



NATIONAL INSTITUTE OF JUSTICE

Data Resources Program

Evaluation of the First Incarceration Shock Treatment (FIST) Program for Youthful Offenders in Kentucky, 1993–1994

ICPSR 2698

Blair B. Bourque, Daniel B. Felker, Mei Han,
and Richard N. White

*User Guide, Machine-Readable Codebook,
and Data Collection Instruments*



Inter-university Consortium for Political and Social Research

EVALUATION OF THE FIRST INCARCERATION SHOCK TREATMENT (FIST)
PROGRAM FOR YOUTHFUL OFFENDERS IN KENTUCKY, 1993-1994

(ICPSR 2698)

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REQUEST FOR INFORMATION ON USE OF ICPSR RESOURCES

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The original collector of the data, ICPSR, and the relevant funding agency bear no responsibility for uses of this collection or for interpretations or inferences based upon such uses.

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SUMMARY

Boot camps, a popular alternative to incarceration, are characterized by a strong emphasis on military structure, drill, and discipline and by an abbreviated period of incarceration. Originally designed for young, adult, male offenders convicted of nonviolent crimes, boot camps have been expanded to encompass juveniles and women as well. In 1992 the Bureau of Justice Assistance funded three agencies to develop correctional boot camps for young offenders, and simultaneously, the National Institute of Justice supported an evaluation of these camps. By October 1993 the only operational boot camp of the three selected sites was the Kentucky Department of Corrections' First Incarceration Shock Treatment (FIST) program. This data collection is an evaluation of the first 18 months of operation of FIST from July 1993 through December 1994. The primary goal of this evaluation was to document the development of the Kentucky boot camp, the characteristics and experiences of the youthful offenders participating in it, and any changes in participants' attitudes and behaviors as a result of it. The evaluation consisted of an extensive case study, supplemented by pre- and post-test comparisons of boot camp offenders' attitudes, physical fitness, and literacy skills; descriptive information about their engagement in legitimate activities during aftercare; and an assessment of the rates, timing, and sources of program attrition. Variables in this collection include entrance and exit dates; sentence; crime type and class; pre- and post-program test scores in math, reading, and language skills; and demographic variables such as age, race, sex, and marital status.

GENERAL STUDY OVERVIEW

STUDY IDENTIFICATION

EVALUATION OF THE FIRST INCARCERATION SHOCK TREATMENT (FIST) PROGRAM
FOR YOUTHFUL OFFENDERS IN KENTUCKY, 1993-1994

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Washington Research Center. American Institutes for Research

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KEY WORDS

Boot camps, correctional facilities, diversion programs,
offenders

PURPOSE OF THE STUDY

Boot camps, a popular alternative to incarceration, are characterized by a strong emphasis on military structure, drill, and discipline and by an abbreviated period of incarceration. Originally designed for young, adult, male offenders convicted of nonviolent crimes, boot camps have been expanded to encompass juveniles and women as well. In 1992 the Bureau of Justice Assistance funded three agencies to develop correctional boot camps for young offenders, and simultaneously, the National Institute of Justice supported an evaluation of these camps. By October 1993 the only operational boot camp of the three selected sites was the Kentucky Department of Corrections' First Incarceration Shock Treatment (FIST) program. This data collection is an evaluation of the first 18 months of operation of FIST from July 1993 through December 1994. The primary goal of this evaluation was to document the development of the Kentucky boot camp, the characteristics and experiences of the youthful offenders participating in it, and the changes in participants' attitudes and behaviors.

METHODS

STUDY DESIGN

FIST is located on the grounds of the Roederer Correctional Complex in LaGrange, Kentucky. It is a 127-day program offered to male and female inmates who have at least four months remaining to parole eligibility and who have a maximum sentence of ten years. The rigorous daily schedule includes physical training and conditioning, individualized academic programs, a substance abuse program, a living skills program, work details, community meetings, and military drills and ceremonies. The evaluation consisted of an extensive case study, supplemented by pre- and post-program comparisons of boot camp offenders' attitudes, physical fitness, and literacy skills; descriptive information about their engagement in legitimate activities during aftercare; and an assessment of the rates, timing, and sources of program attrition. Data were collected using five instruments: (1) FIST Program Questionnaire, which gathered demographic and family background data at the point of entry to FIST, (2) Test of Adult Basic Education (TABE), administered upon entry and exit to measure reading, writing, and math skills, (3) FM20-21 Army Physical Fitness Test, which gathered information on muscle endurance and cardiorespiratory fitness monthly for four months, (4) Exit Questionnaire, which collected data on disciplinary history, awards, fitness scores, and opinions of the program and was administered upon completion of the program, and (5) Parole Questionnaire for Participants, which measured jobs, education, and opinions about the program six months into aftercare. In addition to these instruments, information was coded from the Department of Corrections computerized database, including committing offense, sentence, parole eligibility dates, and conditional release dates.

SOURCES OF INFORMATION

Data were collected through personal interviews with participants upon their entrance to and exit from the program. Participants also completed a self-enumerated questionnaire regarding their opinions of the program. Additional data were collected from the administrative records of the FIST program and the Kentucky Department of Corrections.

SAMPLE

This evaluation project included the eight cohorts of participants entering FIST in 1993 and 1994, when the program first began. FIST was offered to male and female inmates who had at least

four month remaining to parole eligibility and who had a maximum sentence of ten years. FIST candidates were screened against program eligibility upon entry to the Assessment and Classification Center, and those who qualified were offered a slot in the program. Inmates entered in platoons of 25, including 20 men and 5 women. New platoons were formed every two months. The selection criteria specified that boot camp candidates must: (1) be serving their first adult felony incarceration, (2) be serving sentences for nonviolent and nonsexual offenses, (3) score in the minimum or community custody range in accordance with the Department of Corrections' objective classification system, (4) be age 25 or less upon entry to the program, (5) have no less than 4 months and no more than 36 months before their parole eligibility dates, (6) be determined to be intellectually, physically, and mentally able to complete the program, (7) volunteer for program participation, (8) have no detainers or felony charges pending, and (9) be serving a total sentence of ten years or less.

RESPONSE RATES

Not applicable.

DATE(S) OF DATA COLLECTION

1993-1994

SUMMARY OF CONTENTS

DESCRIPTION OF VARIABLES

Variables include FIST entry and exit dates; pre- and post-program scores on reading, math, and language skills; committing offense type and class; sentence length; and reason for program termination. Demographic variables include age, sex, race, and marital status.

PRESENCE OF COMMON SCALES

None.

UNIT OF OBSERVATION

Individuals.

EXTENT OF PROCESSING

The hardcopy data collection instruments were converted to machine-readable form by ICPSR. ICPSR performed checks for undocumented codes, standardized missing data codes, and reformatted the data. ICPSR also produced a codebook and generated SAS and SPSS data definition statements for this collection.

EXTENT OF COLLECTION

This data collection consists of one data file, a machine-readable user guide, codebook, and data collection instruments in one Portable Document Format (PDF) file, and SAS and SPSS data definition statements.

DATA COLLECTION NOTES

(1) Due to a data collection error, most of the data collected for this study were not preserved in electronic format. The variables present in this collection were hand-calculated by the principal investigators. (2) The same principal investigators conducted other boot camp evaluations under the same grant from the National Institute of Justice. The scope and methods of the other evaluations differed significantly from this Kentucky study, and therefore they are archived under a different study number. Users should consult EVALUATION OF BOOT CAMPS FOR JUVENILE OFFENDERS IN CLEVELAND, DENVER, AND MOBILE, 1992-1993 (ICPSR 6922) for further information about these evaluations. (3) The user guide, codebook, and data collection instruments are provided as a Portable Document Format (PDF) file. The PDF file format was developed by Adobe Systems Incorporated and can be accessed using PDF reader software, such as the Adobe Acrobat Reader. Information on how to obtain a copy of the Acrobat Reader is provided through the ICPSR Website on the Internet.

FILE SPECIFICATIONS

PART NUMBER: 1
FILE STRUCTURE: rectangular
CASE COUNT: 185
VARIABLE COUNT: 21
RECORD LENGTH: 61
RECORDS PER CASE: 1

RELATED PUBLICATIONS

Bourque, Blair B., Daniel B. Felker, Mei Han, and Richard N. White. "An Implementation Evaluation of the First Incarceration Shock Treatment Program: A Boot Camp for Youthful Offenders in Kentucky" (Final Report). Washington, DC: United States Department of Justice. National Institute of Justice, 1996.

Bourque, B., R. Cronin, F. Pearson, D. Felker, M. Han, and S. Hill. "Boot Camps for Juvenile Offenders: An Implementation Evaluation of Three Demonstration Programs" (Final Report). Washington, DC: United States Department of Justice. National Institute of Justice, 1996.

Bourque, B., M. Han, and S. Hill. "An Inventory of Aftercare Provisions for 52 Boot Camp Programs" (Final Report). Washington, DC: United States Department of Justice. National Institute of Justice, 1996.

FINAL REPORTS AND OTHER PUBLICATIONS

The National Criminal Justice Reference Service (NCJRS) was established in 1972 by the National Institute of Justice (NIJ), of the U.S. Department of Justice, to provide research findings to criminal justice professionals and researchers. NCJRS operates specialized clearinghouses that are staffed by information specialists who supply a range of reference, referral, and distribution services. Final reports and other publications describing research conducted on a variety of criminal justice topics are available. Publications can be obtained from NCJRS at NIJ/NCJRS, Box 6000, Rockville, MD, 20850, 800-851-3420 or 301-251-5500. The URL for the NCJRS homepage is:

<http://www.ncjrs.org>

DATA RESOURCES PROGRAM ON THE INTERNET

The National Institute of Justice Data Resources Program (DRP) makes datasets from NIJ-funded research and evaluation projects available to the research community and sponsors research and training activities devoted to secondary data analysis. Datasets are archived by the National Archive of Criminal Justice Data (NACJD) at the Inter-university Consortium for Political and Social Research (ICPSR) at the University of Michigan.

The NACJD maintains a World Wide Web site with instructions for transferring files and sending messages. Criminal justice data funded by the Department of Justice are available via the Internet at this site at no charge to the user. NACJD may be contacted at NACJD/ICPSR, P.O. Box 1248, Ann Arbor, MI, 48106-1248, 800-999-0960 or 734-998-9825. The URL for the NACJD homepage is:

<http://www.icpsr.umich.edu/NACJD>

DATA COMPLETENESS REPORT

This report corresponds to the data file: DA2698.P1

Table 1: Distribution of Variables by Percentage of Missing Values*

Variable Name and Label (Total cases=185)	Percent of Cases with Missing Values

57.1% (12 of 21 variables) have 0% Missing Values	
0.0% (0 of 21 variables) have > 0% - 1% Missing Values	
0.0% (0 of 21 variables) have > 1% - 3% Missing Values	
0.0% (0 of 21 variables) have > 3% - 5% Missing Values	
0.0% (0 of 21 variables) have > 5% - 10% Missing Values	
0.0% (0 of 21 variables) have > 10% - 20% Missing Values	
42.9% (9 of 21 variables) have > 20% - 40% Missing Values	
PREREAD READING PRETEST	24.9%
POSTREAD READING POSTTEST	24.9%
PREMATH MATH PRETEST	24.9%
POSTMATH MATH POSTTEST	24.9%
PRELANG LANGUAGE PRETEST	24.9%
POSTLANG LANGUAGE POSTTEST	24.9%
MARSTAT MARITAL STATUS	27.6%
HEIGHT HEIGHT	27.6%
WEIGHT WEIGHT	28.1%

 *Variables individually listed only if greater than 5% missing values.
 Data does not contain skip patterns or skip patterns are not reflected
 in the data as coded.

CODEBOOK FOR ICPSR 2698

EVALUATION OF THE FIRST INCARCERATION SHOCK TREATMENT (FIST) PROGRAM
FOR YOUTHFUL OFFENDERS IN KENTUCKY, 1993-1994

PLEASE NOTE: The "M" between the code and the code label indicates
the code has been designated as a missing value.

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
ID	ID NUMBER	1	3	F3
BRIGADE	ENTRY DATE	4	8	A5
COHORT	COHORT	9	9	F1
	1 Date 7/93			
	2 Date 8/93			
	3 Date 11/93			
	4 Date 12/93			
	5 Date 3/94			
	6 Date 5/94			
	7 Date 7/94			
	8 Date 9/94			
AGE	AGE	10	11	F2
SEX	SEX	12	12	F1
	0 Female			
	1 Male			
RACE	RACE/ETHNICITY	13	13	F1
	1 African American			
	2 White			
	3 Native American			
MARSTAT	MARITAL STATUS	14	14	F1
	1 Never married			
	2 Married or common law			
	3 Separated			
	4 Divorced			
	6 Other			
	9 M Missing			
HEIGHT	HEIGHT	15	18	A4
WEIGHT	WEIGHT	19	21	F3
	999 M Missing			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
PREREAD	READING PRETEST 99.9 M Missing	22	25	F4.1
POSTREAD	READING POSTTEST 99.9 M Missing	26	29	F4.1
PREMATH	MATH PRETEST 99.9 M Missing	30	33	F4.1
POSTMATH	MATH POSTTEST 99.9 M Missing	34	37	F4.1
PRELANG	LANGUAGE PRETEST 99.9 M Missing	38	41	F4.1
POSTLANG	LANGUAGE POSTTEST 99.9 M Missing	42	45	F4.1
EXITDATE	EXIT DATE	46	54	A9
EXITREAS	REASON FOR EXIT 1 Graduated 2 Removed	55	55	F1
PAROLE	NUMBER OF MONTHS REMAINING TO PAROLE	56	57	F2
SENTENCE	SENTENCE LENGTH IN MONTHS	58	59	F2
CLASS	COMMITTING OFFENSE CLASS 0 Class B felonies 1 Class C 2 Class D	60	60	F1

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
CRIME	COMMITTING OFFENSE TYPE	61	61	F1
	1 Assault			
	2 Burglary			
	3 Robbery			
	4 Trafficking			
	5 Drug possession/planting			
	6 Crim. abuse/wanton endangermnt			
	7 Other			
	8 Theft/rsp/other property			

Data Collection Instruments
and
Original Documentation Supplied by Principal Investigator

Any column locations indicated in the original documentation refer to the original data format. The data were restructured, and the new column locations are listed in the ICPSR codebook and data definition statements.

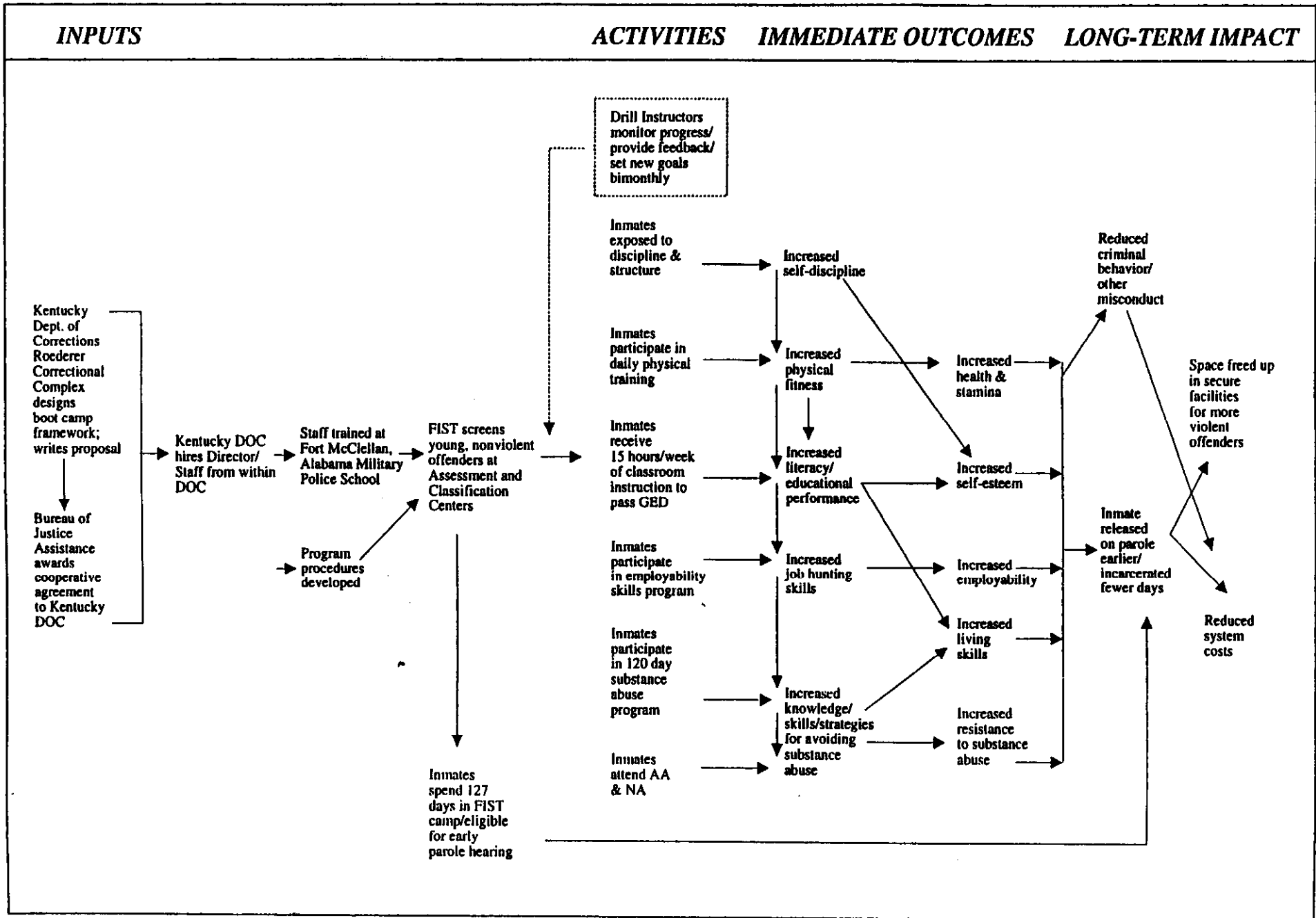


Figure 2.1. Rationale for Kentucky First Incarceration Shock Treatment Program (FIST)

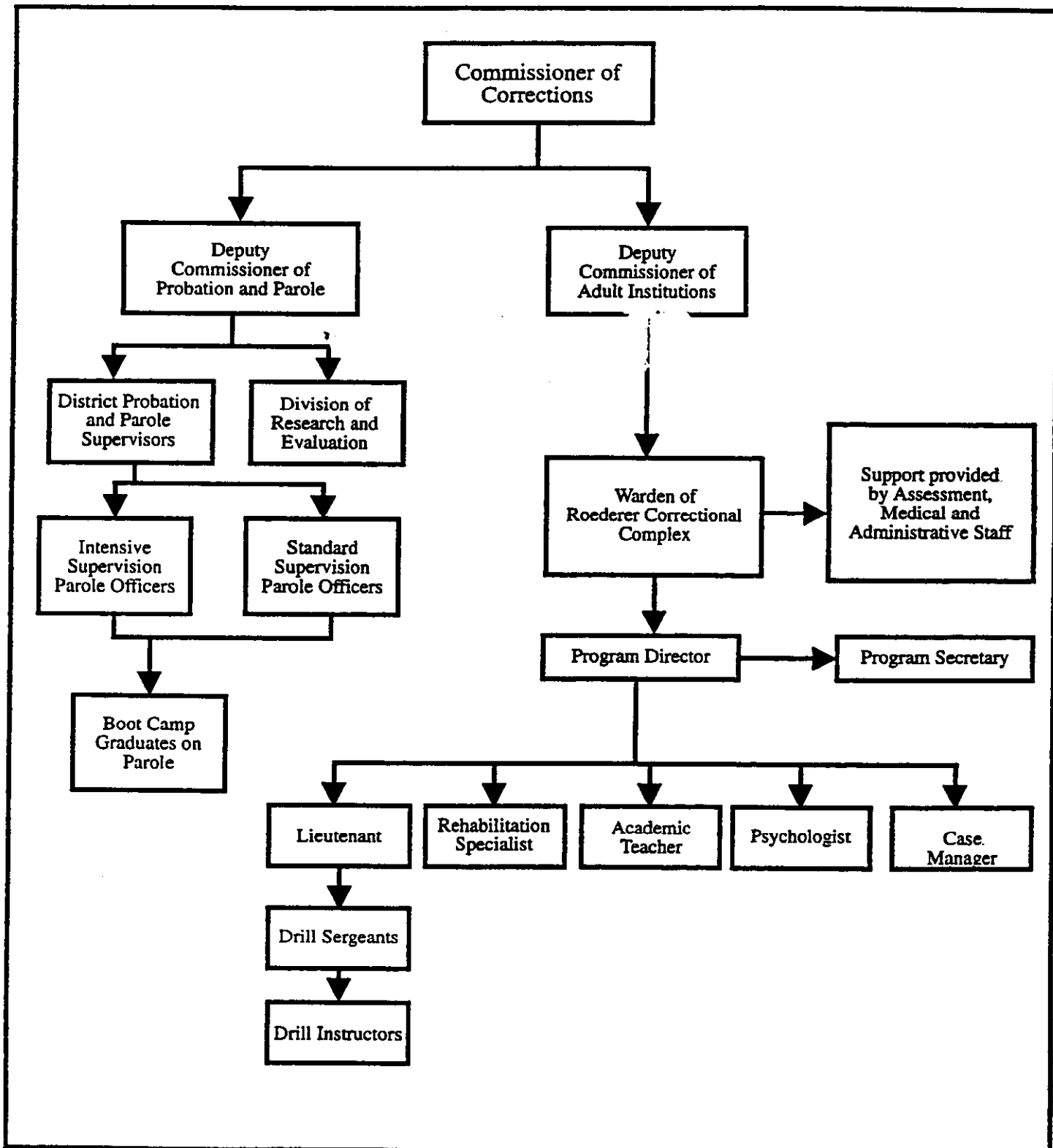


Figure 2.2. FIST Organization Chart

Appendix A

First Incarceration Shock Treatment Program Questionnaire

Army Physical Fitness Test

Scorecard

Scoring Standards

FIST Program Exit Questionnaire

FIST Program Parole Questionnaire for Participants

FIRST INCARCERATION SHOCK TREATMENT PROGRAM QUESTIONNAIRE

IDENTIFYING INFORMATION

1. Reach ID Number [Leave Blank] _____

2. Participant's Name

Last: _____

First: _____

Middle: _____

3. Offender's ID number _____

4. Date of birth _____

5. Race: [Circle one]

1 = Black

2 = White

3 = Hispanic

4 = Asian

5 = Native American/American Indian

6 = Other (specify): _____

7 = Not sure

6. Height ____ ft. ____ in.

7. Weight _____ lbs.

DEMOGRAPHIC CHARACTERISTICS

8. Marital Status

1 = Never Married

2 = Married or Common Law Married

3 = Separated

4 = Divorced

5 = Widowed

0 = Other

9. Before being incarcerated, what was your household living arrangement?

1 = Lived alone

2 = Lived with spouse and children

3 = Lived with children

4 = Lived with parents; grandparents

5 = Lived with parents and children

6 = Lived with other relatives

7 = Lives with spouse or friend

8 = Lived with friends

9 = Had no permanent residence

0 = Other arrangements; specify _____

10. How long had you had that living arrangement?

1 = Less than 6 months

2 = 6 to 12 months

3 = 1 to 3 years

4 = Over 3 years

11. Who did you live with the majority of the time when you were growing up?

1 = Two parents were present all or most of the time

2 = One parent

3 = Grandparent(s)

4 = Lived with other relatives

5 = Lived with non-relatives

0 = Other (Please specify) _____

12. Do you have a place to live after you are released from this institution?

1 = Yes

2 = No

13. Please indicate the kind of living arrangement you have planned.

1 = Live alone

2 = Live with spouse and children

3 = Live with children

4 = Live with parent(s)

5 = Live with parents and children

6 = Live with other relatives

7 = Live with spouse or friend

8 = Live with friends

9 = Live in half-way house

0 = Other arrangements (specify) _____

14. Have you ever had a driver's license?

1 = Yes

2 = No

15. Have you ever had a bank checking account?

1 = Yes

2 = No

16. How many children do you have? _____

17. If you have had a child, what age were you when your first child was born?

Age _____

18. If you have children, who is presently taking care of them?

1 = Mother/Mother-in-law

2 = Grandparents

3 = Spouse or friend

4 = Brother or Sister

5 = Father/Father-in-Law

6 = Foster parents

7 = Aunt or Uncle

8 = Child was adopted

9 = Child living on own

0 = Other (specify who) _____

19. What is the marital status of your parents?

- 1 = Never married
- 2 = Married
- 3 = Separated
- 4 = Divorced
- 5 = Deceased

20. Have any other members of your family ever been incarcerated?

- 1 = Yes
- 2 = No

21. Ever-incarcerated family member(s) (Circle all that apply).

- 1 = Mother
- 2 = Father
- 3 = Brother
- 4 = Sister
- 5 = Spouse
- 6 = Son
- 7 = Daughter
- 0 = Other member

22. Did you ever run away from home?

- 1 = Yes
- 2 = No

23. Who is the most important person in your life right now? (Please circle only one)

- 1 = Mother
- 2 = Father
- 3 = Parents
- 4 = Sister
- 5 = Brother
- 6 = Child, Children
- 7 = Spouse
- 8 = Lover
- 9 = Grandparent
- 10 = Self
- 11 = God
- 12 = Friend
- 13 = Other

24. How much have your peers and friends influenced you and decisions you have made?

- 1 = Not at all
- 2 = Somewhat
- 3 = Very much

25. Before you were incarcerated, what did you usually do to make yourself feel better emotionally? (Circle only one)

- 1 = Take Drugs
- 2 = Be with family and friends
- 3 = Work
- 4 = Drink alcohol
- 5 = Attend church, pray
- 6 = Exercise
- 7 = Shop, spend money
- 8 = Talk to parent
- 9 = Read
- 10 = Be alone
- 11 = Cry
- 12 = Crafts
- 13 = Help others
- 14 = Go for a drive
- 15 = Have sex
- 0 = Other

26. Have you ever attempted suicide?

- 1 = No
- 2 = Yes, once
- 3 = Yes, two times
- 4 = Yes, 3 or 4 times
- 5 = Yes, 5 or 9 times
- 6 = Yes, 10 or more times

27. If you have attempted suicide, why? (Circle only one)

- 1 = Depressed
- 2 = Painful to continue life
- 3 = Felt like no one cared
- 4 = To escape abuse
- 5 = Apprehended for a crime
- 6 = To escape a bad relationship
- 7 = High on drugs or alcohol
- 8 = Wanted attention
- 9 = Angry
- 0 = Other

28.(A) How many incidents of physical abuse happened to you in which no injury occurred (e.g. slapping, grabbing, pushing)?

- 1 = None
- 2 = 1 or 2
- 3 = 3 to 10
- 4 = 11 or more

28.(B) How many incidents of physical abuse happened to you in which you were injured (e.g. beaten, kicked, or tied up)?

- 1 = None
- 2 = 1 or 2
- 3 = 3 to 10
- 4 = 11 or more

29. What age were you at the time of the first incident of physical abuse?

Age _____

30. Please indicate the physical abuser's relationship to you.

- 1 = Spouse
- 2 = Lover
- 3 = Parent
- 4 = Unknown abuser
- 5 = Step-parent
- 6 = Friend
- 7 = Neighbor
- 8 = Sibling
- 9 = Several Abusers
- 10 = Foster sibling
- 11 = Grandparent
- 0 = Other (specify) _____

31.(A) Did you tell anyone or report the incident(s) of physical abuse? (If no, skip to question 33)

- 1 = Yes
- 2 = No

31.(B) If yes, at what age did you report this physical abuse?

Age _____

32. If you reported the incident(s) of physical abuse, what happened?

- 1 = Reporting just made things worse
- 2 = No change
- 3 = The abuse stopped
- 0 = Other

33. Have you ever been the victim of sexual abuse?

- 1 = Yes
- 2 = No (Skip to item #39)

34. How many incidents of sexual abuse happened?

- 1 = 1 or 2
- 2 = 3 to 10
- 3 = 11 or more

35.(A) What age were you at the time of the first incident of sexual abuse?

Age _____

35.(B) What age were you at the time of the last incident of sexual abuse?

Age _____

36. Please indicate the sexual abuser's relationship to you.

- 1 = Unknown abuser
- 2 = Father
- 3 = Mother
- 4 = Stepfather
- 5 = Stepmother
- 6 = Uncle
- 7 = Brother
- 8 = Sister
- 9 = Lover
- 10 = Spouse
- 11 = Sibling's friend
- 12 = Friend
- 13 = Neighbor
- 14 = Grandfather
- 15 = Cousin
- 16 = Mother's Boyfriend
- 17 = Father's Girlfriend
- 18 = Several abusers
- 19 = Foster siblings
- 0 = Other

37. Did you tell anyone or report the incident(s) of sexual abuse?

- 1 = Yes
- 2 = No

38. If you reported the incident(s) of sexual abuse, what happened?

- 1 = Reporting just made things worse
- 2 = No change
- 3 = The abuse stopped
- 4 = Other (specify) _____

39. How often did you use alcohol?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

40. How often did you use heroin?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

41. How often did you use cocaine?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

42. How often did you use crack?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

43. How often did you use marijuana?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

44. How often did you use speed?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

45. How often did you use prescription drugs without the advice of a doctor?

- 1 = Never
- 2 = A few times a year
- 3 = Once or twice a month
- 4 = Once or twice a week
- 5 = Daily

46.(A) What age were you when you first used drugs?

Age _____

46.(B) What age were you when you first used alcohol?

Age _____

47. What drug treatment programs have you participated in? (Circle all that apply)

- 1 = None
- 2 = Alcohol
- 3 = D.W.I. School
- 4 = Mental Health (Psychiatric)
- 5 = Drug Treatment
- 6 = Detoxification
- 7 = Methadone Maintenance
- 8 = Foster/Group Home
- 9 = Job Corps
- 0 = Other program(s)(specify) _____

48.(A) What was the offender's school/college/vocational program enrollment at the time of arrest?

- 1 = Not enrolled in school
- 2 = Enrolled in school full-time
- 3 = Enrolled in school part-time
- 4 = Unknown

48.(B) Last enrolled in what type of educational program?

- 1 = Regular/Mainstream
- 2 = MR (mentally handicapped)
- 3 = LD (learning disabled)
- 4 = ED (emotionally disturbed)
- 5 = Vocational Education
- 6 = Other (specify) _____
- 7 = Unknown

48.(C) Please indicate the highest level of education you have completed.

- 1 = Elementary School
- 2 = 1 to 3 years high school, no GED
- 3 = 1 to 3 years high school and GED
- 4 = 4 years of high school and Diploma
- 5 = 1 to 3 years of college
- 6 = 4 or more years of college and Diploma
- 7 = Advanced Degree

49. If you received a vocational or technical school diploma, please indicate the subject area in which the diploma was awarded.

- 1 = None
- 2 = Business/Secretarial
- 3 = Medical/Dental
- 4 = Cosmetology
- 5 = Construction trades
- 6 = Drafting design
- 7 = Modeling/Marketing
- 8 = Electrical/Electronics
- 9 = Interior decorating
- 10 = Food preparation
- 11 = Automotive technology
- 12 = Travel/Hotel management
- 13 = Heavy equipment operating
- 14 = Animal Care
- 0 = All other

50. If you did not finish high school, why did you quit?

- 1 = I didn't belong
- 2 = I parented a child
- 3 = I was tired or bored
- 4 = To help family financially
- 0 = Other reason (specify) _____

51.(A) Offender's employment status at time of arrest

- 1 = Not employed
- 2 = Employed part-time
- 3 = Employed full-time
- 4 = Unknown

51.(B) What was your last job prior to being incarcerated?

52. How many different jobs or employers did you have during the three years before this incarceration?

- 1 = None
- 2 = 1
- 3 = 2 or 3
- 4 = 4 to 6
- 5 = 7 to 10
- 6 = 11 or more

53. What is the highest hourly salary you earned before this incarceration?

- 1 = \$3.35 or less
- 2 = \$3.36 to \$6.50
- 3 = \$6.51 to \$9.99
- 4 = \$10.00 or more

54. Have you ever received welfare assistance?

- 1 = Yes
- 2 = No

55. What kind of jobs are you skilled or trained to do (Circle no more than two)

- 1 = Exec./Admin./Managerial
- 2 = Professional
- 3 = Technical
- 4 = Sales
- 5 = Clerical
- 6 = Services, private household
- 7 = Services, protective
- 8 = Services, other
- 9 = Repairer, installer
- 10 = Construction trades
- 11 = Precision assembly
- 12 = Machine operator
- 13 = Moving transportation
- 14 = Handler, helper, laborer
- 15 = Agricultural worker
- 16 = Other (specify) _____
- 17 = None

56. What kind of job do you want when you get out of prison?

57. Please indicate how many times you have been arrested.

Number of arrests _____

58.(A) What age were you at the time of your first arrest?

Age _____

58.(B) Were you ever arrested as a juvenile?

- 1 = Yes
- 2 = No

58.(C) If yes, were you convicted as a juvenile?

1 = Yes

2 = No

58.(D) Have you ever spent time in a juvenile correctional center?

1 = Yes

2 = No

59. What were you arrested for the first time for?

60. Please indicate how many times you have been incarcerated in jail.

1 = 1

2 = 2

3 = 3 to 5

4 = 6 to 10

5 = More than 10

61. How many times have you been on probation?

1 = None

2 = 1

3 = 2

4 = 3 or more

62. What crime(s) are you currently in prison for?

63. How long is the sentence you are presently serving?

1 = Less than 2 years

2 = 2-3 years

3 = 4-5 years

4 = 6 to 10 years

PHYSICAL FITNESS TEST SCORECARD

Last Name (Last, First, Middle Initial)						Institutional Number			Sex		
ASSESSMENT TEST			PHASE I			PHASE I II RT			PHASE II III RT		
Date		Age	Date		Age	Date		Age	Date		Age
Height	Weight	Go No Go	Height	Weight	Go No Go	Height	Weight	Go No Go	Height	Weight	Go No Go
Platoon		Weather Temp	Platoon		Weather Temp	Platoon		Weather Temp	Platoon		Weather Temp
1/2 Mile Raw Score	Initials	Points	1/4 Mile Raw Score	Initials	Points	1/2 Mile Raw Score	Initials	Points	1/4 Mile Raw Score	Initials	Points
1/4 Mile Raw Score	Initials	Points	1/2 Mile Raw Score	Initials	Points	1/4 Mile Raw Score	Initials	Points	1/2 Mile Raw Score	Initials	Points
1/2 Mile Raw Score	Initials	Points	1/4 Mile Raw Score	Initials	Points	1/2 Mile Raw Score	Initials	Points	1/4 Mile Raw Score	Initials	Points
Alternate Event		Total Points	Alternate Event		Total Points	Alternate Event		Total Points	Alternate Event		Total Points
Time _____ Go/No Go			Time _____ Go/No Go			Time _____ Go/No Go			Time _____ Go/No Go		
PFT/Signature and Rank			PFT/Signature and Rank			PFT/Signature and Rank			PFT/Signature and Rank		
Comments			Comments			Comments			Comments		

LEGEND: PU - Push-ups
 SU - Sit-ups
 2M - 2-mile run
 PFT - Physical Fitness Test

SCORING STANDARDS

		MALE/FEMALE PUSH-UP							
Repetitions	AGE GROUP	17-21	22-26	27-31	32-36	37-41	42-46	47-51	52+
82		100 POINTS							
81		99							
80		98	100						
79		97	99						
78		96	98						
77		95	97	100					
76		94	96	99					
75		93	95	98					
74		92	94	97					
73		91	93	96					
72		90	92	95	100				
71		89	91	94	99				
70		88	90	93	98				
69		87	89	92	97				
68		86	88	91	96				
67		85	87	90	95				
66		84	86	89	94				
65		83	85	88	93				
64		82	84	87	92				
63		81	83	86	91				
62		80	82	85	90				
61		79	81	84	89				
60		78	80	83	88				
59		77	79	82	87				
58		76	78	81	86				
57		75	77	80	85				
56		74	76	79	84				
55		73	75	78	83				
54		72	74	77	82				
53		71	73	76	81				
52		70	72	75	80				
51		69	71	74	79				
50		68	70	73	78				
49		67	69	72	77				
48		66	68	71	76				
47		65	67	70	75				
46		64	66	69	74				
45		63	65	68	73				
44		62	64	67	72				
43		61	63	66	71				
42		60	62	65	70				
41		59	61	64	69				
40		58	60	63	68				
39		57	59	62	67				
38		56	58	61	66				
37		55	57	60	65				
36		54	56	59	64				
35		53	55	58	63				
34		52	54	57	62				
33		51	53	56	61				
32		50	52	55	60				
31		49	51	54	59				
30		48	50	53	58				
29		47	49	52	57				
28		46	48	51	56				
27		45	47	50	55				
26		44	46	49	54				
25		43	45	48	53				
24		42	44	47	52				
23		41	43	46	51				
22		40	42	45	50				
21		39	41	44	49				
20		38	40	43	48				
19		37	39	42	47				
18		36	38	41	46				
17		34	36	40	45				
16		32	34	38	43				
15		30	32	36	41				
14		28	30	34	39				
13		26	28	32	37				
12		24	26	30	35				
11		22	24	28	33				
10		20	22	26	31				
9		18	20	24	29				
8		16	18	22	27				
7		14	16	20	25				
6		12	14	18	23				
5		10	12	16	21				
4		8	10	14	19				
3		6	8	12	17				
2		4	6	10	15				
1		2	4	8	13				

▼ INDICATES
 FEMALE
 STANDARDS

Figure 14-1(continued)

MALE/FEMALE SIT-UP

Repetitions	AGE GROUP	17-21	22-26	27-31	32-36	37-41	42-46	47-51	52+
92	100 POINTS								
91	98								
90	96								
89	94								
88	92								
87	90								
86	88	100							
85	86	98							
84	84	96							
83	82	94							
82	80	92							
81	78	90		100					
80	76	88		98					
79	74	86		96					
78	72	84		94					
77	70	82		92					
76	68	80		90					
75	66	78		88					
74	64	76		86					
73	62	74		84					
72	60	72		82					
71	58	70		80					
70	56	68		78					
69	54	66		76					
68	52	64		74					
67	50	62		72					
66	48	60		70					
65	46	58		68					
64	44	56		66					
63	42	54		64					
62	40	52		62					
61	38	50		60					
60	36	48		58					
59	34	46		56					
58	32	44		54					
57	30	42		52					
56	28	40		50					
55	26	38		48					
54	24	36		46					
53	22	34		44					
52	20	32		42					
51	18	30		40					
50	16	28		38					
49	14	26		36					
48	12	24		34					
47	10	22		32					
46	8	20		30					
45	6	18		28					
44	4	16		26					
43	2	14		24					
42		12		22					
41		10		20					
40		8		18					
39		6		16					
38		4		14					
37		2		12					
36				10					
35				8					
34				6					
33				4					
32				2					
31									
30									
29									
28									
27									
26									
25									
24									
23									
22									
21									
20									
19									
18									
17									
16									
15									
14									
13									
12									
11									
10									
9									
8									
7									
6									
5									
4									
3									
2									
1									

INDICATES FEMALE STANDARDS

Figure 14-1 (continued)

MALE/FEMALE 2-MILE RUN

Time	AGE GROUP	17-21	22-26	27-31	32-36	37-41	42-46	47-51	52+
11:54		100 POINTS							
12:00		99							
12:06		98							
12:12		97							
12:18		96							
12:24		96							
12:30		94							
12:36		93	100						
12:42		92	99						
12:48		91	98						
12:54		90	97						
13:00		89	96						
13:06		88	95						
13:12		87	94						
13:18		86	93	100					
13:24		85	92	99					
13:30		84	91	98					
13:36		83	90	97					
13:42		82	89	96					
13:48		81	88	95					
13:54		80	87	94					
14:00		79	86	93	100				
14:06		78	85	92	99				
14:12		77	84	91	98				
14:18		76	83	90	97				
14:24		75	82	89	96				
14:30		74	81	88	95				
14:36		73	80	87	94				
14:42		72	79	86	93	100			
14:48		71	78	85	92	99			
14:54		70	77	84	91	98			
15:00		69	76	83	90	97			
15:06		68	75	82	89	96	100		
15:12		67	74	81	88	95	99		
15:18		66	73	80	87	94	98		
15:24		65	72	79	86	93	97		
15:30		64	71	78	85	92	96		
15:36		63	70	77	84	91	95	100	
15:42		62	69	76	83	90	94	99	
15:48		61	68	75	82	89	93	98	
15:54		60	67	74	81	88	92	97	
16:00		59	66	73	80	87	91	96	100
16:06		58	65	72	79	86	90	95	99
16:12		57	64	71	78	85	89	94	98
16:18		56	63	70	77	84	88	93	97
16:24		55	62	69	76	83	87	92	96
16:30		54	61	68	75	82	86	91	95
16:36		53	60	67	74	81	85	90	94
16:42		52	59	66	73	80	84	89	93
16:48		51	58	65	72	79	83	88	92
16:54		50	57	64	71	78	82	87	91
17:00		49	56	63	70	77	81	86	90
17:06		48	55	62	69	76	80	85	89
17:12		47	54	61	68	75	79	84	88
17:18		46	53	60	67	74	78	83	87
17:24		45	52	59	66	73	77	82	86
17:30		44	51	58	65	72	76	81	85
17:36		43	50	57	64	71	75	80	84
17:42		42	49	56	63	70	74	79	83
17:48		41	48	55	62	69	73	78	82
17:54		40	47	54	61	68	72	77	81
18:00		39	46	53	60	67	71	76	80
18:06		38	45	52	59	66	70	75	79
18:12		37	44	51	58	65	69	74	78
18:18		36	43	50	57	64	68	73	77
18:24		35	42	49	56	63	67	72	76
18:30		34	41	48	55	62	66	71	75
18:36		33	40	47	54	61	65	70	74
18:42		32	39	46	53	60	64	69	73
18:48		31	38	45	52	59	63	68	72
18:54		30	37	44	51	58	62	67	71
19:00		29	36	43	50	57	61	66	70
19:06		28	35	42	49	56	60	65	69
19:12		27	34	41	48	55	59	64	68
19:18		26	33	40	47	54	58	63	67
19:24		25	32	39	46	53	57	62	66
19:30		24	31	38	45	52	56	61	65
19:36		23	30	37	44	51	55	60	64
19:42		22	29	36	43	50	54	59	63
19:48		21	28	35	42	49	53	58	62
19:54		20	27	34	41	48	52	57	61
20:00		19	26	33	40	47	51	56	60
20:06		18	25	32	39	46	50	55	59
20:12		17	24	31	38	45	49	54	58
20:18		16	23	30	37	44	48	53	57
20:24		15	22	29	36	43	47	52	56
20:30		14	21	28	35	42	46	51	55
20:36		13	20	27	34	41	45	50	54
20:42		12	19	26	33	40	44	49	53
20:48		11	18	25	32	39	43	48	52
20:54		10	17	24	31	38	42	47	51
21:00		9	16	23	30	37	41	46	50
21:06		8	15	22	29	36	40	45	49
21:12		7	14	21	28	35	39	44	48
21:18		6	13	20	27	34	38	43	47
21:24		5	12	19	26	33	37	42	46
21:30		4	11	18	25	32	36	41	45
21:36		3	10	17	24	31	35	40	44
21:42		2	9	16	23	30	34	39	43
21:48		1	8	15	22	29	33	38	42
21:54		0	7	14	21	28	32	37	41

∇ INDICATES FEMALE STANDARDS

Figure 14-1 (continued)

19:30	54	12	81	28	78	40	91	44	100	82	81	66
19:36	53	10	80	24	74	38	90	42	100	80	80	64
19:42	52	8	88	22	73	36	89	40	98	88	88	63
19:48	51	6	86	20	72	34	88	38	88	86	86	62
19:54	50	4	87	18	71	32	87	36	87	84	84	61
20:00	48	2	85	16	70	30	86	34	86	82	82	60
20:06	46		85	14	69	28	85	32	85	80	80	58
20:12	44		84	12	68	26	84	30	84	88	88	56
20:18	42		83	10	67	24	83	28	83	86	86	54
20:24	40		82	8	66	22	82	26	82	84	84	52
20:30	38		81	6	65	20	81	24	81	82	82	50
20:36	36		80	4	64	18	80	22	80	80	80	48
20:42	34		48	2	63	16	79	20	88	88	88	46
20:48	32		46		62	14	78	18	88	86	86	44
20:54	30		44		61	12	77	16	87	84	84	42
21:00	28		42		60	10	76	14	86	82	82	40
21:06	26		40		58	8	75	12	86	80	80	38
21:12	24		38		56	6	74	10	84	88	88	36
21:18	22		36		57	4	73	8	83	86	86	34
21:24	20		34		58	2	72	6	82	84	84	32
21:30	18		32		55		71	4	81	82	82	30
21:36	16		30		54		70	2	80	84	84	28
21:42	14		28		53		69		79	82	82	26
21:48	12		26		52		68		78	80	80	24
21:54	10		24		51		67		77	80	80	22
22:00	8		22		50		66		76	81	81	20
22:06	6		20		48		65		75	79	79	18
22:12	4		18		46		64		74	78	78	16
22:18	2		16		44		63		73	77	77	14
22:24			14		42		62		72	76	76	12
22:30			12		40		61		71	75	75	10
22:36			10		38		60		70	74	74	8
22:42			8		36		58		69	73	73	6
22:48			6		34		58		68	72	72	4
22:54			4		32		57		67	71	71	2
23:00			2		30		56		66	70	70	
23:06					28		55		65	68	68	
23:12					26		54		64	68	68	
23:18					24		53		63	67	67	
23:24					22		52		62	66	66	
23:30					20		51		61	65	65	
23:36					18		50		60	64	64	
23:42					16		48		58	63	63	
23:48					14		46		56	62	62	
23:54					12		44		54	61	61	
24:00					10		42		52	60	60	
24:06					8		40		50	58	58	
24:12					6		38		48	56	56	
24:18					4		36		46	54	54	
24:24					2		34		44	52	52	
24:30							32		42	50	50	
24:36							30		40	48	48	
24:42							28		38	46	46	
24:48							26		36	44	44	
24:54							24		34	42	42	
25:00							22		32	40	40	
25:06							20		30	38	38	
25:12							18		28	36	36	
25:18							16		26	34	34	
25:24							14		24	32	32	
25:30							12		22	30	30	
25:36							10		20	28	28	
25:42							8		18	26	26	
25:48							6		16	24	24	
25:54							4		14	22	22	
26:00							2		12	20	20	
26:06									10	18	18	
26:12									8	16	16	
26:18									6	14	14	
26:24									4	12	12	
26:30									2	10	10	
26:36										8	8	
26:42										6	6	
26:48										4	4	
26:54										2	2	
27:00												
27:06												
27:12												
27:18												
27:24												
27:30												
27:36												
27:42												
27:48												
27:54												

Figure 14-1 (continued)

Selected by test results:

1 = Academic Achievement Award

2 = Physical Improvement Award

3 = None

Voted on by Staff:

1 = 110% Motivation Award

2 = Outstanding Overall Progress Award

0 = None

10. Special assistance/programming (Beyond what most recruits receive)

Extra, routine tutoring

Other (specify) _____

11. COMPLETE ONLY FOR INDIVIDUALS WHO LEFT F.I.S.T PROGRAM BEFORE GRADUATING.

Reason for Premature Exit

1 = Participant requested assignment to Non-Boot Camp Program

2 = Participant terminated from Boot Camp Program for medical reasons

3 = Participant expelled from Boot Camp for other reasons (specify)

12. Physical Fitness Test Scores

EVENT	PRE-REPS POINTS	POST-REPS POINTS
Pushups		
Situps		
Run Time		

13. TABE Test Results

SUBJECT AREA	PRE-SCORE	POST-SCORE
Reading (Overall)		
Math (Overall)		

14. Attitude Assessment

Pre-Score: _____

Post-Score: _____

The following questions ask about your expectations regarding the F.I.S.T. Program. Please answer as honestly as possible.

QUESTION	STRONGLY DISAGREE	DISAGREE	UNDECIDED	AGREE	STRONGLY AGREE
1. Boot Camp was an easy way to do time.					
2. I was safer in Boot Camp than I would have been in a regular prison.					
3. Boot Camp was a game I played to get out of prison quicker.					
4. The work in Boot Camp was not that hard.					
5. A shorter time in Boot Camp was easier than a longer sentence in prison.					
6. I learned things about myself here.					
7. There was nothing in this place that helped me.					
8. Boot Camp will help me get a job.					
9. I was tough enough to handle Boot Camp.					
10. This experience has not changed me.					
11. Boot Camp helped me learn self-discipline.					
12. The drill instructors put on a big show, but that is all it was.					
13. This place never helped me in any way.					
14. A good drill instructor deserves a lot of respect.					
15. The programs in Boot Camp never helped me in any way.					
16. I matured in Boot Camp.					
17. After being in Boot Camp, I will probably not get in trouble again.					
18. Boot Camp is not a safe place.					
19. If I had a problem in Boot Camp, I didn't ask the staff for help.					
20. Boot Camp was unfair.					
21. Staff in Boot Camp tried to hurt inmates.					
22. I was hurt while I was in Boot Camp.					
23. I did not talk to staff.					
24. I did not think I would be able to take Boot Camp.					
25. The inmates are proud of this program.					
26. Staff have very little time to encourage inmates.					
27. Inmates are encouraged to show their feelings.					
28. The staff act on inmate suggestions.					
29. There is very little emphasis on making plans for getting out of here.					
30. Inmates are expected to share their personal problems with each other.					
31. The staff make sure that the area is always neat.					
32. Staff sometimes argue with each other.					
33. Once a schedule is arranged for the inmates, they must follow it.					
34. Inmates here really try to improve and get better.					

QUESTION (continued)	STRONGLY DISAGREE	DISAGREE	UNDECIDED	AGREE	STRONGLY AGREE
37. Inmates are expected to take leadership in the program.					
. Inmates are encouraged to plan for the future.					
39. Inmates rarely talk about their personal problems with other residents.					
. If an inmate's program is changed, someone on the staff tells him why.					
41. Inmates may criticize staff members to their faces.					
. Inmates in this program care about each other.					
43. Staff and inmates say how they feel about each other.					
. The staff give inmates very little responsibility.					
45. Inmates are encouraged to learn new ways of doing things.					
47. Personal problems are openly talked about.					
. The area usually looks a little messy.					
48. Inmates will be transferred from this program if they don't obey the rules.					
. There is very little group spirit in this program.					
50. The more mature inmates in this program help take care of the less mature.					
. People say what they really think around here.					
52. Inmates have a say about what goes on here.					
. There is little emphasis on what inmates will do after leaving the program.					
54. Discussions in the program emphasize understanding personal problems.					
. This is a very well organized program.					
56. Staff are always changing their minds here.					
57. All decisions about the program are made by the staff and not by inmates.					
HOW OFTEN DO YOU EXPERIENCE EACH OF THE FOLLOWING:	NEVER	SELDOM	SOMETIMES	OFTEN	ALWAYS
58. Headache					
59. Racing Heart					
60. Severe Itching					
61. Shortness of Breath					
62. Ringing Ears					
63. Upset Stomach					
64. Congested Nose					
65. Sweaty Hands					
66. Watery Eyes					
67. Chest Pains					
68. Stiff Muscles					
69. Flushed Face					
70. Dizziness					

F.I.S.T. PROGRAM PAROLE QUESTIONNAIRE FOR PARTICIPANTS

These questions are to help assess the offender's adjustment to the community and to parole supervision. Questions pertain to the offender's behavior or actions during the eight month period since the offender was placed under supervision or since the last assessment was completed.

PAROLEE'S NAME: _____ I.D. NUMBER: _____

DATE ARRIVED AT PAROLE OFFICE: _____

1. Report Period: ____/____/____ to ____/____/____

Reason for Report:

- ____ 1. Completion of PHASE 1 (Eight Months)
- ____ 2. Completion of PHASE 2 (Sixteen Months)
- ____ 3. Completion of PHASE 3 (Twenty-four Months)
- ____ 4. Completion of ISP Period
- ____ 5. Failure
- ____ 6. Change in Supervision Plan; From _____ to _____
- ____ 7. Other (i.e., medical, opt out) specify: _____

2. School History:

Was inmate involved in school program during reporting period?

- ____ 1. Yes
- ____ 2. No (Skip to Section 3)

If Yes:

- ____ 1. Full-time
- ____ 2. Part-time

If Yes, type of program:

- ____ 1. GED/High School
- ____ 2. College
- ____ 3. Vocational Training
- ____ 4. Other, specify: _____

3. Work History

A. Was parolee employed during reporting period?

- ____ 1. Yes
- ____ 2. No (Skip to Section 4)

Job Title of Present or Most Recent Job: _____

Dates of employment: ____/____/____ to present or ____/____/____

Job Status:

- ____ 1. Full-time
- ____ 2. Part-time

Referral Source:

- ____ 1. P & P Staff
- ____ 2. Self
- ____ 3. Friends
- ____ 4. Relatives
- ____ 5. Employment Agency
- ____ 6. Other, Specify: _____

b. Total work history this reporting period:

- _____ Number of jobs held
- _____ Total number of hours employed in reporting period
- _____ Total gross income earned (approximately)

If not currently employed, why not?

- _____ 1. Enrolled in school program
- _____ 2. Fired
- _____ 3. Laid-off
- _____ 4. Quit to seek better job
- _____ 5. Quit for other reasons
- _____ 6. Other, specify: _____

4. Special Aftercare Conditions while on Parole (check all that apply):

- _____ 1. None
- _____ 2. Drug
- _____ 3. Alcohol
- _____ 4. Mental Health
- _____ 5. School
- _____ 6. Other, specify _____

Does parolee participate in any self-improvement program(s) (e.g., AA, NA, Wellness, Counseling, etc.)

- _____ 1. No
- _____ 2. Yes, specify _____

5. Results of Urinalysis Testing:

- _____ Number of negative tests
- _____ Number of positive tests
- _____ If positive, list dates and type of drugs involved:

6. Number of arrests during this supervision period: _____

Offense _____ Date: _____

Offense _____ Date: _____

Offense _____ Date: _____

7. Was the parolee jailed?

Date: _____ Reason _____

8. Did the parolee miss any scheduled visits?

- _____ 1. Yes
- _____ 2. No

If Yes, how many? _____

On what date(s) _____

9. Does the parolee have a motion to Revoke pending?

- _____ 1. Yes
- _____ 2. No

If Yes, on what date was the Motion filed? _____

10. During this eight month period, how many times did you make contact with the parolee?

Face-to-Face: _____ Phone: _____ Collateral: _____

11. At end of reporting period is parolee living with:

- _____ Self
- _____ Spouse
- _____ Parent(s)
- _____ Sibling
- _____ Roommate (not related)
- _____ Other

12. Has parolee changed residence during this eight month period?

- _____ 1. Yes
- _____ 2. No

If yes, how many times did he change residence(s)? _____ (Number)

Please send this questionnaire to:

Rodney Lawrence, Program Director
F.I.S.T. Program
Roederer Correctional Complex
P O Box 69
LaGrange KY 40031

Appendix B

FIST Program - Orientation Form

Kentucky Department of Corrections FIST Mental Health Screening Form

Kentucky Department of Corrections Mental Health Screening Clinical Interview Outline

FIST Program Eligibility Review Form

FIST PROGRAM - ORIENTATION FORM

NAME: _____ #: _____ DATE: _____

I have had the FIST Program fully explained to me. I have decided that:

_____ I am not interested in the FIST Program.

_____ I wish to participate in the FIST Program and understand and agree to the following:

1. I agree to participate in the Department of Corrections' FIST Program. This agreement is made voluntarily, knowingly, and without coercion.
2. I understand the FIST Program is a four month discipline and treatment oriented program. The purpose of the program is to modify negative behavior. I shall be required to participate in intensive instruction in military bearing, courtesy, drills, intensive physical exercise, intensified structured work programs, substance and alcohol counseling, group counseling, and structured educational programming. I am required to practice good grooming and personal hygiene habits at all times.
3. I shall abide by all the conditions specified in this agreement and all other conditions and instructions given to me by any staff of the Department of Corrections. I understand that I shall be subject to removal from the FIST Program if I fail to abide by the rules and conditions of the program, or become medically unable to participate.
4. I understand that this program is governed by completely separate Departmental Policies and Procedures.
5. I understand during this four month period, I shall wear only the uniform provided for me. Other civilian clothing and jewelry shall not be permitted. I understand I shall be allowed a watch, a wedding band, and a moderate size religious medallion on a small chain.
6. Packages shall not be permitted, nor shall any appliances be allowed, and personal property shall be limited, in accordance with the FIST Program rules.
7. Visits, telephone, religious services, commissary privileges and recreational activities shall be very limited, in accordance with FIST Program rules.
8. I understand that strict discipline shall be exercised at all times and that failure to comply with such rules shall result in my removal from the FIST Program.
9. I understand that after thirty days of the four month FIST Program period, I may voluntarily request removal from the program and that I shall be transferred to an appropriate custody level facility to continue my court imposed sentence.
10. I agree that I shall not apply to participate in any other correctional program during the four month FIST Program.
11. I understand that I am subject to removal from the program if additional criminal charges are lodged against me.
12. I understand that my participation in the FIST Program is a privilege that may be revoked at any time in accordance with FIST Program procedures. If removed I shall be placed in an appropriate custody level facility.
13. I understand that I shall not be allowed telephone calls for the first thirty days of the program and that visits shall be earned beginning with the ninth week of the program.
14. I understand that smoking shall be permitted in designated smoking areas at designated times.
15. I understand that I may be placed in a halfway house upon parole as part of the parole recommendation.

Inmate's Signature

Date

Staff Witness' Signature

Date

INTAKE SCREENING

NAME: _____ # _____ DATE: _____

A: _____ HEIGHT: _____ WEIGHT: _____

VITAL SIGNS: BP: _____ TEMP: _____ PULSE: _____ RESP: _____

ALLERGIES: DRUG: _____ FOOD: _____ INSECT BITES: _____ OTHER: _____

If yes to any of the above, describe reaction:

Current illness: NO _____ YES _____ Current Medication: NO _____ YES _____

If yes, comments: _____

Past history of major health problems: NO _____ YES _____ Surgery: _____ Medical: _____

If yes, comments: _____

Have you ever shared needles either for drug use or tattooing with another individual? NO _____ YES _____

To your knowledge, have you had sexual contact with multiple partners who were uncertain of their past sexual histories or were IV drug users or homosexual? NO _____ YES _____

MENTAL STATUS & BEHAVIOR:

Alert _____ Vague Regarding History _____ Cooperative _____ Depressed _____
Withdrawn _____ Oriented x 3 _____ Lethargic _____ Anxious _____ Talkative _____

Comments: _____

Contacts: NO _____ YES _____ If yes, full-time _____ reading _____

Contact Lenses? NO _____ YES _____

Car prosthetics? NO _____ YES _____ Describe: _____

Dental work pending? NO _____ YES _____ Comments: _____

Complexion _____ Rashes _____ Lesions _____

Tattoos: NO _____ YES _____ If Yes, describe: _____

Alcohol use: NO _____ YES _____ if yes, frequency: _____

Have you ever had any past psychiatric hospitalization? NO _____ YES _____

If yes, comments: _____

Any past suicide attempts? NO _____ YES _____

If yes, comments: _____

Any physical limitations? NO _____ YES _____

If yes, comments: _____

Musculoskeletal Deformities? NO _____ YES _____

If yes, comments: _____

Orientation to Health Care Unit provided? NO _____ YES _____

Is inmate instructed that trained medical staff are available to answer any questions related to A.I.D.S. and to provide counseling if needed? NO _____ YES _____

Was inmate instructed that individual counseling is always available from Health Care staff if he should be interested in a particular health education topic or if he is at risk or affected by a specific disease entity? NO _____ YES _____

Comments: _____

INMATE'S SIGNATURE _____ (DATE) _____

HEALTH CARE STAFF'S SIGNATURE _____ (DATE) _____

KENTUCKY DEPARTMENT OF CORRECTIONS

FIRST INCARCERATION SHOCK TREATMENT

MENTAL HEALTH SCREENING

NAME: _____ #: _____

Instructions: Please check only one priority of mental health classification for placement in the program.

- | <u>PRIORITY</u> | <u>MENTAL HEALTH CLASSIFICATION</u> |
|-----------------|---|
| #1 _____ | Those inmates with no evidence of current mental disorder or history of psychiatric hospitalization or suicidal behavior which may compromise their participation in a program requiring strict adherence and discipline. |
| #2 _____ | Those inmates with chronic or episodic mental health problems which may influence ability to complete the program, but may be considered on a case-by-case basis: (Circle applicable conditions) |
| | a. Any history of psychiatric hospitalization greater than two years prior to incarceration and no evidence of mental disorder. |
| | b. History of apparent, serious suicide attempt (vs. gesture), at least two years prior to incarceration with no current evidence of mental disorder. |
| | c. Borderline intellectual functioning or mild mental retardation. |
| | d. Dysthymia (mild) |
| | e. Anxiety Disorder (mild) |
| | f. Borderline Personality Disorder |
| | g. History of Major Affective Disorder, in remission for greater than one year. |
| #3 _____ | Those inmates deemed ineligible for participation because of their mental health needs: (Circle applicable conditions) |
| | a. Requiring any psychotropic medication |
| | b. History of psychiatric hospitalization within prior two years (unless for substance abuse related condition) |
| | c. History of serious suicide attempt within previous two years |
| | d. Mental retardation (moderate or mild with severe deficits in adaptive functioning) |
| | e. Psychotic disorder (chronic or acute), Major Affective Disorder (not in full remission) |
| | f. Gender identification disorder |
| | g. Other
(Specify) _____

_____ |

Based on the mental health screening above, I find that this individual is:
(Check only one)

_____ Approved to participate in the FIST Program

_____ Denied for participation in the FIST Program

Mental Health Professional's Signature

Date

FIRST INCARCERATION SHOCK TREATMENT

ACADEMIC SCHOOL ENROLLMENT FORM

NAME: _____ INMATE #: _____
(Please Print Legibly)

AGE: _____ BIRTHDATE: _____ RACE: _____ SOCIAL SECURITY #: _____

LAST SCHOOL ATTENDED: _____

LAST GRADE COMPLETED: _____ DATE LAST ATTENDED: _____

COMPLETE SCHOOL ADDRESS: _____

(Include Zip Code)

DID YOU RECEIVE A HIGH-SCHOOL DIPLOMA? YES NO

DID YOU GET A HIGH-SCHOOL COMPLETION CERTIFICATE? YES NO

DID YOU GET A GED? YES NO

I hereby affirm the facts presented on this enrollment form are true and complete.

INMATE'S SIGNATURE

DATE

KENTUCKY DEPARTMENT OF CORRECTIONS

MENTAL HEALTH SCREENING CLINICAL INTERVIEW OUTLINE

PROGRAM: _____

NAME: _____ # _____

PRESENTATION

- Neat
- Unkept
- Cooperative
- Hostile
- Manipulative
- Threatening
- Refuses to Respond
- Withdrawn
- Apathetic
- Other: _____

SENSORIUM

- Clear
- Clouded
- Confused

ORIENTATION

- Time
- Person
- Place
- Situation

CONCENTRATION

- Good
- Fair
- Poor

RECENT MEMORY

- Good
- Fair
- Poor

REMOTE MEMORY

- Good
- Fair

PSYCHIATRIC HISTORY

- Psychotropic medication taken in the past
 - Yes
 - No
- If Yes; Medications taken now: _____

MARITAL STATUS

Single

COGNITION-PROCESS

- SPEECH**
- Coherent
 - Incoherent
 - Logical
 - Illogical
 - Relevant
 - Irrelevant
 - Loose
 - Pressured

COGNITION-CONTENT

- Within Normal Limits
- Delusional
- Auditory Hallucinations
- Visual Hallucinations
- Tactile/Olfactory Hallucinations
- Paranoid

INTELLIGENCE

- Above Average
 - About Average
 - Below Average
- SCALED WAIS-R Score: _____

PROCESS

- Abstracts
- Concrete

FEELINGS

AFFECT

- Normal
- Apathetic
- Flat
- Labile
- Appropriate to thought content

PSYCHIATRIC HOSPITALIZATION

- Yes
- No
- If Yes; Number of Admissions _____
- Date of last Admission _____
- Hospitalization for Alcohol/Drug Abuse
 - Yes
- If Yes; Number of Admissions _____
- Date of last Admission _____

RELIGIOUS AFFILIATION STATUS

Protestant

FIST PROGRAM ELIGIBILITY REVIEW FORM

CURRENT DATE: _____

BACKGROUND INFORMATION

Inmate Name: _____ #: _____
 Last First MI

Date of Birth: _____ Height: _____ Weight: _____

Race: _____ Sex: _____ Sentence Minimum Expiration Date: _____

Total Length of Sentence: _____ Date Convicted: _____

Charges: _____

Sentencing County: _____ Birth County: _____

PSI In file: _____ Yes _____ No Planned County of Release: _____

ELIGIBILITY CRITERIA (Inmate is ELIGIBLE if all the following apply - Check those that apply)

- ___ A. Is serving his/her first incarceration. This includes inmates in Assessment Center status and any other inmate currently incarcerated in a minimum security institution who is serving their first felony incarceration and who has not been housed within a secure facility. This also includes shock probation violators and parole violators who have been returned to the correctional system for violations which do not involve additional charges, and who have not been housed within a secure facility.
- ___ B. Is between 17 and 29 years of age.
- ___ C. Is not serving a sentence for a Class A or B Felony, which is classified as violent or a crime in which a life was taken, nor use of a firearm or weapon in the crime or serious bodily injury occurred.
- ___ D. Is serving a total sentence(s) of 10 years or less.
- ___ E. Is classified minimum security or community custody.
- ___ F. Has no felony detainer(s) or pending felony charges.
- ___ G. Has at least 4 months remaining to serve on his/her sentence and no more than 24 months to his/her parole board hearing.
- ___ H. Has no history of escapes from supervision, excluding juvenile convictions.
- ___ I. Volunteers for the program.
- ___ J. Is medically, physically, and psychologically fit to participate in the program (both areas must be signed off before this can be checked).
- ___ K. Scores a 6.0 or better on reading comprehension on the TABE Test, or has a high school diploma or GED certificate.

CERTIFICATION OF ELIGIBILITY (After Reviewing all material)

A. Classification Treatment Officer Review

I certify this inmate is eligible for the FIST Program _____ YES _____ NO

Classification/Treatment Officer
(ASSESSMENT UNIT STAFF)

Date

B. Medical Department Review

Inmate is capable of completing the FIST Program _____ YES _____ NO

Physician's Signature

Date

C. Psychological Department Review

Inmate is capable of completing the FIST Program _____ YES _____ NO

Physician's Signature

Date

D. Boot Camp Classification/Treatment Officer Review

I certify this Inmate is eligible for the FIST Program _____ YES _____ NO

If rejected, state reason/s: _____

Classification/Treatment Officer
(FIST Program)

Date