# TEXAS CIVIL COMMITMENT OFFICE



NUMBER: 3.4

**EFFECTIVE DATE:** 11/1/2017

**SUPERCEDES:** 12/10/2015

POLICY AND PROCEDURE

#### SUBJECT: APPROVAL OF CONTACTS AND CHAPERONES

**PURPOSE:** To establish guidelines for approving contacts and chaperones for Texas Civil Commitment Office (TCCO) clients.

#### **PROCEDURE:**

#### I. Approving Contacts

- **A.** A contact with a client is defined as in person, telephonic or written contact with an individual who has an established relationship with the client, or an individual with whom the client anticipates developing an association.
- **B.** Upon receipt of the completed Request for Contact Form (TCCO-07-16) from the client, the Case Manager and Treatment Provider shall determine within fifteen (15) calendar days whether the contact will be approved or denied. If additional time is needed, the Case Manager shall request approval from the Civil Commitment Manager (CCM).
  - 1. Contacts may be approved if the individual demonstrates they will be a pro-social support to the client's ability to meet treatment and supervision requirements and expectations.
  - 2. The Case Manager and Treatment Provider shall determine the type of contact that is approved between the client and the individual i.e., face-to-face, telephonic, written communication, supervised. The Case Manager shall enter the approval in the case management automated system within two (2) working days.
  - 3. The Case Manager shall inform the individual and the client as to the reason for the denial if the contact is not approved. The Case Manager shall document the reason for denial in the case management automated system within two (2) working days.
- **C.** Before a client has any contact with a potential contact, the following shall occur:
  - 1. The Case Manager shall meet face-to-face with the individual, when possible, to determine if the individual will be a pro-social support to the client. If a face-to-face meeting is not possible, the Case Manager shall conduct a comprehensive telephonic interview with the individual.
    - a. The Case Manager shall utilize the Collateral Contact Questionnaire form (TCCO-14-17) when interviewing the potential contact. The Case Manager shall ask additional questions as they determine to be appropriate.
    - **b.** The Case Manager shall scan the TCCO-14-17 into the case management automated system within two (2) working days of completion.

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- 2. For clients residing in the Texas Civil Commitment Center (TCCC), the Case Manager shall staff the request with the Treatment Provider to determine if the Treatment Team will approve the potential contact. The Treatment Provider may meet or speak with the potential contact if additional information is needed to determine the appropriateness of the contact.
- **3.** For clients not residing in the TCCC, the Treatment Provider shall meet face-to-face with the individual, when possible, to determine if the person will be a pro-social support to the client's treatment. If a face-to-face meeting is not possible, the Treatment Provider shall conduct a comprehensive telephonic interview with the individual. The Treatment Provider is responsible for determining if the potential contact has ever been victimized or sexually exploited by the client or is at risk for being victimized or exploited by the client.
- **D.** The TCCO Executive Director can approve contacts on a case-by-case basis.

#### **II. Denying Contact**

- **A.** Contact with clients shall be denied if:
  - 1. At any point after a contact has been approved, and the Treatment Team determines the contact is no longer appropriate; the Case Manager may deny future contact. The Case Manager shall inform the client and the individual the reason the contact is being denied and document it in the case management automated system;
  - 2. The person is required to register as a sex offender;
  - **3.** The person is an inmate;
  - **4.** The person is on community, parole or Federal supervision or has pending criminal charges unless a letter is provided by the supervising officer approving the contact and the Executive Director has approved the contact;
  - 5. The person does not want to have contact with the client;
  - 6. The person possesses traits or attitudes that are not consistent with pro-social supports or has a criminal history that would be disruptive or contrary to the client's success in the program;
  - 7. The person is in need of stabilization (e.g., actively psychotic, abusing legal or illegal substances, etc.). Once the individual is stabilized, the Case Manager and Treatment Provider may reevaluate the individual for possible contact; or
  - **8.** The person is a family member or a collateral contact of another client unless approved by the Executive Director.
- **B.** If the requested contact is a family member and is being denied for the reasons noted above, the Executive Director may approve the contact if the Treatment Team determines the contact would be beneficial to the client.
- C. Contact shall be denied if the individual has been sexually victimized by the client. In the event an adult victim requests contact and the Case Manager and Treatment Provider determine the contact would be therapeutic to the client and the victim, the victim may submit a written request to the TCCO Executive Director. Court approval is required prior to any contact with a victim. If the court approves the contact:
  - 1. The approval shall be in writing and the client shall sign an agreement that any unsupervised and unapproved contact will be a violation and subject to prosecution.

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- 2. In-person or verbal contact shall be in the presence of the Treatment Provider. Written contact shall be reviewed and approved by the Case Manager and Treatment Provider prior to the written communication being delivered.
- **D.** Contact with individuals under eighteen (18) years of age shall be denied. Exceptions may be considered if the client has children under eighteen (18) years of age if:
  - 1. The child was not the victim of the client's offenses;
  - 2. The child's guardian requests the child have contact with the client;
  - **3.** It has been established by birth certificate or official documents that the client is the legally recognized parent;
  - **4.** The Case Manager and Treatment Provider determine the contact would be beneficial; and
  - **5.** The Executive Director has approved the contact.
    - **a.** If the Executive Director approves the contact, the Treatment Provider shall be present for the verbal and in-person contact. The guardian may also be present. Written contact shall be reviewed and approved by the Case Manager and Treatment Provider prior to the written communication being delivered; and
    - **b.** If the request is while the client is residing at the TCCC, arrangements shall be made that the child does not have contact with or is in view of any other clients.

## III. Selecting a Chaperone

- **A.** A chaperone is a responsible person who has been approved by the Treatment Team to accompany and supervise the client during approved activities. A chaperone, on a case-by-case basis, may take the client to appointments, to and from work, and other outings as approved by the Treatment Team.
- **B.** The Treatment Provider shall meet with the potential chaperone(s) to determine if the person can function as a chaperone (e.g., able to hold the client accountable, is not intimidated or controlled by the client, and has pro-social attitudes).
- **C.** Potential chaperones shall:
  - 1. Be a current approved contact;
  - 2. Agree to obtain and pay for criminal history background checks via fingerprints. The criminal background checks are required prior to approval and annually thereafter. The criminal background checks may be paid for by the client if the ability to pay has been established or otherwise paid for by the potential chaperone;
  - 3. Provide a copy of their current driver's license;
  - **4.** Agree to attend and complete the chaperone training paid for by the client if the ability to pay has been established or otherwise shall be paid for by the potential chaperone;
  - **5.** Be aware of the nature of the client's sexual offending behavior and does not deny or minimize the behavior;
  - **6.** Be willing to maintain open communication with the Case Manager and Treatment Provider and other TCCO staff to include reporting inappropriate or high-risk behaviors, and violations committed by the client; and
  - **7.** Be willing to perform the duties of a chaperone.

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## IV. Disqualification of a Chaperone

- **A**. A person shall not be approved as a chaperone if:
  - 1. The person is an inmate, on community, parole or Federal supervision, on civil commitment or has pending criminal charges;
  - 2. They have a prior adjudication or deferred adjudication for a sex offense or an offense against a person, including Burglary with Intent to Commit an Offense against a person. If a person otherwise meets the qualifications to be a chaperone and the Case Manager and Treatment Provider considers the person to be an appropriate chaperone regardless of the prior offense against a person, the Case Manager may request approval from TCCO management. Anyone with a felony conviction requires approval from the TCCO Executive Director.
  - **3**. The person possesses traits, attitudes, or a history that would be harmful or do not support the client's completion of the program;
  - **4**. The person was abused, neglected or sexually exploited by the client;
  - **5**. The person has the following qualities that would make it difficult for the person to function effectively as a chaperone:
    - a. Cognitive or intellectual impairments;
    - **b.**Mental health issues;
    - c. Current substance abuse problems; or
    - **d.**Health or physical limitations.
  - **6.** The CCM denies the preliminary or subsequent request for the potential chaperone.
- **B.** The Case Manager shall inform the client and individual of the reason if the Treatment Team denies the person as a chaperone. If the reasons are due to qualities listed in IV.A.4-5, the Case Manager shall use discretion when providing the reason. The Treatment Team shall document in the case management automated system the reason for the denial within two (2) working days. If the person remediates the reason(s) for denial, they may be reconsidered for approval.

#### V. Process for Approving a Chaperone

- **A.** If the Treatment Team agrees the person meets the qualifications to be a chaperone, the Case Manager shall complete Section A of the Chaperone Information form (TCCO-08-16) and submit it with a copy of their current driver's license to the CCM within five (5) working days of a potential chaperone meeting with the Treatment Provider.
- **B.** The CCM shall review the TCCO-08-16 form within three (3) working days to determine if the potential chaperone may proceed with the fingerprinting process. The CCM shall complete Section B of the form and provide a copy to the Case Manager and the TCCO Executive Assistant. The Case Manager shall scan the TCCO-08-16 into the case management automated system within two (2) working days of receipt.
- C. If approved by the CCM, the Case Manager shall inform the individual to contact the TCCO Executive Assistant via email to schedule him/her for a fingerprint criminal history background check.

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- **D.** After the criminal history background check results have been received, the CCM shall complete Section C of the TCCO-08-16 form and provide it to the Case Manager within three (3) working days of receipt.
- **E.** If the CCM indicates the person may proceed, the Case Manager shall coordinate with the Treatment Provider regarding the chaperone training.
- **F.** Once the person has completed chaperone training, the Case Manager and Treatment Provider shall determine if the person is an appropriate chaperone.
- **G.** Within five (5) calendar days of determining the person is an appropriate chaperone, the Case Manager shall complete section D on the TCCO-08-16 form and submit it to the CCM.
- **H.** Once the Treatment Team has approved the client for activities with the chaperone, the Case Manager shall submit an updated TCCO-08-16 and scan into the case management automated system.
- **I.** The Case Manager shall ensure the chaperone submits to a criminal history annually. The chaperone shall contact the TCCO Executive Assistant to schedule an appointment for fingerprinting as per established procedures.
- **J.** If the annual criminal history background results indicate the person no longer meets the qualification, the CCM shall complete Section E of the TCCO-08-16 form within three (3) working days of receiving the results.
- **K.** At any time a chaperone no longer meets the qualifications, after consulting with the Treatment Provider, the Case Manager shall complete Section E of the TCCO-08-16 form, and submit it to CCM and inform the client and chaperone that the chaperone approval has been suspended.

## VI. Chaperone Training

- **A.** After the Treatment Team has selected a qualified person, they may attend the next scheduled chaperone training.
- **B**. The Treatment Provider may conduct chaperone training on an individual basis i.e., one on one or in a group setting i.e., train several chaperones at one time.
- **C.** The training shall be a minimum of seven (7) hours and each lesson in the chaperone psychoeducational training material shall be discussed.
- **D.** Persons who complete the psychoeducational training may be allowed to continue the chaperone process by attending a session with the Treatment Provider and the client, in which the client presents the chaperone contract.
- **E.** After the person(s) has completed the psychoeducational training and participated in all sessions in which the chaperone contract was presented, the Treatment Team shall determine if the person can begin chaperone activities.

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**F.** Treatment Providers shall be responsible for collecting the Chaperone Contract Logs after each chaperoned activity.

# VII. Criminal History Background Fingerprint Procedures for Persons Residing Outside of Texas

- **A.** Potential chaperones who live outside of Texas may go to the following website: <a href="https://www.fbi.gov/about-us/cjis/identity-history-summary-checks">https://www.fbi.gov/about-us/cjis/identity-history-summary-checks</a>; which explains the process for obtaining fingerprints with the Federal Bureau of Investigation (FBI). The following website lists companies that contract with the FBI to conduct fingerprints: <a href="https://www.fbi.gov/about-us/cjis/identity-history-summary-checks/list-of-fbi-approved-channelers">https://www.fbi.gov/about-us/cjis/identity-history-summary-checks/list-of-fbi-approved-channelers</a>. An Originating Identification (ORI) number is not needed.
- **B**. Once the fingerprint process is done, the person shall mail the results to the Texas Civil Commitment Office to the address noted below. The correspondence shall clearly identify the client they want to chaperone.

Texas Civil Commitment Office 4616 West Howard Lane, Building 2, Suite 350 Austin, TX 78728

SIGNATURE ON FILE

Marsha McLane Executive Director

#### Attachments

- Collateral Contact Questionnaire form (TCCO-14-17)
- Request for Chaperone Form (TCCO-07-16)
- Chaperone Information (TCCO-08-16)

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