

Example 23.

Missouri's Transition Accountability Plan



STATE OF MISSOURI
DEPARTMENT OF CORRECTIONS
TRANSITION ACCOUNTABILITY PLAN

PHASE:
TRANSITIONAL

LOCATION:
WERDCC

OFFENDER NAME	DOC NUMBER	DATE		
BIRMINGHAM, BETTY DECARLO	2000964	12/21/2006		
ASSETS FINANCIAL, LEGAL	LIABILITIES EDUCATION, FAMILY, MENTAL HEALTH, PERSONAL/SOCIAL, SUBSTANCE ABUSE			
PHASE START DATE:	NEXT REVIEW DATE:	PAROLE HEARING DATE:	RELEASE DATE:	DISCHARGE DATE:
11/01/2006	01/15/2007	N/A	07/18/2003	03/18/2010
SPECIAL CONDITIONS: Enter and successfully complete an outpatient abuse program. Enter and successfully complete an outpatient mental health program. Enter and successfully complete an aggressive assaultive program. Work towards GEO completion.				
The following is a cooperative effort among the offender, staff, and other resources.				
01--MENTAL HEALTH				
MY SELF-DEFEATING BEHAVIOR/PROBLEM THAT BLOCKS MY SUCCESS IS: NOT TAKING MY MENTAL HEALTH MEDICATION				
MY BEHAVIORAL GOAL TO ADDRESS MY PROBLEM IS: GET MY MENTAL HEALTH ISSUES UNDER CONTROL				
MY ACTION PLAN TO MEET THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: I WILL SEE THE MENTAL HEALTH COUNSELOR FOR AN EVALUATION BEFORE 03-01-2007. I WILL TAKE ALL MEDICATIONS THREE TIMES A DAY, EVERY DAY, AS INDICATED BY MY DOCTOR			TARGET COMPLETION DATE: 03/01/2007	COMPLETION DATE: 03/01/2007
STAFF ACTION PLAN TO ASSIST IN MEETING THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: CASEWORKER WILL HELP ME GET AN APPT FOR A MH EVALUATION BEFORE 03-01-2007 CASEWORKER WILL CONTACT BJC FOR ASSISTANCE WITH MH ISSUES UPON MY RELEASE			EMPLOYEE: E0052009, AGGELER, D.	LOCATION: WERDCC COMP DATE: WERDCC
02--PERSONAL/SOCIAL				
MY SELF-DEFEATING BEHAVIOR/PROBLEM THAT BLOCKS MY SUCCESS IS: I AM VERBALLY AND PHYSICALLY AGGRESSIVE				
MY BEHAVIORAL GOAL TO ADDRESS MY PROBLEM IS: LEARN HOW TO MANAGE MY ANGER AND AGGRESSION				
MY ACTION PLAN TO MEET THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: ATTEND AN ANGER MANAGEMENT CLASS EVERY WEDNESDAY AT 6:00PM FOR 12 WEEKS BEGINNING 04/01/2007.			TARGET COMPLETION DATE: 04/01/2007	COMPLETION DATE:
STAFF ACTION PLAN TO ASSIST IN MEETING THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: GET MS BIRMINGHAM SCHEDULED FOR ANGER MGMT CLASS BY 3/15/2007 TO BEGIN ATTENDING ON 4/1/2007.			EMPLOYEE: E0052009, AGGELER, D.	LOCATION: WERDCC COMP DATE:
03--SUBSTANCE ABUSE				
MY SELF-DEFEATING BEHAVIOR/PROBLEM THAT BLOCKS MY SUCCESS IS: CONTINUING TO USE ILLEGAL DRUGS (COCAINE AND MARIJUANA)				
MY BEHAVIORAL GOAL TO ADDRESS MY PROBLEM IS: REMAIN FREE OF ILLEGAL DRUGS				
MY ACTION PLAN TO MEET THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: SUBMIT TO RANDOM URINALYSIS EVERY TIME IT IS REQUIRED OF ME. ATTEND SA TREATMENT CLASSES WEEKLY ON THURSDAYS AT 2:30 PM FOR 16 WEEKS BEGINNING 3/15/2007			TARGET COMPLETION DATE: 02/01/2007	COMPLETION DATE: 03/15/2007
STAFF ACTION PLAN TO ASSIST IN MEETING THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: RANDOMLY DRUG TEST MS. BIRMINGHAM SCHEDULE MS. BIRMINGHAM FOR SA TREATMENT CLASSES BY 3/1/2007 INVESTIGATE COMMUNITY TREATMENT OPTIONS FOR MS BIRMINGHAM			EMPLOYEE: E0052009, AGGELER, D.	LOCATION: WERDCC COMP DATE: WERDCC
COMMUNITY LINKS & RESOURCES USED TO ASSIST IN MEETING THE GOALS & SPECIAL CONDITIONS:				
NAME OF RESOURCE	ADDRESS	CONTACT PERSON	APPT. DATE/TIME	
01 BJC	112345 GLENN AVE ST LOUIS, MO 63101	EMMA LINCOLN 314-555-5555		



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PROGRAMS COMPLETED AND PERSONAL ACHIEVEMENTS: No Accomplishments found.		
ADDITIONAL INFORMATION: No significant other support. Has not had contact with her children.		
I understand that information about my case history, which may include medical, mental health, and/or substance abuse information will be shared within the Department of Corrections.		
OFFENDER SIGNATURE:	DOC NUMBER:	DATE:
	2000964	
STAFF NAME:	ID#:	SIGNATURE:
		DATE: