VERMONT DEPARTMENT OF CORRECTIONS STRATEGIC PLAN

Roadmap to 2030:
Mission-focused, values-driven

Message From the Commissioner:

Last year, the Department redesigned its Vision, Mission, and Values statements for the first time in over 30 years to better reflect the present-day practices of the Department and encompass all that we set out to do in service to Vermont's communities.

But without a roadmap, we will fail to fully realize our collective vision. For the first time in recent history, the Department now has that roadmap; a strategic plan to position our Department as a corrections system for our time and for the future.

The 2024-2030 Strategic Plan was created with statewide engagement from staff in facilities, field sites, and the central office. Centered around four key priorities, the plan identifies what we envision for Vermont's correctional system in five, 10, even 20 years, and how we can achieve this vision through these priorities.

The plan centers four key areas the Department must prioritize to keep Vermont's correctional system moving forward and serving as a model for the rest of the nation. The plan recognizes that Staff & Staffing are the bedrock of daily operations and crucial to any progressive innovation. It identifies Health & Wellness as critical to the success and wellbeing of the population we serve. It acknowledges the importance of embedding Diversity, Equity, and Inclusion in all that we do, and highlights the intent to evaluate and evolve practices to foster a culture of continuous Modernization.

The Strategic Plan will be central to our operations in the coming years as we embed these four priorities in all that we do. Thank you for your undying commitment to improve our system for our staff and those in our care. Our Department, as one team, is proudly leading our system and the nation into the future.

Nicholas J. Deml
Commissioner

Vision:

We create safety and equity by seeing potential, supporting change, and serving communities.

Mission:

Leads through innovation.

Supports staff wellness.

Creates rewarding career opportunities.

Ensures our facilities and field offices are safe, secure, and healthy.

Provides justice-involved individuals with opportunities for self-improvement.

Cultivates meaningful partnerships.

Advances restorative justice practices.

Values:

Accountability: We, individually and collectively, act in accordance with our mission and values in service to our vision.

Collaboration: We succeed when we have diverse and equitable partnerships that include our communities and the people in our care and custody.

Compassion: We treat everyone with respect and dignity and respond empathetically to people's lived experiences.

Equity: We address systemic barriers that hinder opportunity and use fair and impartial decision-making.

Innovation: We use evolving research, data analysis, and expertise from diverse communities to identify, develop, and implement effective practices.

Integrity: We practice our values in an honest and transparent way.

Safety: We create an equitable culture of physical, emotional, and material wholeness.

Strategic Initiatives:

STAFF & STAFFING

The corrections profession is at a turning point. Amidst critical staffing shortages across the nation's corrections agencies, Vermont has made great strides in driving down vacancy rates and improving the staff experience. But we still have a long way to go as we reimagine the role of the corrections professional and invest in the system's greatest asset, our staff.

Through the Staff & Staffing initiative, we will build a sustainable correctional workforce that invests in professional growth and staff wellbeing.

HEALTH & WELLNESS

Health is foundational to an individual's success both in custody and in the community. But health is more than simply the provision of medical care – mental health, sleep, nutrition, and physical activity also play critical roles in an individual's rehabilitation and reentry.

Through the Health & Wellness initiative, we will achieve a holistic health and wellness system that improves outcomes for incarcerated and supervised individuals.

DIVERSITY, EQUITY, AND INCLUSION TO ENSURE A JUST SYSTEM

To operate a just system means to interact with all individuals with dignity and respect, regardless of identity or background. As administrators of a historically inequitable system, each of us has the responsibility and opportunity to change culture and policy through our work.

Through the JEDI priority, we will advance diverse, equitable, and inclusive practices into all that we do to achieve a just corrections system.

MODERNIZATION

While our society continues to evolve and introduce new philosophies and technologies at an astounding rate, many of the nation's correctional systems reflect a model of the past. It is critical that we continue to evaluate processes to create and evolve with modern best practices that best serve our state and our staff.

Through the Modernization priority, we will design and deploy the nation's leading corrections system by modernizing systems, structures, technologies, and processes.

Plan Glossary:

Strategic Priority
The Strategic Priorities represent the four key target areas of the plan to drive the Department's work in achieving our collective Vision, Mission, and Values.

Goal
The goals display the target outcomes of the plan related to their respective Strategic Priority. Simply put, the goals represent the final result of the objectives if they are implemented successfully.

Objective
Each goal has several objectives to map out how to achieve the goal. These may take the form of new projects and initiatives, or they may set out to evaluate existing processes and remove practices that no longer serve us.

Key Performance Indicator
Key Performance Indicators (KPI) are the measure of success for each objective. If we achieve our goals and objectives, the KPIs will validate our accomplishments or identify areas that need additional attention.

STAFF & STAFFING

Staff & Staffing:

Goal 1
The Department embraces and supports the full spectrum of individual experience and identity to empower staff.

Objective 1
Establish a transparent feedback system to continuously assess and improve our culture of respect, understanding, and inclusivity for every person.

A note on intent: This system will include clear, detailed communication on the feedback process, how decisions are made, and the ways feedback contributes to actionable improvements.

Key Performance Indicators
- Participation in the exit survey among employees leaving the Department (higher is better).
- Staff survey responses reflect an increase in positive workplace experiences (DOC All Staff Survey, Prison Research Innovation Network (PRIN) surveys, Department of Human Resources surveys).

Objective 2
Develop and maintain a personnel reporting system that aligns with existing human resources processes, and provide training to staff for proficiency on this new system.

A note on intent: This ensures safe expression of concerns, emphasizing confidentiality, constructive resolution, and transparent communication of the process.

Key Performance Indicators
- Reporting mechanisms developed and implemented.
- Number of staff trained on new reporting mechanism process.

Objective 3
Develop and implement trainings for staff to enhance appreciation and understanding of individual differences and experiences.

Key Performance Indicators
- Training structure developed and implemented (add evidence based).
- Number of staff trained.
- Staff survey responses reflect increased feelings of inclusion and belonging.
- Stay and Exit interviews reflect less negative workplace experiences on the basis of their identity.

Goal 2
By 2030, staffing levels and staff retention are optimal and sustainable.

Objective 1
Determine the appropriate staffing levels required for facilities.

A note on intent: Determinations will be data-driven to create a modern and sustainable staffing model that ensures efficient processes and safe operations.

Key Performance Indicators
- Gaps reduced between current staffing levels and target staffing levels.

Objective 2
Identify and address understaffing problems.

Key Performance Indicators
- Stability index of staffing levels are above facility's security threshold.
- Vacancy rates (lower is better).

Objective 3
Evaluate and improve staff on-boarding and retention processes.

Key Performance Indicators
- Vacancy rates (lower is better).
- Hiring policy is complete and implemented.
- Improvement in retention rates for targeted recruitment demographics.
- Consistent utilization of stay and exit interviews.

Objective 4
Regularly review and adjust compensation packages to remain competitive in the job market and attract and retain experienced staff.

Key Performance Indicators
- Compensation is commensurate or higher than other state's corrections agencies.
- Vacancy rates (lower is better).

Goal 3
Roles and processes are optimized to enhance staff engagement and operational efficiency.

Objective 1
Redefine the role of a Correctional Officer, placing greater emphasis on fostering rehabilitation and successful reintegration.

Key Performance Indicators
- Percentage of Correctional Officer work hours spent on rehabilitative work (higher is better).
- Role of Correctional Officer is clearly defined and updated.
- Reduction in grievances, disciplinary reports, segregation, and sick slips.
- Recidivism rates (lower is better).

Objective 2
Involve staff in decision-making processes and create additional avenues for staff to provide feedback.

Key Performance Indicators
- Decreased staff feedback highlighting specific areas of concern.
- Increased participation of line staff in work groups.
- Staff survey responses indicate staff feel valued and that decision-making is fair and transparent.

Objective 3
Streamline operational processes and eliminate redundancies.

Key Performance Indicators
- Number of processes optimized, streamlined, and/or eliminated (higher is better).

Goal 4
Opportunities for professional development and career growth are offered through a fair and transparent system.

Objective 1
Implement a comprehensive performance management system that integrates checks and balances to mitigate bias and favoritism and ensures evaluation criteria are transparent and consistently applied.

Key Performance Indicators
- Internal candidate applications increase.
- Comprehensive performance management system has been implemented and staff are participating.
- Demographic data of internal promotions.
- Staff survey responses reflect staff feel promotions are fair.

Objective 2
Establish a comprehensive professional development program that ensures all employees have equal access to growth opportunities and clear pathways for advancement.

A note on intent: The program will use fair and multifaceted evaluation methods to accurately reflect each individual's abilities and growth potential. It will include transparent selection criteria, constructive feedback to those not selected, and offer insights into decision-making processes, along with guidance for future development.

Key Performance Indicators
- Reach a 90% completion rate across all facilities and offices in the consistent application of performance management and professional development programs, using a to-be-developed uniformity index.
- Professional development program is established and is being utilized across the Department.
- Career roadmaps are offered and utilized by supervisors.

Objective 3
Assess and evaluate current tools (such as Guardian) to identify strengths, weaknesses, and areas for improvement to support Objectives 1 and 2.

Key Performance Indicators
- Increased utilization of tools that are validated through the assessment process.
- Identify and utilize tools that fill in identified gaps.

Goal 5
The Department delivers opportunities and an environment that promotes staff health and wellness.

Objective 1

Conduct an assessment of employee well-being to identify specific needs across mental, emotional, physical, financial, social, work/life balance, and other dimensions of health.

A note on intent: The assessment will utilize surveys, focus groups, and existing data to gather evidence on how current programs are leveraged and areas where gaps may exist. This will inform the development of the next objectives, ensuring they align with the real and expressed needs of our workforce.

Key Performance Indicators

- Staff survey results reflect staff feel increasingly positive about work/life balance.
- Pilot programs targeting identified areas of need based on findings from the comprehensive well-being assessment are developed and implemented.

HEALTH & WELLNESS

Health & Wellness:

Goal 1
The Department prioritizes health and wellness as a fundamental obligation.

Objective 1
Restructure Division of Health and Wellness led by Executive-level member of the Department.

Key Performance Indicators
- Filled executive position for Executive Director of Health/Wellness/Engagement (yes/no).
- Number of activities overseen and implemented by new division (more is better).
- Health and Wellness Division is organized and populated by subject matter experts covering the full range of health and wellness needs of the population and increased engagement with external stakeholders.
- Fewer sick slips and emergency room trips.

Objective 2
New and increased staff trainings focused on the importance of health and wellness of individuals in custody.

Key Performance Indicators
- Number of health & wellness training hours at Vermont Correctional Academy (more is better).
- Percentage of staff trained in health & wellness.
- Staff survey data reflects greater staff understanding of health conditions that impact justice-involved individuals.
- Patient satisfaction survey results reflect higher satisfaction rates.
- Number of staff performance reviews/promotions that reflect care for health/wellness (more is better).

Objective 3
Reorganize Volunteer and Recreation Coordinator positions to focus on health, wellness, and engagement.

Key Performance Indicators
- Wellness activity offerings increase.
- Number of health opportunities offered per quarter/year (more is better).
- Percent of incarcerated participation in wellness activities led by positions (more is better).
- Turnover/retention rate of these positions (less is better).
- Percent of duties directly aligned with achieving health and wellness goals (higher is better).

Objective 4
Study opportunities to engage with and improve the health of individuals under Department supervision in Vermont's communities as well as those housed out of state.

Key Performance Indicators
- Number of supervised population enrolled in Medicaid through district offices (more is better).
- Number of claims billed to Medicaid (more is better).
- Number of actionable health and wellness interventions gathered through intake survey data.
- Number of documented referrals to community providers/clinical sites (more is better).

Goal 2
The Department engages Vermont's community members to support health and wellness outcomes for the population we serve.

Objective 1
Increased services and inclusion from larger health systems, entities, and advocates.

Key Performance Indicators
- Number of mentions of incarcerated Vermonters' health in legislative reports/strategic plans for agencies and departments (more is better).
- Number of health-related lawsuits from Prisoners' Rights Office (less is better).
- Number of Vermont Department of Health reports focused on incarcerated individuals (more is better).
- Inclusion of incarcerated individuals in Green Mountain Care Board Act 176 report (yes/no).

Objective 2
Create additional opportunities for Vermont's medical workforce to engage with the incarcerated population.

Key Performance Indicators
- Number of internships/shadows (more is better).
- Percent of the population with continuity of care plans (more is better).
- Number of referrals to community-based programs (eg. Turning Point) (more is better).

Objective 3
Develop and facilitate comprehensive reentry and release planning.

Key Performance Indicators
- Percent of reentering population with completed reentry checklist (IDs, transportation, bank accounts, appointments, etc.) (more is better).
- Number of referrals from correctional facilities to Community Justice Centers and Probation and Parole (more is better).
- Number of DOC and/or partner positions tasked with reentry coordination and release planning (more is better).
- Number of released individuals enrolled in preventative health activities (more is better).
- Percent of released individuals with necessary bridge prescription (more is better).
- Percent of reentering individuals with medical appointment scheduled in community (more is better).
- Number of deaths of individuals on supervision within 45 days of release (less is better).
- Percent of sentenced individuals with documented discharge summaries in Offender Management System (OMS) upon release (more is better).

Goal 3
Health and wellness systems and processes operate efficiently and effectively.

Objective 1
Survey existing digital infrastructure relating to tracking and monitoring of incarcerated individuals' health and, if applicable, implement new technological solutions.

Key Performance Indicators
- Audit of existing digital health infrastructure (yes/no).
- Number of new digital activities demoed (more is better).
- Percent of new technological utilization rates by caseworkers, health contractor staff, and Department health staff.
- Resolve times for sick slips (shorter is better).
- Percent of employees trained in new systems (more is better).
- Percent usage rate after 3/6/12 months (more is better).

Objective 2
Increased access to health resources, including health and wellness communication, services, and providers.

Key Performance Indicators
- 1115 Waiver/Medicaid funding for healthcare (more is better).
- Number of repeated sick slips (less is better).
- Number of grievances for lost/unresolved sick slips (less is better).
- Response rate for sick slips (shorter is better).
- Emergency Room visits (less is better).
- Patient satisfaction survey results.

Objective 3
Increased communication and improved engagement with patients and families.

Key Performance Indicators
- Number of tablet messages from Department leadership to incarcerated individuals (more is better).
- Patient satisfaction survey results.
- Number of properly completed Releases of Information (more is better).
- Medical-related outreach to Constituent Services (fewer is better).
- Number of grievances filed against health contractor (less is better).

Goal 4
The Department supports and fosters holistic wellness for those in its care and custody.

Objective 1
Develop and implement health programming focused on individual health and wellness, including individualized wellness plans for those in custody (especially those with documented chronic conditions).

Key Performance Indicators
- Number of documented individual wellness plans (more is better).
- Percent of individuals with chronic illnesses who have a documented individual wellness plan (more is better).
- Percent of incarcerated individuals with a specialized diet or exercise plan (more is better).
- Number of incarcerated individuals earning/qualifying for Department health incentives (more is better).
- Number of wellness education classes/activities offered (more is better).
- Percent participation in wellness education classes/activities (more is better).

Objective 2
Enhance activities fostering incarcerated individual sense of purpose, meaning, and hope, particularly for those serving longer sentences.

Key Performance Indicators
- Patient satisfaction and PRIN survey results.
- Participation in productive activities (wellness, artistic, vocational, facility jobs) (more is better).
- Self-harm/suicide incidents (less is better).
- Number of disciplinary reports for individuals participating in wellness activities (less is better).
- Number of train-the-trainers for incarcerated individuals (e.g., yoga teacher training) (more is better).
- Percent utilization of educational materials (more is better).

Objective 3
Develop comprehensive nutritional program with connections to local agriculture that delivers healthier food to correctional facilities.

Key Performance Indicators
- Increase in culinary education courses and individuals participating.
- Number of local food options served in cafeteria per day/week (more is better).
- Number of "healthy" commissary items offered (more is better).
- Number of community partners/local farms connected with/producing food for correctional facilities (more is better).

Objective 4
Develop capabilities to track and monitor the health of vulnerable/marginalized populations and implement targeted strategies to improve health outcomes.

Key Performance Indicators
- Number of Electronic Health Records/Offender Management System data reports that can pull targeted health data for discrete incarcerated populations.
- Number of longitudinal health outcomes (e.g., BP, A1C, Medication Assisted Treatment (MAT) provision) broken out by racial and ethnic group, gender identity and sexual orientation, etc.
- Number of individuals within certain populations who return (fewer is better) and their health upon readmission.
- Number of tablet-based surveys tracking incarcerated individual feedback, participation, activity, etc. (more is better).

Objective 5
Apply and model best practices in Substance Use Disorder (SUD) treatment for incarcerated people in Vermont.

Key Performance Indicators
- Number of Open Ears/Turning Point/Contractor counseling/Alcoholics Anonymous and Narcotics Anonymous sessions and percentage individuals on MAT receiving nonpharmacological interventions.
- Percent of incarcerated individuals receiving MAT services.
- Number diverted MAT meds and disciplinary reports relating to diversion.
- Medicaid dollars leveraged for new MAT meds (more is better).
- Percent of prescriptions filled at community pharmacies at release and percent picked up.
- Percent of incarcerated individuals leaving custody with Hub/provider appointments and percent who make appointments.
- Percent of Medicaid claims for those receiving SUD services in community.
- Number of volunteer/community services relating to recovery in facilities.
- Number of hours caseworkers spend connecting incarcerated individuals with community services.

DIVERSITY, EQUITY, & INCLUSION TO ENSURE A JUST SYSTEM

Diversity, Equity, and Inclusion for a Just System (JEDI):

Goal 1
Staff recognize and appreciate the daily impact of identity and why JEDI is vital to our success.

Objective 1
Map staff understanding of daily impact of identity, how it relates to the Department's work, and which internal processes and systems require integration of best practices (e.g., regularly updating demographic data in the Department's database management system).

Key Performance Indicators
- Survey responses reflect greater staff understanding of JEDI principles (the goal is to add survey questions to the all staff survey).
- Percent of demographic data updated in the Department's database management system per month (higher is better).
- Percent of completed trainings that integrate JEDI into everyday practices (e.g., booking, searches) (More is better).

*demographic data collected includes age, gender, race, and ethnicity.

Objective 2
Understand the disparities faced by those under the care, custody, and supervision of the Department.

Key Performance Indicators
- Increased reporting of disparities in demographic data and the frequency to which they are released (more is better).
- Create, curate, and regularly publish a Department identity report.
- Number of new data points collected and entered to capture the disparities in the system (more is better).

Objective 3
Provide trainings and educational opportunities to incarcerated and supervised individuals on bias, identity, and the importance of embedding JEDI principles into daily interactions.

Key Performance Indicators
- Number of JEDI-related materials provided to incarcerated individuals through tablet access, printed material, or other mechanisms (more is better).
- Decrease in identity-based incidents perpetuated by incarcerated individuals against staff or other incarcerated individuals.

Objective 4
Build trust and understanding amongst staff and the individuals served by the Department.

Key Performance Indicators
- Created and implemented incarcerated individual pulse surveys regarding how transparent they can be with staff or how much they trust staff. Surveys will address trust, transparency, and equitable treatment in relation to staff.
- Survey questions added to the existing staff survey that capture staff understanding of the experience of the people we serve.
- Demographic data regarding disciplinary reports and identity-based incidents.

Goal 2
The Department's systems, physical environment, policies, and procedures incorporate trauma-informed practices, JEDI principles, and the input of individuals with lived experience within the criminal justice system.

Objective 1
Consistent application of the policy equity tool.

Key Performance Indicators
- Percent of policies, procedures, and programming that are assessed under the Department's equity tool (higher is better; goal is 100%).
- Percent of policies, procedures, and programs changed because of the equity tool (higher is better).
- Use of equity tool demonstrates improvement over time.

Objective 2
Increase engagement with incarcerated individuals in the policy development process.

Key Performance Indicators
- Number of comments from incarcerated individuals on department policies and procedures (higher is better).
- Percent of incarcerated individuals engagement in policy comments (higher is better).

Goal 3
Supervision, programs, and intervention services reflect the diverse needs of the people we serve.

Objective 1
Programs and intervention services are JEDI responsive (e.g., implementation of the Women's Risk Needs Assessment (WRNA).

Key Performance Indicators
- Recidivism rates and returns to incarceration (lower is better).
- Percent of programming and intervention services that are JEDI responsive (Higher is better).
- Number of staff trained in WRNA (consistent is better).

Objective 2
Implement a grid-based disciplinary process within the facilities that is informed by restorative justice principles.

Key Performance Indicators
- Demographic disparities in disciplinary sanctions (lower is better).
- Demographic disparities in segregations (lower is better).
- Percent of uniformity in disciplinary processes across individuals and worksites (higher is better).

Objective 3
Interactions with incarcerated and supervised individuals are equitable and recognize cultural differences and backgrounds.

Key Performance Indicators
- Percent of programming and intervention services that are JEDI responsive (higher is better).
- Percent of completed staff trainings that integrate cultural awareness into everyday practices (e.g., searches, responses to violating behavior) (more is better).
- Percent of case staffing reviews that integrate JEDI principles and cultural awareness into everyday practices (more is better).

Goal 4

JEDI-responsive principles are embedded into all Department processes and retention efforts to equitably serve every staff member.

Objective 1

Empower and invest in the JEDI workgroup to support the implementation of Department-wide JEDI initiatives.

Key Performance Indicators

- Number of projects communicated to all staff (townhall presence, workforce messages) (more is better).
- Number of JEDI initiatives integrated into staff daily expectations (more is better).
- Staff participation in JEDI initiatives (more is better).

Objective 2

Collaborate with the Staff & Staffing Steering Committee to embed JEDI principles in the comprehensive performance management system (S&S Goal 4, Objective 1) and enhanced feedback system (S&S Goal 1, Objective 1).

Key Performance Indicators

- Number of collaboration meetings between Staff & Staffing Steering Committee and JEDI Steering Committee (more is better).
- Number of JEDI criteria successfully incorporated into performance management system and enhanced feedback system (more is better).
- Percent of system components that meet JEDI compliance standards (more is better).

Objective 3
Review all internal and external Department committees or workgroups that have a JEDI alignment and determine if, and where, there are gaps in identity-based services for staff.

Key Performance Indicators
- Percent of internal Department committees and workgroups that align with JEDI principles (higher is better).
- Number of redundant workgroups decreased.
- Number of of goals/projects/initiatives with JEDI alignment identified in internal and external Department committees and workgroups (any is good).

Objective 4
Enhance staff performance review process to include expectations around respectful, inclusive interactions with colleagues and the people we serve.

Key Performance Indicators
- Add and increase consistent JEDI language in performance review processes and documentation.
- All performance reviews include evaluation of the staff member's engagement with colleagues and those we serve – are they respectful and inclusive in their interactions?

MODERNIZATION

Modernization:

Goal 1
Vermont's correctional system utilizes modernized systems, structures, technologies, and processes.

Objective 1
Complete an evaluation of systems to eliminate redundancies and unnecessary processes, including security, casework, services delivered (e.g., RIS, volunteer, recreation, religious), field operations, work groups.

Key Performance Indicators
- Evaluations completed (higher is better).
- Workgroups reflect staff demographics.

Objective 2
Present and implement key findings (e.g., technology resources and enhanced processes) from the evaluations in Objective 1 to realize time savings and system improvement.

Key Performance Indicators
- Time spent on duplicative tasks within position, manual processes, data entry, extraction, and analysis (lower is better).
- Redundancies in positions across the Department (lower is better).
- Percent of tasks in line with Vision, Mission, Values and Strategic Plan (higher is better).
- Uniformity in protocols and procedures across positions and worksites, understanding the need for differences based on population needs (more is better).
- Staff survey results reflect positive staff opinions and experiences on work processes, comparing old and new processes.

Objective 3
Establish a periodic review cycle for new processes implemented in Objective 2 for continuous quality improvement.

Key Performance Indicators
- Key Performance Indicators from Objective 2 will assess if changes are needed.

Goal 2

The Department cultivates meaningful partnerships to advance community engagement and restorative practices.

Objective 1

Using participatory methods, develop a Department-wide process to identify and elevate partnerships that advance our Mission, Vision, Values to add pro-social engagement to supervised populations.

Key Performance Indicators

- Overlap in goals of partnerships and Department Vision, Mission, and Values and Strategic Plan (higher is better).
- Percent of population engaged in activities from partnerships (higher is better).
- Survey results from supervised populations: percent of needs met by partnerships (higher is better).

Objective 2

Establish a periodic review cycle for new processes implemented in Objective 1 for continuous quality improvement.

Key Performance Indicators

- Key Performance Indicators from Objective 1 will assess if changes are needed.

Goal 3

Modernization is embedded within each strategic initiative and advances innovative, efficient, evidence-based, and data-driven solutions Department-wide.

Objective 1

Collaborate with Staff & Staffing Workgroup to optimize roles and processes to enhance staff engagement and operational efficiency.

Key Performance Indicators

- Key Performance Indicators will match those listed in the Staff & Staffing Goals.

Objective 2

Collaborate with Health & Wellness Workgroup so systems and processes work better for people.

Key Performance Indicators

- Key Performance Indicators will match those listed in the Health & Wellness Goals.

Objective 3

Collaborate with Diversity, Equity, & Inclusion for a Just System Workgroup to ensure supervision, programs, and interventions reflect the diverse needs of the population being served.

Key Performance Indicators

- Key Performance Indicators will match those listed in the Diversity, Equity, & Inclusion for a Just System Goal.

Executing the Plan:

All staff members in the Department, from the Corrections Officer I to the Commissioner, share a collective responsibility to execute the plan. Without this crucial Department-wide engagement, we will fail to fully realize all that we have set out to do.

Though it is a significant undertaking, the goal is to decommission workload, to reevaluate existing processes and make our operations more efficient. To help ensure this, each initiative is assigned a Champion and Steering Committee to oversee the implementation of the initiative and coordinate efforts across sites.

The Steering Committees provide leadership, strategic direction, accountability, and transparency to lead the strategic plan. They make key decisions and engage with stakeholders to gather input and feedback. The Steering Committees continuously evaluate the plan's progress and communicate successes and ongoing initiatives with staff and external partners. Importantly, they will also engage with staff to ensure that all staff can see themselves in the plan and are provided with the necessary resources to succeed. The Steering Committee Champion serves as the key leader and advocate for the goal and conduit to core leadership. The Steering Committees will also evaluate the plan itself, and update this document as needed.

Al Cormier, Chief of Operations, will be overseeing the efforts of the Steering Committees.

Strategic initiative Chairs and Steering Committee members are below. Committee members are subject to change with retirements or position changes, and this document will be updated to reflect this.

Staff & Staffing Champion – Jim Rice, Executive Director of Office of Professional Standards & Compliance
Tanya Barber, Deputy Director of OPSC
Michael Koehler, Superintendent, NECC
Rich Eckrote, District Manager, Rutland P&P
Travis Denton, Facilities Division Director
Amy Jacobs, Superintendent, NSCF

Health & Wellness Champion – Aviva Tevah, Executive Director of Health, Wellness & Engagement
Greg Hale, Superintendent, NWSCF
Colleen Nilson, Chief of Mental Health
Jen Sprafke, PREA and Constituent Services Unit Director
Max Titus, Health & Wellness Division Director
Michaela Merrill, Superintendent, SSCF

Diversity, Equity, and Inclusion for a Just System Champion – Glenn Boyd, District Manager at Burlington Probation & Parole
Nick Fortier, Deputy Director of OPSC
Christine Cowart, Policy Development Unit Director
Desiree Crump, Assistant Superintendent, CRCF
Kathy Astemborski, Women's Services Division Director
Meredith Pelkey, Victim Services Unit Director

Modernization Champion – Isaac Dayno, Executive Director of Policy & Strategic Initiatives
Mike Sweeney, District Manager, Barre P&P
Chrysta Murray, Operational Systems Unit Director
Dale Crook, Innovation and Administrative Services Director
Josh Rutherford, Facility Operations Manager
Gary Marvel, Interim Field Services Division Director