights of both offenders and victims within the parole context are respected • Identify cultural sensitivity requirements within decision-making • Demonstrate an understanding of and respect for the unique need of special offender populations (women offenders, offenders with mental health needs, offenders from

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			<p>ethnic minority backgrounds, etc.), and incorporate these considerations into the final decision</p> <ul style="list-style-type: none"> • Demonstrate commitment to professionalism and respectful encounters and exchanges with all stakeholders throughout the parole process • Demonstrate commitment to evidence-based practices throughout the parole decision-making process
Time constraints		<ul style="list-style-type: none"> • Time management skills • Ability to maintain quality of decisions despite time constraints 	<ul style="list-style-type: none"> • Demonstrate effective prioritization strategies • Quickly and efficiently review case materials and analyze information • Demonstrate commitment to quality despite heavy workload
Parole system factors		<ul style="list-style-type: none"> • Knowledge of the purpose, principles and vision of parole within the context of the criminal justice system • Attitude supportive of offender rehabilitation 	<ul style="list-style-type: none"> • Demonstrate understanding of contribution of parole to public safety (e.g. programs more effective in community, etc.) • Demonstrate understanding of parole benefits (financial) • Demonstrate commitment to values supportive of offender rehabilitation
Process steps			
Evidence-based risk assessment	<ul style="list-style-type: none"> • Evidence-based risk assessment (knowledge) 	<ul style="list-style-type: none"> • Knowledge of evidence-based risk assessment practices • Knowledge of static and dynamic risk factors • Knowledge of risk assessment tools 	<ul style="list-style-type: none"> • Demonstrate understanding of static risk indicators • Demonstrate understanding of dynamic risk indicators • Identify examples of static and dynamic risk indicators

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		<ul style="list-style-type: none"> • Knowledge of Risk-Need-Responsivity Principle • Knowledge of community resources available to offenders • Knowledge of effective use of special conditions 	<ul style="list-style-type: none"> • Demonstrate understanding of the advantages of actuarial or structured professional judgement (SPJ) risk assessment tools in predicting an offenders risk to reoffend • Identify the limitations associated with clinical predictions/assessments of risk • Demonstrate understanding of risk-need-responsivity principles in correctional context • Identify known criminogenic needs (in general and specific to offender types) • Demonstrate understanding of effective treatment interventions • Demonstrate understanding of offender re-entry needs and community options appropriate to facilitate successful offender re-entry (e.g. community programming, housing, employment services, etc.) • Demonstrate understanding of effective use of special conditions; in terms of their contribution to effective case management
Evidence-based risk assessment continued	<ul style="list-style-type: none"> • Evidence-based risk assessment (continued - skills) 	<ul style="list-style-type: none"> • Analytical skills • Interviewing skills • Interpersonal skills (to deal effectively with offenders and victims) 	<ul style="list-style-type: none"> • Perform analysis to make a decision based on risk-relevant information; synthesizing information on overall risk from various file/hearing sources, while minimizing role of

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		<ul style="list-style-type: none"> • Teamwork skills (especially in the case of joint decision-making) • Leadership skills 	<p>non-risk relevant information in decision process</p> <ul style="list-style-type: none"> • Use the interview effectively to clarify file information, ask risk-relevant questions and provide stakeholders with the opportunity to participate • Use clear language during the hearing, and facilitate understanding of participants • Engage in active listening during the hearing • Ensure that hearings are conducted respectfully, for all stakeholders/participants • Work effectively with co-panelists; considering alternative opinions, engaging in constructive and respectful exchange of opinions; while maintaining commitment to independence and evidence-based decision-making • Encourage atmosphere of respect and practices in support of quality decision-making for all Board members within organization
<p>Evidence-based risk assessment continued</p>	<ul style="list-style-type: none"> • Evidence-based risk assessment (continued – abilities) 	<ul style="list-style-type: none"> • Ability to identify and assess quality of file information 	<ul style="list-style-type: none"> • Identify risk relevant information • Note any major gaps in file information that should be addressed prior to decision-making • Conduct analysis of information, using knowledge of risk-need-responsivity principles

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<p>Evidence-based decision-making</p>	<ul style="list-style-type: none"> • Evidence-based decision-making 	<ul style="list-style-type: none"> • Ability to incorporate risk knowledge into decision-making • Ability to consistently apply a decision-making framework within parole context • Ability to synthesize information from all sources, analyze risk relevant information in accordance with policy and legislation, and render consistent and transparent decisions based on evidence-based practices • Ability to make evidence-based decisions in the context of: <ul style="list-style-type: none"> -Initial release decisions -Special conditions -Parole revocation decisions 	<ul style="list-style-type: none"> • Consider statistical risk estimate • Consider static and dynamic risk information • Consider how offender’s criminal history relates to risk • Consider offender’s criminogenic needs • Consider offender’s progress in addressing risk • Consider responsiveness of any programming provided to the specific needs of the offender (risk-need-responsivity levels) • Consider institutional behaviour • Consider the offender’s release plan; assess how it relates to offenders risk and needs • Consider hearing information • Consider discordant file or hearing information and how this may impact the offender’s risk • Consider case-specific information not otherwise included • Synthesize all relevant information, conduct analysis to arrive at final decision • Impose only appropriate special conditions (e.g. that are related to offender’s risk factors, that are necessary and relevant for effective case management, and that are reasonable and enforceable)
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			<ul style="list-style-type: none"> Consider incremental changes to risk (in the event of violation) and impact on risk-level overall
Communicate decision to stakeholders	<ul style="list-style-type: none"> Effective communication 	<ul style="list-style-type: none"> Communication skills 	<ul style="list-style-type: none"> Provide written decision that includes decision rationale Demonstrate how decision meets legal and policy requirements Support decision with risk-relevant evidence from case file/interview Write a clear and concise decision that all stakeholders can easily understand
Feedback			
Boards of Investigation (BOIs)/offender appeals	<ul style="list-style-type: none"> Self-improvement 	<ul style="list-style-type: none"> Commitment to continuous self-assessment Ability to incorporate feedback into future decisions Ability to respond effectively to criticisms of the parole system or negative portrayals of parole in the media 	<ul style="list-style-type: none"> Perform regular self-assessment to determine status of adherence to quality decision-making practices Engage in internal and external feedback exercises Include lessons learned from BOIs into future decisions Include lessons learned from offender appeals into future decisions Demonstrate commitment to quality, evidence-based decision-making Communicate importance and benefits of parole to public parties and media, as appropriate
Public attitudes/media coverage			
Political pressures			

Appendix B: Informed Consent and Debriefing

Informed Consent

This informed consent form is designed to explain to you the study's purpose, the required tasks and additional information to allow you to decide whether or not you wish to participate in this study. Please take the time to read this information carefully.

Project Title: Developing a Competency Model for Parole Board Members

Research personnel:

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Purpose: The purpose of this study is to gather empirical data on competencies that have been identified through a literature review as important for quality in the work of Parole Board Members. It is hoped that this work will validate the model and the measures used to assess the competencies by examining the psychometric properties of the measures, as well as revealing relationships between these competencies and quality in parole decision-making.

Task requirements: You will be asked to complete a series of questions about your work habits, attitudes and opinions towards parole-relevant items, and decision-making style. You will also be asked a series of knowledge-based questions on risk assessment, and to complete three decisions based on case scenarios.

Time required: This study will take approximately 30-45 minutes to complete.

Remuneration: Your participation in this study is completely voluntary. Individualized summary reports will be available to all participants. This will outline your performance on the measures in comparison to the aggregated results. It is important to remember that these measures have not yet been validated. As such, it is unknown at the beginning of the project if these measures provide an accurate representation of an individual's competency in a given area. Regardless, your participation in this study provides an

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opportunity for self-assessment, assisted by considering the questions within the measures, and as such is a good opportunity to identify areas of particular strength, as well as areas for improvement and/or training opportunities. Additionally, those who participate will be entered into a draw to win one of two \$25 Starbucks gift cards.

Right to withdraw: You have the right to withdraw from this study at any point, without penalty. If you choose to withdraw before the end of the survey, you simply need to choose the ‘withdraw’ option located on each page, which leads to the debriefing form. Participants who withdraw will still be eligible for the draw.

Possible risks: You are being asked to participate in a survey and provide responses to questions to assess competencies in domains relevant to your work. It is not anticipated that participation in this study will expose you to any greater risk than what is encountered in your everyday life.

Funding: Please note that this study has received funding from the National Institute of Corrections.

Anonymity/Confidentiality: As you will be provided with a unique Response ID at the conclusion of this study, results will be anonymized, as the results will only be linked to this code. IP addresses will not be collected during this study.

Please note that one of the research personnel (Laura Gamwell) is an employee of the Parole Board of Canada, but is researching the current project in the capacity of graduate student with Carleton University.

We will collect data through the software Qualtrics, which uses servers with multiple layers of security to protect the privacy of the data (e.g., encrypted websites and password protected storage). Please note that Qualtrics is hosted by a server located in the USA. The United States Patriot Act permits U.S. law enforcement officials, for the purpose of an anti-terrorism investigation, to seek a court order that allows access to the personal records of any person without that person’s knowledge. In view of this we cannot absolutely guarantee the full confidentiality of your data. With your consent to participate in this study you acknowledge this.

Future use of data: Please note that the anonymized participant data will be kept for five years prior to deletion, and may be shared with trusted colleagues and in response to requests from competent professionals. It is possible that the data will be used in future publications.

This study has received clearance by the Carleton University Research Ethics Board -B (Research Ethics Approval # 15-197). Please note that the ethics clearance expires August 1, 2016, and that the researcher cannot contact participants in relation to this study past this date without renewed ethics clearance.

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If you have any concerns, ethical or otherwise, regarding this study, please contact:

Carleton University Research Office
511 Tory Building, Carleton University
ethics@carleton.ca

Carleton University Research Ethics Board-B Chair: Dr. Shelley Brown
(613) 520-2600 ext. 1505
shelley.brown@carleton.ca

Consent. I have read the above form and hereby consent to continue participating in this study. The data in this study will be used for research publications and/or teaching purposes. I am aware that the data collected in this study will be kept strictly confidential. By clicking yes I consent to participate in this study.

Yes

No

If you wish to be entered into the draw for one of two \$25 Starbucks gift cards, please email laura.gamwell@carleton.ca, with the subject line: Draw Entry. Please note that sending this email will permit the researchers only to know that you have participated in the study, and will not be linked with your survey responses. You may wish to provide a personal email address.

Debriefing Form

What are we trying to learn in this research?

This research is examining competency profiles among parole decision-makers. The intention is to validate the competency model that has been developed through a literature review and with input from an advisory committee, as well as to validate the measures used to assess the competencies. The questionnaires you completed were designed to assess your scores on the competencies of: ethics, adherence to system requirements, evidence-based decision-making, evidence-based risk assessment, effective communication and self-improvement. We are additionally interested in observing if higher scores on competencies are related with higher quality in decision-making, as suggested by your scores on that measure. The current study will allow for an assessment of the psychometric properties of the measures, as well as exploring answers to the links between competency scores and quality decision-making.

Part two of the study contained measures exploring cognitive style in decision-making, and views towards rehabilitation and punishment. Information from these questionnaires will assist in providing a better understanding of the opinions and decision-making styles of Board members.

Why is this important to psychologists or the general public?

By assessing the psychometric properties of the model and measures, we can begin to compile information on how competency identification for Board members is related to quality decision-making, thereby increasing the safety of the public.

Why is this important to Paroling Authorities?

An accurate competency model with valid and reliable measures can be used to enhance qualification processes and assist in identifying targeted training opportunities for parole Board members.

What are our hypotheses and predictions?

We hypothesize that the measures will have acceptable psychometric properties, and that a higher cumulative competency score will be related to an increase in quality decisions, resulting in better offender outcomes (e.g., more successful completions of parole and fewer parole failures).

How can I learn more?

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If you are interested in learning more about competency models or evidence-based practice in parole please refer to the following sources:

- Marrelli, A. F., Tondora, J., & Hoge, M. A. (2005). Strategies for developing competency models. *Administration and Policy in Mental Health and Mental Health Services Research*, 32, 533-561.
- Stroker, R. (2010). *Core Competencies: A Resource for Parole Board Chairs, Members, and Executive Staff*. P. Burke, & L. Gilligan (Eds.). US Department of Justice, National Institute of Corrections.
- Burke, P. B. (2011). *The Future of Parole as a Key Partner in Assuring Public Safety*. US Department of Justice, National Institute of Corrections.
- Campbell, N. M. (2008). *Comprehensive framework for paroling authorities in an era of evidence-based practice*. Washington, DC: National Institute of Corrections.

What if I have questions later?

If you wish to discuss this research further feel free to contact Laura Gamwell by email: laura.gamwell@carleton.ca and/or Ralph Serin by email: ralph.serin@carleton.ca.

If you have any ethical concerns about this study please contact Dr. Shelley Brown (Chair, Carleton University Research Ethics Board-B) by phone: (613) 520-2600 ext. 1505 or by email: shelley_brown@carleton.ca.

Should you have any other concerns please contact the Carleton University Research Office, 511 Tory Building, Carleton University, or by email: ethics@carleton.ca

This study has received clearance by the Carleton University Research Ethics Board-B (#:15-197). Please refer to this number when contacting the Chair of Carleton University Research Ethics Board-B or the Carleton University Research Office.

Thank you for taking the time to participate in this study!

Your participation is greatly appreciated!

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Appendix C: Demographics and Background Information

Part A: Demographics

1. Please indicate your gender.
 - a. Male
 - b. Female
2. Please indicate your age.
 - a. _____
3. Please indicate the number of years for which you have served as a Board member.
 - a. _____
4. Please indicate your number of years of experience working in criminal justice.
 - a. _____
5. Please indicate your region of work.
 - a. United States (please specify state)
 - b. Canada
 - c. Other (please specify)
6. Please indicate the highest level of education that you have obtained.
 - a. High School/GED
 - b. Technical/vocational training
 - c. Bachelor's degree
 - d. Master's Degree
 - e. Doctorate
 - f. Other

PAROLE BOARD MEMBER COMPETENCY MODEL

7. Please indicate your primary field of study, if applicable.
 - a. _____
8. Please choose from the options below, the one that is most reflective of your professional background.
 - a. Law, criminal justice, correctional service
 - b. Police
 - c. Human service delivery (teacher, social worker, non-governmental organization)
 - d. Other
9. Please indicate your position status.
 - a. Full-time
 - b. Part-time
10. How many decisions do you typically render in a week?
 - a. _____
11. How many decisions do you typically render in a month?
 - a. _____

Part B: Selection Process and Training

1. Were you required to meet selection criteria prior to being appointed as a Board member?

 No
 Somewhat
 Yes, written criteria
 N/A
 - a. If so, please check all that apply.

PAROLE BOARD MEMBER COMPETENCY MODEL

A degree in the human sciences (law, criminology, psychology, etc.)

Knowledge of the criminal justice system and the associated issues

Comprehensive decision-making skills

Extensive communication skills

Strong ethical fortitude

Political affiliation

Other (please specify _____)

N/A

2. Did you receive training upon appointment? _____

a. If so, how many hours did you receive in the first three months on the job?

3. If you received training upon appointment, in what areas were you provided training/mentoring related to your role as a Parole Board member? (check all that apply)

Decision-making (parole specific)

Legal/Policy/Statutes

Leadership

Human Resources

Risk Assessment

Communication with stakeholders

Other (please specify _____)

N/A

PAROLE BOARD MEMBER COMPETENCY MODEL

4. If you received training upon appointment, please indicate the type of training received as a Board member. Please check all that apply.

Reading training materials

Mentoring provided by a senior parole board member

One week of NIC training plus mentoring provided by a senior parole board member

Pre-service training with the Department of Corrections

Other (please specify _____)

N/A

5. During your tenure as a Board Member, please indicate the topics on which you have received training (check all that apply and the duration of training)

Risk assessment

0 days 1 day 1-2 days greater than 2 days

Decision-making

0 days 1 day 1-2 days greater than 2 days

Victims of crime

0 days 1 day 1-2 days greater than 2 days

Offender needs

0 days 1 day 1-2 days greater than 2 days

Offender Programming

0 days 1 day 1-2 days greater than 2 days

Community Supervision

0 days 1 day 1-2 days greater than 2 days

PAROLE BOARD MEMBER COMPETENCY MODEL

___ Sex Offenders

___ 0 days ___ 1 day ___ 1-2 days ___ greater than 2 days

___ Domestic Violence

___ 0 days ___ 1 day ___ 1-2 days ___ greater than 2 days

___ Other Specialized needs issues

___ 0 days ___ 1 day ___ 1-2 days ___ greater than 2 days

___ Other (please specify: _____)

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix D: Ethical Competence Measure

Subscale A: Ethical Values in Parole Decision-Making

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
It is important for offenders to understand the rationale for a parole decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making transparent and fair decisions are necessary to making a quality parole decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adhering to professional standards is vital to the role of a parole Board member.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important for victims to understand the reason for a parole decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respecting an offender's right to liberty is inconsequential in a parole decision. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to reflect cultural sensitivity in parole decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On occasion, it is acceptable for Board members to render parole decisions where they have a personal link to the offender's case. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On occasion, it is acceptable to discuss the specific details of an ongoing case with other Board members, if they are looking for expertise. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On occasion, it is acceptable to discuss details of a specific case with family or friends if they have relevant expertise. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public safety is the sole consideration in parole decisions. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to show respect for all offenders throughout the parole process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to consider unique circumstances for female offenders in parole decision-making.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Subscale B: Knowledge and Application of Ethical Codes

PAROLE BOARD MEMBER COMPETENCY MODEL

1. I am aware of the ethical codes that regulate parole decision-making in my jurisdiction.
 - a. I have limited awareness of the ethical codes.
 - b. I am somewhat aware of the ethical codes.
 - c. I am very familiar with the ethical codes.

2. If you are aware, please indicate the Act/Code/Mandate that provides the ethical prescriptions:

3. I abide by the ethical codes in my parole decision-making
 - a. To a limited extent
 - b. Somewhat
 - c. Completely

4. Scenario: A Board member who is a former prosecutor is assigned to an offender's file that they had previously worked to put in prison.

There is an ethical concern with the Board member rendering a decision in the above scenario:

True/False

5. Scenario: A Board member is assigned to an offender's file, wherein the offender is incarcerated for break and enter and assault, and wherein the Board member's neighbor was a victim.

There is an ethical concern with the Board member rendering a decision, in the above scenario:

True/False

6. Scenario: A colleague confides that they have been offered money to deny an offender parole. Although your colleague has refused the money, they are unsure of how to deal with the case.

You advise your colleague:

- a. To render the decision.
- b. To recuse themselves from the case.
- c. **To recuse themselves from the case and advise the Board Chair.**

Subscale C: Commitment to Evidence-Based Practice

Please indicate the extent to which you agree or disagree with the following statements:

PAROLE BOARD MEMBER COMPETENCY MODEL

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
It is important to make decisions based on the best available research evidence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Never	Rarely	Sometimes	Often	Always
I rely on my intuition to make parole decisions. ^a	<input type="checkbox"/>				
I strive to make sure that I assess an offender's risk based on what research evidence tells me are the most reliable risk factors.	<input type="checkbox"/>				

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix E: Adherence to System Factors Measure

Subscale A: Attitude in Support of Respect for Offenders and Victims

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Most offenders should be released on periods of conditional release prior to sentence completion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An offender should receive programming in order to enhance parole performance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to show respect for victims throughout the parole process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to balance public safety with a respect for the offender's civil liberties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offenders should have the right to an appeal if they feel a parole decision is unfair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Subscale B: Knowledge of the Purpose of Parole

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Parole contributes to public safety by offering a period of supervision and support to offenders at a critical time in their reentry period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The support and supervision provided to offenders on parole is important for maintaining public safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parole can help offenders to become law-abiding citizens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One benefit of parole is its potential for cost-savings to the criminal justice system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I know the purpose of parole in my jurisdiction.	<input type="checkbox"/>				
I am familiar with the mission statement of my organization.	<input type="checkbox"/>				
I know the guiding principles for parole decision-making in my agency.	<input type="checkbox"/>				
I am committed to upholding the integrity of my organization.	<input type="checkbox"/>				

Subscale C: Knowledge and Application of Legislation and Policy

1. I am aware of the legislation that provides the authority and criteria for parole decisions in my jurisdiction:
 - a. I have limited knowledge of the legislation.
 - b. I am somewhat aware of the legislation.
 - c. I am very familiar with the legislation.
 - d. Not applicable

2. If yes, please indicate the name of the Act and relevant sections that provide the authority for parole decisions in my jurisdiction:

3. I am aware of the policy that provides the authority and criteria for parole decisions in my jurisdiction:
 - a. I have limited knowledge of the policies.
 - b. I am somewhat aware of the policies.
 - c. I am very familiar with the policies.
 - d. Not applicable

4. If yes, please indicate the name of the policy/policies that provide(s) the authority for parole decisions:

Subscale D: Responding to Time Constraints

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I have difficulty staying on top of the workload. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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My expected workload is reasonable, and I am able to complete my work in the time allotted without sacrificing quality.	<input type="checkbox"/>				
I sometimes have to sacrifice quality to stay on track with my expected quota. ^a	<input type="checkbox"/>				
Too often, I have to stay late at work to stay on track. ^a	<input type="checkbox"/>				
I manage my time effectively at work.	<input type="checkbox"/>				

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix F: Evidence-Based Risk Assessment Measure

Parole Board Member Competency in Evidence-Based Risk Assessment: Knowledge Scale

Subscale A: Knowledge of Static and Dynamic Factors

1. Dynamic risk factors are more accurate predictors of recidivism than static risk factors.
True/False
2. Dynamic factors identify case needs.
True/False
3. Which of the following dynamic risk factors has the strongest empirical association with criminal conduct:
 - a. level of personal distress/psychopathology
 - b. antisocial associates**
 - c. parental/family/intimate factors
 - d. unstable/lack of employment
4. If there is a change in an offender's situation (i.e. a change in beliefs, attitudes, peers, sobriety), their case should be re-analyzed in terms of risk.
True/False
5. Which of the following is not associated with desistance from crime and/or a decrease in recidivism:
 - a. Increasing age of the offender
 - b. An increase in rewards for prosocial behaviour
 - c. A history of criminal behaviour beginning at a young age**
 - d. Cognitive-behavioural and skills-based interventions

Subscale B: Knowledge of Risk Assessment Tools

6. Clinical judgment is generally less accurate than actuarial or statistical assessment.
True/False
7. Which risk assessment tool is most appropriate for use with sex offenders:
 - a. Violence Risk Assessment Guide (VRAG)
 - b. Salient Factor Score
 - c. Static-99**
 - d. Ohio Risk Assessment System (ORAS)
 - e. Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)

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8. Which risk assessment tool is most appropriate for use with perpetrators of domestic violence:
 - a. Violence Risk Assessment Guide (VRAG)
 - b. Salient Factor Score
 - c. Static-99
 - d. Ohio Risk Assessment System (ORAS)
 - e. **Ontario Domestic Assault Risk Assessment (ODARA)**

9. Which of the following does not provide any information about how to manage or reduce a sex offender's risk?
 - a. Violence Risk Assessment Guide (VRAG)
 - b. Stable-2007
 - c. Sexual Violence Risk—20 (SVR-20)
 - d. **Static-99**
 - e. Acute-2007

10. Anchoring a decision with a standardized risk estimate generally yields greater accuracy.
True/False

11. Clinical overrides, when used by experienced parole Board members, tend to exceed the accuracy of standardized risk scales.
True/False

Subscale C: Knowledge of Risk-Need-Responsivity Principle

12. According to research findings, which of the following is most important for parole Board members to address during hearings with an offender:
 - a. (Lack) of employment
 - b. Family and/or marital issues
 - c. **Antisocial cognitions**
 - d. Major mental disorder

13. It is best to focus on offenders' criminogenic needs and to not spend time reviewing other issues in parole hearings.
True/False

14. As a general rule, offenders are adult learners and respond best to program models that are cognitive-behavioural and skills based.
True/False

15. As a general rule, low and moderate risk offenders should receive more treatment programming than high-risk offenders, as they have a greater chance of success in the community.
True/False

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16. When dealing with a violent offender, interventions that focus on instilling morals and increasing empathy are generally more effective.

True/**False**

17. Which of the following is true with respect to the treatment of high-risk violent offenders:

- a. treatment programs should be low-intensity
- b. treatment programs should be high-intensity
- c. treatment programs should be high-intensity with aftercare**
- d. treatment providers should aim to increase victim empathy

18. All sex offenders have problems with deviant sexual interests

True/**False**

Subscale D: General Risk Knowledge

19. Certain risk factors are unique in terms of prediction for offender sub-populations such as sex offenders or perpetrators of intimate violence.

True/False

20. As a general rule, an offender risk is not manageable on release until they fully accept responsibility for their offence.

True/**False**

21. Which is the best indicator of violent recidivism?

- a. Separation from either biological parent by age 16
- b. Alcohol problems
- c. Failure on prior conditional release
- d. Psychopathy checklist score/antisocial personality diagnosis**

22. Relative to other offenders, the risk level for offenders with schizophrenia increases significantly when which of the following co-occur:

- a. Substance abuse problems
- b. A history of 'bizarre' delusions ("aliens are controlling my thoughts")
- c. The presence of acute symptoms
- d. A & C**
- e. All of the above

23. Which of the following does not contribute to effective relapse prevention and community reintegration for sex offenders:

- a. identifying dynamic and situational risk factors (i.e. high-risk situations) and having the offender participate in the creation of a self-management plan
- b. public registries and community notification**
- c. skills development (i.e. victim empathy, (pro)social skills)

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- d. working to increase motivation of offenders to participate and engage in treatment
24. Which of the following need areas is not typically more serious/salient for Aboriginal offenders than non-Aboriginal offenders?
- a. Substance use
 - b. Employment
 - c. Emotional (i.e. anger management)
 - d. Attitudes**
25. Generally speaking, it is accepted that all violent offenders have anger problems.
True/False
26. When dealing with mentally ill offenders in general, which of the following strategies has not been linked to positive outcomes:
- a. Obtaining court orders to ensure that patients comply with their treatment programs
 - b. having the patient develop insight**
 - c. re-hospitalizing the patient if needed to deal with the emergence of acute symptoms
 - d. multi-faceted, intense, and highly-structured programming
27. With respect to sex offenders and recidivism, which of the following is the most true:
- a. knowledge of their offense chain can lead to substantial reductions in recidivism
 - b. knowledge of their offense chain is insufficient to reduce reoffending
 - c. offenders must have knowledge of their offense chain in addition to both a plan, and the skill-set required for avoiding and/or dealing with triggers
 - d. B & C**
 - e. none of the above
28. Offenders who have been given some form of parole have better outcomes than offenders on end of sentence release.
True/False
29. Often, motivational interviewing strategies by Board members can be used to encourage offender change.
True/False
30. Which of the following information is irrelevant to assessing an offender's risk:
- a. the offender's risk rating and the underlying rationale
 - b. sexual orientation**
 - c. a description of the offender's index crime and criminal history
 - d. information about the offender's apparent level of motivation and readiness to change

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e. a description of any protective or aggravating factors

31. Which of the following is not a characteristic of effective Board members:

- a. Good communication skills
- b. Being directive
- c. **Being authoritarian**
- d. Being respectful and fair

Subscale E: Knowledge of Community Resources

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I am familiar with the community organizations that provide services to offenders on release in my jurisdiction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community organizations have little to offer in terms of managing an offender's risk. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am unsure how community organizations work with offenders. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Never	Rarely	Sometimes	Often	Always
I assess if a community resource that is included as part of an offender's release plan is suitable to meet their needs.	<input type="checkbox"/>				

Subscale F: Knowledge of Special Conditions

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Any offender who violates a condition of release poses too great a risk to stay in the community. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is no excuse for offenders not to meet all special conditions placed on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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their conditional release. ^a					
More special conditions are typically better to ensure offender success on release. ^a	<input type="checkbox"/>				
Special conditions should only be used when they are directly related to an offender's risk and needs.	<input type="checkbox"/>				
Special conditions should primarily be related to an offender's risk, but are also effective to discourage other undesirable behaviours that may lead to criminal activity. ^a	<input type="checkbox"/>				

Parole Board Member Evidence-Based Risk Assessment: Skills and Abilities Scales

Subscale G: Interviewing Skills Scale

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Details of the offence should be reviewed extensively during the hearing process. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regardless of whether or not an offender has a substance abuse issue related to his/her crime cycle, it is important to ask during a hearing what their plan is to abstain from drugs and alcohol while on conditional release. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate the extent to which you do the following in your work as a Board member:

	Never	Rarely	Sometimes	Often	Always
I ask for clarification on what the offender has said during a hearing, if need be.	<input type="checkbox"/>				
During a hearing, I ask specific questions about the release plan, including details on employment plan, housing situation, and family situation.	<input type="checkbox"/>				

Subscale H: Interpersonal Skills Scale

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

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It is important to allow both the offender and victims to speak during the hearing.	<input type="checkbox"/>				
It is important to ensure that the offender feels heard and respected during the hearing process.	<input type="checkbox"/>				
It is important to ensure that the victim feels heard and respected during the hearing process.	<input type="checkbox"/>				
It is important to use plain language when communicating with the offender.	<input type="checkbox"/>				

Subscale I: Teamwork Skills Scale

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Ensuring my co-panelist feels respected and heard is important in the parole decision-making process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Never	Rarely	Sometimes	Often	Always
Where quorum indicates two Board members are required, I consider my co-worker's opinion as a part of my decision-making process.	<input type="checkbox"/>				
Where my co-panelist and I have differing opinions, I default to their opinion if I am unsure. ^a	<input type="checkbox"/>				
Where my co-panelist and I have differing opinions and I am confident in my decision, I engage in a spirited debate to convince them to change their mind. ^a	<input type="checkbox"/>				
I am comfortable expressing an opinion that is different than that of my co-panelist in the event of a disagreement on a parole decision.	<input type="checkbox"/>				

Subscale J: Leadership Skills Scale

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
In general, I encourage others to make decisions based on the best available research evidence on offender risk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I am passionate about making quality decisions and encourage my colleagues to do their best work in parole decision-making.	<input type="checkbox"/>				
I engage colleagues in discussions about making quality parole decisions.	<input type="checkbox"/>				
Parole decisions are independent, so I avoid discussing decision-making practices with colleagues. ^a	<input type="checkbox"/>				

Subscale K: Ability to identify and assess quality of file information

Please indicate the extent to which you do the following in your work as a Board member:

	Never	Rarely	Sometimes	Often	Always
If there is insufficient file information to make a decision, I take steps to rectify the situation.	<input type="checkbox"/>				
In the event of discrepancy in file information, I use my judgement to determine which piece of information is more credible.	<input type="checkbox"/>				
I base my decisions on an overall understanding of the offender's risk factors.	<input type="checkbox"/>				
I test that key pieces of information are reliable and credible to the best of my abilities.	<input type="checkbox"/>				
If a piece of information does not fit with my understanding of the offender's risk, I ignore it in my final decision. ^a	<input type="checkbox"/>				

^a Items are reverse scored.

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Appendix G: Evidence-Based Decision-Making Vignettes and Questionnaire

CASE 1

Danielle Jones is a 33 year-old offender who was released on conditional release 6 months into her 12 month sentence for her involvement in a string of over 30 burglaries, thefts and break & enters. She has been on release for three months. She violated a condition to maintain employment when she quit her job as a waitress, claiming that she was being verbally harassed by a co-worker. Her parole officer found out two days later during a regularly scheduled meeting, when she told him that she was looking for work.

This was her third prison term in six years. She has previously served two other sentences for similar property crimes. Police reports indicate that in each instance Ms. Jones was under the influence of drugs at the time of her arrest. Ms. Jones has had a series of abusive relationships, where she claims her boyfriends have demanded she provide money and drugs. She turned to B&Es in an attempt to avoid sex-trade work.

She acknowledges previous struggles with drug addiction, but claims that she had been clean since her arrest. She has taken the substance abuse program while in jail and is continuing with AA in the community. She has no family support and lives alone, but has been actively volunteering with a church organization since her release. Ms. Jones disclosed during the hearing that she has met a few friends in the church and that she is now seeing someone who is a positive role model in the community.

Ms. Jones had previously successfully completed a period of probation following her second charge, and stayed clear of the system for one year. Ms. Jones claims that she was living crime-free until she hooked up with an ex-boyfriend and fell back into drug use, leading to her current conviction.

The parole officer is recommending revocation out of concern that Ms. Jones' inability to maintain employment is a risk factor.

- A) Decision: What would you decide in the above parole revocation decision?
- a. Revoke
 - b. Return to community supervision
 - c. Return to community supervision with change to conditions (please indicate change)_____.

B) Risk

1. In the decision, how do you rate the offender's risk to reoffend?
 - a. Low
 - b. Low-moderate
 - c. Moderate
 - d. Moderate-high

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e. High

2. Please indicate if each of the following factors applies in the above scenario. Please indicate if you consider applicable factors as aggravating (increasing the offender’s risk), neutral (having no impact on the offender’s risk), or mitigating (decreasing the offender’s risk) based on the information provided for this case.

	Not applicable	Aggravating	Neutral	Mitigating
Absence/presence of risk scale score(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Institutional behaviour*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminal history*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime severity*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incarceration length*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental illness*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Victim input*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance abuse ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial attitudes ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial peers ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial personality ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family relationships ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-control ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment/school history ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Release plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Progress towards addressing criminogenic needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- * denotes from Caplan ‘What factors affect parole’.
- ^{RNR} denotes from Risk Need Responsivity principles

PAROLE BOARD MEMBER COMPETENCY MODEL

C) In the event that you reviewed this case prior to a mandated period of release, which of the following special conditions would you place upon the offender?

Special Conditions	
Comply with the law	
Notify parole supervisor upon change in residence	
Do not possess firearm/dangerous weapon	
Maintain employment/education program	
Report to parole supervisor regularly	
Permit home/work visits and searches	
Out of state travel prohibited	
Use controlled substances prohibited	
Notify parole supervisor upon change in employment	
Pay fees/restitution to victims	
Report arrest/questioning by law enforcement to parole supervisor	
Submit to medical/drug test	
Avoid undesirable associates/locations	
Alcohol use prohibited	
Drug use prohibited	

PAROLE BOARD MEMBER COMPETENCY MODEL

CASE 2

Mike Smith is a 28 year-old offender serving a four-year sentence for aggravated assault. Mr. Smith was found guilty of assault after he attacked a man in a parking lot who had dented the door of his new truck. According to police reports, Mr. Smith was walking back to his car when he witnessed the other driver preparing to flee the scene. Mr. Smith ran over, pulled a baseball bat from the cab of his truck, hauled the man out of the car, and beat him until confronted by a group of bystanders. The victim was left in a coma for three days following the attack and required surgery and intensive physiotherapy to regain full mobility. According to a written statement, the victim claims that he has developed an anxiety condition as a result of the attack.

This is Mr. Smith's first prison term, but second offence. His first was three years prior to the most recent incident, when he assaulted an acquaintance that he accused of spreading rumors about him. He served 12 months of probation for that offence, which he completed successfully.

Mr. Smith was involved in one minor altercation with another inmate early in his sentence. He accused another inmate of stealing one of his personal belongings, and demanded that it be returned. He shoved the other inmate but a guard intervened before the incident escalated. Mr. Smith has served three years of his sentence, and since the above incident has kept a low profile.

During the hearing, Mr. Smith noted that he has been able to use the skills he learned in his anger management program to manage his emotions in difficult situations, and how to communicate productively in disagreements. He gave an example of how he has implemented these techniques in dealing with frustrating interactions with other inmates to successfully resolve issues. Reports on file suggest that he has made significant changes since completing his program, citing two incidents where Mr. Smith was able to use techniques to avoid altercations when provoked. It further notes that Mr. Smith has arranged for continued programming within the community.

In terms of release plans, Mr. Smith noted that he will stay with his sister and her husband while he secures employment in his trade as a welder. The pre-parole report indicates that his family is a good source of support and notes that Mr. Smith has made progress in managing his anger. It notes that he has had success using the techniques, and recommends releasing Mr. Smith, with a condition to take continued community programming to maximize his chance of success.

A) Decision: Would you grant or deny a period of conditional release to the offender?

Grant / Deny

B) Risk Questions

PAROLE BOARD MEMBER COMPETENCY MODEL

1. In the decision, how do you rate the offender’s risk to reoffend?
 - a. Low
 - b. Low-moderate
 - c. Moderate
 - d. Moderate-high
 - e. High

2. Please indicate if each of the following factors applies in the above scenario.
 Please indicate if you consider applicable factors as aggravating (increasing the offender’s risk), neutral (having no impact on the offender’s risk), or mitigating (decreasing the offender’s risk) based on the information provided for this case.

	Not applicable	Aggravating	Neutral	Mitigating
Absence/presence of risk scale score(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Institutional behaviour*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminal history*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime severity*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incarceration length*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental illness*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Victim input*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance abuse ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial attitudes ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial peers ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial personality ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family relationships ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-control ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment/school history ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Release plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Progress towards addressing criminogenic needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PAROLE BOARD MEMBER COMPETENCY MODEL

Program completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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- * denotes from Caplan ‘What factors affect parole’.
- ^{RNR} denotes from Risk Need Responsivity principles

C) In the event of a grant decision, or upon a period of mandatory release (e.g. if you reviewed this case prior to a mandated period of release), which of the following special conditions would you place upon the offender?

Special Conditions	
Comply with the law	
Notify parole supervisor upon change in residence	
Do not possess firearm/dangerous weapon	
Maintain employment/education program	
Report to parole supervisor regularly	
Permit home/work visits and searches	
Out of state travel prohibited	
Use controlled substances prohibited	
Notify parole supervisor upon change in employment	
Pay fees/restitution to victims	
Report arrest/questioning by law enforcement to parole supervisor	
Submit to medical/drug test	
Avoid undesirable associates/locations	
Alcohol use prohibited	
Drug use prohibited	

PAROLE BOARD MEMBER COMPETENCY MODEL

CASE 3

Carl Milton is a 25-year-old offender, currently serving a 16 month sentence for robbery. He is ten months into the sentence. He and his roommate robbed three convenience stores in one afternoon, stealing over \$3000 cash. During the last incident that afternoon, Mr. Milton handed a note to the young female cashier working during off-peak hours, claiming to be armed and demanding all the money in the till. The cashier claims that he was verbally aggressive during their encounter. Mr. Milton then ran back to the car where his roommate was waiting, and police chased them for over 10 miles down country roads before a police barricade eventually stopped them. The police report indicates that both Mr. Milton and his roommate were under the influence of cocaine at the time of the arrest.

Mr. Milton and his friends are known to local police, and he has been arrested numerous times for disturbing the peace. He has five previous jail terms ranging in length from 3-10 months for theft, robbery, breaking and entering and failure to appear. He has never successfully completed a period of probation. Mr. Milton became involved in crime in his late teens as a means of funding his cocaine addiction.

Mr. Milton claims that he had been clean for 6 weeks prior to the current offence. He notes however that in the weeks leading up to the incident, his girlfriend left him and he was laid off from his factory job, prompting his return to drug use.

Mr. Milton has not had any incidents since arriving in the institution. He has participated in substance abuse programming, and has demonstrated a commitment to staying sober. He has his high school education.

During the hearing, the victim submitted a written statement indicated that she remains fearful that he will return to the community and re-victimize her for cooperating with police.

Mr. Milton has indicated in his release plan that he will stay with his mother upon release, in a town thirty miles from where he had been residing at the time of the offence. He has arranged part-time employment as his uncle has offered him a job in his construction company upon release. Mr. Milton has also indicated that he is remorseful for his past, and that he is willing to do whatever it takes to turn his life around.

- A) Decision: Would you grant or deny a period of conditional release to the offender?

Grant / Deny

- B) Risk Questions

1. In the decision, how do you rate the offender's risk to reoffend?
 - a. Low

PAROLE BOARD MEMBER COMPETENCY MODEL

- b. Low-moderate
- c. Moderate
- d. Moderate-high
- e. High

2. Please indicate if each of the following factors applies in the above scenario. Please indicate if you consider applicable factors as aggravating (increasing the offender’s risk), neutral (having no impact on the offender’s risk), or mitigating (decreasing the offender’s risk) based on the information provided for this case.

	Not applicable	Aggravating	Neutral	Mitigating
Absence/presence of risk scale score(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Institutional behaviour*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminal history*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime severity*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incarceration length*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental illness*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Victim input*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance abuse ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial attitudes ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial peers ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antisocial personality ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family relationships ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-control ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment/school history ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities ^{RNR}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Release plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Progress towards addressing criminogenic needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PAROLE BOARD MEMBER COMPETENCY MODEL

- * denotes from Caplan ‘What factors affect parole’.
- ^{RNR} denotes from Risk Need Responsivity principles

C) In the event of a grant decision, or upon a period of mandatory release (e.g. if you reviewed this case prior to a mandated period of release), which of the following special conditions would you place upon the offender?

Special Conditions	
Comply with the law	
Notify parole supervisor upon change in residence	
Do not possess firearm/dangerous weapon	
Maintain employment/education program	
Report to parole supervisor regularly	
Permit home/work visits and searches	
Out of state travel prohibited	
Use controlled substances prohibited	
Notify parole supervisor upon change in employment	
Pay fees/restitution to victims	
Report arrest/questioning by law enforcement to parole supervisor	
Submit to medical/drug test	
Avoid undesirable associates/locations	
Alcohol use prohibited	
Drug use prohibited	

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix H: Effective Communication Measure

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
It is important that the offender understand the reason for the decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Never	Rarely	Sometimes	Often	Always
I make sure that the decision is plainly written so that the offender understands the rationale.	<input type="checkbox"/>				
I reference the appropriate legislation to support my written decision.	<input type="checkbox"/>				
In my written decision, I demonstrate how my decision meets the legal and policy requirements.	<input type="checkbox"/>				
I reference examples and include analysis to support my decision.	<input type="checkbox"/>				

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix I: Self-Improvement Measure

Please indicate the extent to which the following statements are true in your opinion or experience, as applicable.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I regularly take the time to reflect on my decision-making and see if there are any areas where I can improve.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find the negative coverage of parole in the media upsetting. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find that negative coverage of parole in the media makes me stricter in my release decisions. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is little I can do to improve my parole decision-making. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am able to incorporate lessons learned into my future parole decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Media coverage of offenders who fail on parole demonstrates that too many offenders are released. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I take opportunities to share the benefits and value of parole with others, as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offender appeals are a good source of information to see where I can be clearer in future decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am committed to improving the quality of my decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

^a Items are reverse scored.

Appendix J: Need for Cognition Scale

Need for Cognition Scale (Cacioppo & Petty, 1984)

Cacioppo, J.T., Petty, R.E., & Kao, C.F. (1984). The efficient assessment of need for cognition. *Journal of Personality Assessment*, 48, 306-307.

1. I would prefer complex to simple problems.
2. I like the responsibility of handling a situation that requires a lot of thinking.
3. Thinking is not my idea of fun. ^a
4. I would rather do something that requires little thought than something that is sure to challenge my thinking abilities. ^a
5. I try to anticipate and avoid situations where there is a likely chance that I will have to think in depth about something. ^a
6. I find satisfaction in deliberating hard and for long hours.
7. I only think as hard as I have to. ^a
8. I prefer to think about small, daily projects than long-term ones. ^a
9. I like tasks that require little thought once I've learned them. ^a
10. The idea of relying on thought to make my way to the top appeals to me.
11. I really enjoy a task that involves coming up with new solutions to problems.
12. Learning new ways to think doesn't excite me very much. ^a
13. I prefer my life to be filled with puzzles that I must solve.
14. The notion of thinking abstractly is appealing to me.
15. I would prefer a task that is intellectual, difficult, and important to one that is somewhat important but does not require much thought.
16. I feel relief rather than satisfaction after completing a task that required a lot of mental effort. ^a
17. It's enough for me that something gets the job done; I don't care how or why it works. ^a
18. I usually end up deliberating about issues even when they do not affect me personally.

^a Items are reverse scored.

Appendix K: Personal Need for Structure Scale

Personal Need for Structure Scale (Thompson et al., 2001)

Thompson, M.M., Naccarato, M.E., Parker, K.C.H., & Moskowitz, G.B. (2001). The Personal Need for Structure and Personal Fear of Invalidity measures: Historical perspectives, current applications, and future directions. In G.B. Moskowitz (Ed.), *Cognitive social psychology: The Princeton symposium on the legacy and future of social cognition* (pp. 19-39). Mahwah, NJ: Lawrence Erlbaum Associates.

1. It upsets me to go into a situation without knowing what I can expect from it.
2. I'm not bothered by things that interrupt my daily routine. ^a
3. I enjoy having a clear and structured mode of life.
4. I like to have a place for everything and everything in its place.
5. I find that a well-ordered life with regular hours makes my life tedious. ^a
6. I don't like situations that are uncertain.
7. I hate to change my plans at the last minute.
8. I hate to be with people who are unpredictable.
9. I find that a consistent routine enables me to enjoy life more.
10. I enjoy the exhilaration of being in unpredictable situations. ^a
11. I become uncomfortable when the rules in a situation are not clear.

^a Items are reverse scored.

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix L: Personal Fear of Invalidation Scale

Personal Fear of Invalidation Scale (Thompson et al., 2001)

Thompson, M.M., Naccarato, M.E., Parker, K.C.H., & Moskowitz, G.B. (2001). The Personal Need for Structure and Personal Fear of Invalidation measures: Historical perspectives, current applications, and future directions. In G.B. Moskowitz (Ed.), *Cognitive social psychology: The Princeton symposium on the legacy and future of social cognition* (pp. 19-39). Mahwah, NJ: Lawrence Erlbaum Associates.

1. I may struggle with a few decisions but not very often. ^a
2. I never put off making an important decision. ^a
3. Sometimes I become impatient over my indecisiveness.
4. Sometimes I see so many options to a situation that it is really confusing.
5. I can be reluctant to commit myself to something because of the probability that I might be wrong.
6. I tend to struggle with most decisions.
7. Even after making an important decision I want to continue to think about the pros and cons to make sure that I am not wrong.
8. Regardless of whether others see an event as positive or negative I don't mind committing myself to it. ^a
9. I prefer situations where I do not have to decide immediately.
10. I rarely doubt that the course of action I have selected will be correct. ^a
11. I tend to continue to evaluate recently made decisions.
12. I wish I did not worry so much about making errors.
13. Decisions rarely weigh heavily on my shoulders. ^a
14. I find myself reluctant to commit to new ideas but find little comfort in remaining with the tried and true.

^a Items are reverse scored.

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix M: Views Towards Punishment and Rehabilitation Scale

Taxman, F. S., Young, D. W., Wiersema, B., Rhodes, A., & Mitchell, S. (2007). The national criminal justice treatment practices survey: Multilevel survey methods and procedures. *Journal of Substance Abuse Treatment, 32*(3), 225-238. doi:10.1016/j.jsat.2007.01.002

Please indicate the extent to which you agree or disagree with the following statements.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
We should show people who use drugs they will be punished severely if they don't stop. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should make sure criminals get effective treatment for addictions and other problems while they're in prison/jail, or on supervision in the community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should keep criminals in prison/jail and off the streets. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should use the "eye for an eye, tooth for a tooth" principle. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should deter future offenders by severely punishing criminals who are caught and convicted. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should provide criminals with treatment to address addiction, mental health, or other problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should make sure that the treatment provided is matched to the offender's needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should provide more treatment, jobs, and educational programs in a correctional setting to address problems that often contribute to crime.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We should punish addicts to stop them from using drugs. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

^a Items are reverse score

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix N: Item-Total Correlations by Subscale

Item	Ethics A ^a	Ethics B ^a	Ethics C ^a	AdhSys A ^a	AdhSys B ^a	AdhSys D ^a	EBRA A ^b	EBRA B ^b	EBRA C ^b	EBRA D ^b	EBRA E ^a	EBRA F ^a	EBRA G ^a	EBRA H ^a	EBRA I ^a	EBRA J ^a	EBRA K ^a	Eff. Comm.	Self- Imp
1	.518**	.521**	.541**	.325**	.46**	.637**	.541**	.722**	.378*	.154	.677**	.591**	.628**	.552**	.668**	.577**	.642**	.26	.316*
2	.586**	.435**	.674**	.297*	.463**	-.145	n/a	.125	.341	.410*	.548**	.484**	.748**	.54**	.401**	.438**	.328*	.302*	.13
3	.380**	.311*	.728**	.343*	.577**	.582**	.69**	.675**	.255	.414*	.662**	.596**	.342*	.641**	.089	.484**	.471**	.682**	.351*
4	.473**	.322**	-	.544**	.425**	.658**	n/a	.383	.482**	.501**	.687**	.341*	.005	.725**	.369*	.502**	.618**	.61**	.445**
5	.336*	.461**	-	.548**	.576**	-.188	.631**	.471*	.637**	.114	-	.290*	-	-	.372*	-	.151	.535**	.407**
6	.495**	.044	-	-	.444**	-	-	.652**	.653**	.096	-	-	-	-	-	-	-	-	.404**
7	.323*	-	-	-	.569**	-	-	-	.322	.495**	-	-	-	-	-	-	-	-	.336*
8	.204	-	-	-	.568**	-	-	-	-	.096	-	-	-	-	-	-	-	-	.389**
9	.257	-	-	-	-	-	-	-	-	.378	-	-	-	-	-	-	-	-	.422**
10	.537**	-	-	-	-	-	-	-	-	.284	-	-	-	-	-	-	-	-	-
11	.447**	-	-	-	-	-	-	-	-	.134	-	-	-	-	-	-	-	-	-
12	.414**	-	-	-	-	-	-	-	-	.131	-	-	-	-	-	-	-	-	-
13	-	-	-	-	-	-	-	-	-	.278	-	-	-	-	-	-	-	-	-

Nota. ^a Kendall's tau correlation; ^b Pearson's *r* point biserial correlation; - No item; n/a = Item-total not produced (one variable constant).

***p* < .01

**p* < .05

PAROLE BOARD MEMBER COMPETENCY MODEL

Appendix O: Revised Measures

Ethical Competence-R

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
It is important for offenders to understand the rationale for a parole decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making transparent and fair decisions are necessary to making a quality parole decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adhering to professional standards is vital to my role as a parole Board member.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important for victims to understand the rationale for a parole decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respecting an offender’s right to liberty is inconsequential in a parole decision. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to reflect cultural sensitivity in parole decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public safety is the sole consideration in parole decisions. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to show respect for all offenders throughout the parole process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to consider unique circumstances for female offenders in parole decision-making.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to make decisions based on the best available research evidence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I strive to make sure that I assess an offender’s risk based on what research evidence tells me are the most reliable risk factors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An offender should receive programming in order to enhance parole performance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to show respect for victims throughout the parole process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PAROLE BOARD MEMBER COMPETENCY MODEL

It is important to balance public safety with a respect for the offender’s civil liberties.	<input type="checkbox"/>				
Offenders should have the right to an appeal if they feel a parole decision is unfair.	<input type="checkbox"/>				

	Never	Rarely	Sometimes	Often	Always
I rely on my intuition to make parole decisions. ^a	<input type="checkbox"/>				

Adherence to System Factors Competence-R

Subscale B-R: Knowledge of the Purpose of Parole

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Parole contributes to public safety by offering a period of supervision and support to offenders at a critical time in their reentry period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The support and supervision provided to offenders on parole is important for maintaining public safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parole can help offenders to become law-abiding citizens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One benefit of parole is its potential for cost-savings to the criminal justice system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know the purpose of parole in my jurisdiction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am familiar with the mission statement of my organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know the guiding principles for parole decision-making in my agency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am committed to upholding the integrity of my organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PAROLE BOARD MEMBER COMPETENCY MODEL

Subscale C-R: Knowledge and Application of Legislation and Policy

5. I am aware of the legislation that provides the authority and criteria for parole decisions in my jurisdiction:
 - a. I have limited knowledge of the legislation.
 - b. I am somewhat aware of the legislation.
 - c. I am very familiar with the legislation.
 - d. Not applicable

6. If yes, please indicate the name of the act and relevant sections that provide the authority for parole decisions in my jurisdiction:

7. I am aware of the policy that provides the authority and criteria for parole decisions in my jurisdiction:
 - a. I have limited knowledge of the policies.
 - b. I am somewhat aware of the policies.
 - c. I am very familiar with the policies.
 - d. Not applicable

8. If yes, please indicate the name of the policy/policies that provide(s) the authority for parole decisions:

Subscale D-R: Responding to Time Constraints

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I have difficulty staying on top of the workload. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I sometimes have to sacrifice quality to stay on track with my expected quota. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Too often, I have to stay late at work to stay on track. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evidence-Based Risk Assessment-R

Knowledge Scale-R

32. Dynamic risk factors are more accurate predictors of recidivism than static risk factors.
True/False

PAROLE BOARD MEMBER COMPETENCY MODEL

33. Which of the following dynamic risk factors has the strongest empirical association with criminal conduct:
- e. level of personal distress/psychopathology
 - f. antisocial associates**
 - g. parental/family/intimate factors
 - h. unstable/lack of employment
34. Which of the following is not associated with desistance from crime and/or a decrease in recidivism:
- e. Increasing age of the offender
 - f. An increase in rewards for prosocial behaviour
 - g. A history of criminal behaviour beginning at a young age**
 - h. Cognitive-behavioural and skills-based interventions
35. Clinical judgment is generally less accurate than actuarial or statistical assessment.
True/False
36. Which of the following does not provide any information about how to manage or reduce a sex offender's risk?
- f. Violence Risk Assessment Guide (VRAG)
 - g. Stable-2007
 - h. Sexual Violence Risk—20 (SVR-20)
 - i. Static-99**
 - j. Acute-2007
37. Anchoring a decision with a standardized risk estimate generally yields greater accuracy.
True/False
38. Clinical overrides, when used by experienced parole Board members, tend to exceed the accuracy of standardized risk scales.
True/False
39. According to research findings, which of the following is most important for parole Board members to address during hearings with an offender:
- e. (Lack) of employment
 - f. Family and/or marital issues
 - g. Antisocial cognitions**
 - h. Major mental disorder
40. When dealing with a violent offender, interventions that focus on instilling morals and increasing empathy are generally more effective.
True/False
41. All sex offenders have problems with deviant sexual interests
True/False

PAROLE BOARD MEMBER COMPETENCY MODEL

42. As a general rule, an offender risk is not manageable on release until they fully accept responsibility for their offence.

True/**False**

43. Which is the best indicator of violent recidivism?

- e. Separation from either biological parent by age 16
- f. Alcohol problems
- g. Failure on prior conditional release
- h. Psychopathy checklist score/antisocial personality diagnosis**

44. Relative to other offenders, the risk level for offenders with schizophrenia increases significantly when which of the following co-occur:

- f. Substance abuse problems
- g. A history of ‘bizarre’ delusions (“aliens are controlling my thoughts”)
- h. The presence of acute symptoms
- i. A & C**
- j. All of the above

45. Which of the following does not contribute to effective relapse prevention and community reintegration for sex offenders:

- e. identifying dynamic and situational risk factors (i.e. high-risk situations) and having the offender participate in the creation of a self-management plan
- f. public registries and community notification**
- g. skills development (i.e. victim empathy, (pro)social skills)
- h. working to increase motivation of offenders to participate and engage in treatment

46. Generally speaking, it is accepted that all violent offenders have anger problems.

True/**False**

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Any offender who violates a condition of release poses too great a risk to stay in the community. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is no excuse for offenders not to meet all special conditions placed on their conditional release. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More special conditions are typically better to ensure offender success on release. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Subscale E-R: Knowledge of Community Resources

PAROLE BOARD MEMBER COMPETENCY MODEL

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I am familiar with the community organizations that provide services to offenders on release in my jurisdiction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I assess if a community resource that is included as part of an offender's release plan is suitable to meet their needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community organizations have little to offer in terms of managing an offender's risk. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am unsure how community organizations work with offenders. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Skills and Abilities Scales-R

Interviewing Skills, Interpersonal Skills, Teamwork Skills

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Regardless of whether or not an offender has a substance abuse issue related to his/her crime cycle, it is important to ask what their plan is to abstain from drugs and alcohol while on conditional release. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to ensure that the offender feels heard and respected during the hearing process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to ensure that the victim feels heard and respected during the hearing process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is important to use plain language when communicating with the offender.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensuring my co-panelist feels respected and heard is important in the parole decision-making process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PAROLE BOARD MEMBER COMPETENCY MODEL

Please indicate the extent to which you do the following in your work as a Board member:

	Never	Rarely	Sometimes	Often	Always
I ask for clarification on what the offender has said, if need be.	<input type="checkbox"/>				
I ask specific questions about the release plan, including details on employment plan, housing situation, and family situation.	<input type="checkbox"/>				
Where quorum indicates two Board members are required, I consider my co-worker's opinion as a part of my decision-making process.	<input type="checkbox"/>				
I am comfortable expressing an opinion that is different than that of my co-panelist in the event of a disagreement on a parole decision.	<input type="checkbox"/>				

Subscale J-R: Leadership Skills Scale

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I encourage others to make decisions based on the best available research evidence on offender risk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am passionate about making quality decisions and encourage my colleagues to do their best work in parole decision-making.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage colleagues in discussions about making quality parole decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Subscale K-R: Ability to identify and assess quality of file information

Please indicate the extent to which you do the following in your work as a Board member:

	Never	Rarely	Sometimes	Often	Always
If there is insufficient file information to make a decision, I take steps to rectify the situation.	<input type="checkbox"/>				
In the event of discrepancy in file information, I use my judgement to determine which piece of information is more credible.	<input type="checkbox"/>				
I base my decisions on an overall understanding of the offender's risk factors.	<input type="checkbox"/>				
I test that key pieces of information are reliable and credible to the best of my abilities.	<input type="checkbox"/>				

PAROLE BOARD MEMBER COMPETENCY MODEL

If a piece of information does not fit with my understanding of the offender’s risk, I ignore it in my final decision. ^a	<input type="checkbox"/>				
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^a Items are reverse scored.

Evidence-Based Decision-Making Vignettes and Questionnaire

No change.

Effective Communication Measure

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
It is important that the <u>stakeholders</u> understand the reason for the decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Never	Rarely	Sometimes	Often	Always
I make sure that the decision is plainly written so that the <u>stakeholders</u> understand the rationale.	<input type="checkbox"/>				
I reference the appropriate legislation to support my written decision.	<input type="checkbox"/>				
In my written decision, I demonstrate how my decision meets the legal and policy requirements.	<input type="checkbox"/>				
I reference examples and include analysis to support my decision.	<input type="checkbox"/>				

Self-Improvement Measure

Please indicate the extent to which the following statements are true in your opinion or experience, as applicable.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I regularly take the time to reflect on my decision-making and see if there are any areas where I can improve.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find that negative coverage of parole in the media makes me stricter in my release decisions. ^a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is little I can do to improve my	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PAROLE BOARD MEMBER COMPETENCY MODEL

parole decision-making. ^a					
I am able to incorporate lessons learned into my future parole decisions.	<input type="checkbox"/>				
Media coverage of offenders who fail on parole demonstrates that too many offenders are released. ^a	<input type="checkbox"/>				
I take opportunities to share the benefits and value of parole with others, as appropriate.	<input type="checkbox"/>				
Offender appeals are a good source of information to see where I can be clearer in future decisions.	<input type="checkbox"/>				
I am committed to improving the quality of my decisions.	<input type="checkbox"/>				

^a Items are reverse scored.