



Arkansas Community Correction

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ADMINISTRATIVE DIRECTIVE: 18-19 Research and Program Evaluation

TO: Arkansas Community Correction Center Employees

FROM: Sheila Sharp, Director

SUPERSEDES: AD 13-10

APPROVED: Signature on File **EFFECTIVE:** May 24, 2018

- I. APPLICABILITY.** This policy applies to all Arkansas Community Correction (ACC) employees and people outside the agency who request and conduct research.
- II. POLICY.** The Arkansas Department of Community Correction supports programs of research, evaluation, statistics, audit, and planning, including studies and evaluation of the performance of various functions and activities of the department and studies addressing treatment of offenders and programs. Researchers must protect the privacy of individual employees, offenders, and other involved parties and their records. Researchers must comply with agency policy guidance and all legally acceptable practices concerning research activities. (4-ACRS-7D-12; 4-APPFS-3D-36, 3D-37)
- III. DEFINITION OF RECIDIVISM.** A criminal act that results in the rearrest, reconviction, or return to incarceration of a person with or without a new sentence during a three-year period following the person's release from custody. (Reference Arkansas Code 5-4-101; ACA 4-APPFS-3D-38)
- IV. GUIDELINES.**
 - A.** ACC Management will encourage, permit and use research and evaluation activities conducted by qualified individuals.
 - B.** All Employees will cooperate with approved research efforts and bring to the attention of management any research activity that may adversely affect offenders.

C. Research Plan Requirement. A research plan is required unless one of the following exceptions applies:

1. Employees Conducting Research. Research proposals are not required when employees perform research activities within the normal scope of their job duties.
2. Employees Conducting Program Evaluation. When employees collect data for ACC approved reports (such as the Residential Jurisdiction Population report) or approved business systems (such as eOMIS or AASIS), a research plan is not required.

D. Recidivism Studies and Reports. Researchers (including employees) conducting recidivism studies and reporting pursuant to Arkansas Code 5-4-101 or 16-1-101, must comply with reporting requirements specified in the law.

E. Research Plan Development / Implementation.

1. Researchers must work with the Chief Deputy Director and other designated staff to decide what questions should be addressed, the data to be gathered, and how the data will be presented. Researchers must submit proposed research plans for review and approval/disapproval of the ACC using Form 1, Research Approval Request Form, and submit that form to the Chief Deputy Director. Research plans must meet or exceed the review criteria outlined in agency policy. Changes to an approved research plan must be pre-approved by the ACC. This includes any research design modifications or changes in scope, data collected, or the tools used in the collection of data. Researchers must follow approved plans. The Chief Deputy Director will request review and approval by the appropriate Deputy Director or Assistant Director. The ACC will consider comments/approvals, negotiate appropriate revisions, and will be the final approval authority for the plan.
2. The Chief Deputy Director is responsible for establishing standards for evaluation, forms to be submitted with a request to conduct research, and a protocol for the review of proposals. Proposals submitted for review must be evaluated on the following:
 - a. Soundness of research design and methodology, including sampling procedures
 - b. Duplication with other projects currently proposed or underway
 - c. Relevance of the proposal in relation to the goals and objectives of the department
 - d. Amount and type of assistance required from departmental personnel. Under no condition will ACC approve research requests that pose a significant burden on employees or significant coststo ACC. .

- e. Impact on offenders/clients and whether or not offenders will be paid to participate in the study and the amount of that compensation.
- f. Security of information and data collection system, to include verification (accuracy), access to, and protection of data. Any costs associated with system access, modification or collection of data shall be the responsibility of the researcher.
- g. Written description of the method for dissemination of research findings.
- h. A restatement or inclusion by reference of the information in this policy regarding protection of offenders involved in research projects. An equivalent statement may be acceptable.
- i. A statement that results will be published in a manner that protects the privacy and confidentiality of offenders and staff. Researchers must include a signed copy of the Non-Disclosure agreement, Form 3, for all individuals who will have access to confidential data.
- j. For external researchers associated with an institution of higher education, any and all research tools and methodology must have been approved by that institution's Institutional Review Board (IRB) before any research is conducted and documentation of IRB approval must accompany the request to ACC.

F. Protection of Offenders Involved in Research Projects

1. Offender participation in research will be voluntary. Prior to participation in any research activity, researchers must obtain a completed and signed "Informed Consent to Participate in Research" form from each offender involved in the project. This form is not required when research is limited to review of offender records or general observations are made of offender activities where no record is made of a specific offender's activity.
2. ACC will not conduct nor allow others to conduct medical, pharmacological, cosmetic experiments. This does not preclude individual treatment of an offender based on his/her need for a specific medical procedure that is not generally available. (4-ACRS-4C-20)

G. Review, Approval, and Dissemination of Research Results

1. Prior to publication or dissemination, researchers must submit a draft of internal/external research results to the Chief Deputy Director and obtain the Director's approval.

2. The Chief Deputy Director will ensure that all research project results are reviewed by the appropriate Deputy Directors and others and will forward reviewed results to the director with a recommendation to approve, disapprove, or approve with specific revisions.
3. Researchers are responsible for the dissemination of their findings to the public and shall provide copies of their reports upon request to any person or entity requesting a copy.
4. Researchers must provide at least four copies of any publication derived from the research to ACC for retention and internal distribution.
5. Managers/Directors Use of Research Results. Managers and Deputy Directors must make appropriate use of research results and program evaluation data. Uses for such information include analyzing the department's present activities as a basis for decision making and policy development.

V. FORMS.

AD 18-19 Form 1, Research Approval Request
AD 18-19 Form 2, Informed Consent to Participate in Research
AD 18-19 Form 3, Non-Disclosure Agreement
AD 18-19 Form 4, ACC Internal Review Notice of Decision

**Arkansas Community Correction
RESEARCH APPROVAL REQUEST FORM**

I. Primary Investigator (person submitting this request)

Full Name

Organization

Phone

Work:

Home (OPTIONAL):

E-mail

Address

II. Title of Research Proposal:

III. Is this research required to satisfy an academic requirement (i.e., master thesis, doctoral dissertation)? Yes No

If YES, please provide the following information regarding your research advisor:

Name

Title

Educational Institution

Phone:

Work:

Home (OPTIONAL):

E-mail:

Address:

Are you an employee of the Arkansas Community Correction? Yes No

If yes, Agency/Department:

Position:

IV. BACKGROUND INFORMATION

Please list your qualifications to conduct the proposed research (e.g., previous research projects, academic background), or other related information that documents your qualifications. Attach curriculum vitae if available.

V. ADDITIONAL INVESTIGATOR(S) AND BACKGROUND INFORMATION

Please identify any additional individuals who will handle the data/information provided to you pursuant to this request (*this includes any persons who will have direct or indirect, initial or review, access to said data/information*):

NAME/TITLE	PHONE	E-MAIL
1.		
2.		
3.		

For certain types of information, it may be necessary for the Department to conduct a criminal history background check for any individual(s) who will be handling that information. Such background checks include, but are not limited to, ACIC, NCIC, and FBI records. If you are requesting criminal history data, specifically, you must also complete and include signed copies of ACC Form 3 – ‘Non-Disclosure and Release of Information’ for the Primary Investigator and all additional personnel who will handle the information provided by ACC.

VI. RESEARCH PROPOSAL (you may attach additional sheets as necessary)

A. Research Overview:

Please identify the specific topic, issue or problem under study, why it is important and describe the overall research approach. Please discuss: 1) the purpose of the research, 2) the specific research questions and hypotheses, and 3) briefly review previous research and theory on the topic and how your study relates to previous work.

VI. RESEARCH PROPOSAL (cont'd)

B. Research Design:

First, please describe in detail how the study will be conducted. This review must include a discussion of: 1) research subjects (e.g. inmates, staff), 2) the specific research methods to be employed, such as surveys, interviews, observation, etc. Please pay particular attention to sample selection and instrumentation (provide a copy of any instruments to be used), and 3) a brief review of proposed methods of data analysis and reporting.

Second, please provide a breakdown, by source (researcher vs. Department) of the costs/resources required to successfully conduct the proposed project.

Third, please outline a projected research time frame as well as any other pertinent information necessary to adequately describe the project.

VI. RESEARCH PROPOSAL (cont'd)

C. **Expected Outcomes:**

Please discuss the expected outcomes of your study, and how and by whom this research will be used. Additionally, please explain the anticipated benefits of the research to Arkansas Community Correction.

**Arkansas Community Correction
INFORMED CONSENT TO PARTICIPATE IN RESEARCH**

Arkansas Community Correction INFORMED CONSENT TO PARTICIPATE IN RESEARCH			
Title of Project:			
Primary Investigator			
Full Name: Organization: Phone: Email: Mailing Address:			
Project Start Date:		Expiration Date (if applicable):	
Purpose:			
Procedures:			
Benefits:			
Right to Withdraw			
Statement of Confidentiality: Any information obtained in connection with this research will be used in a manner that protects your privacy and maintains the confidentiality of your records in accordance with all applicable state and federal laws and ACC rules and regulations.			
THIS SECTION TO BE COMPLETED BY THE RESEARCH PARTICIPANT			
Participant's Consent: I have been satisfactorily informed of the above described research project and have read and understood the description provided herein. I understand that my participation in this research project is voluntary and I am free to stop participating at any time, without any consequences, even after signing this form.			
Participant Name (Print)	Participant Signature	Offender Number	Date Signed

**Arkansas Community Correction
NON-DISCLOSURE AGREEMENT**

This agreement is entered into between the Arkansas Community Correction (ACC), hereinafter referred to as the Agency, and:

(Printed Name of Researcher)

Herein after referred to as the Researcher, whereby ACC agrees to provide information or access to information for research, evaluation, or statistical activities to the researcher.

1. The Researcher will not use Agency information to the detriment of the Agency or the subjects of the research, or for any purpose other than those stated in the research plan, and will abide by the confidentiality, and security, and dissemination provisions of the Agency.
2. The Agency will provide access to offender records or other information as requested in the approved research request. The agency reserves the right to suspend immediately furnishing information under this agreement and to require the return of information already furnished when any rules, policy, procedure or law is violated or appears to be violated.
3. The Researcher will use secure destruction methods for any copies of source documents obtained when they are no longer needed for the purpose for which they were provided.
4. The Researcher will allow only the persons identified in the Research Request access to confidential Agency information and will not disseminate, further disclose, nor allow the persons listed to further disseminate or disclose the information.
5. The Researcher will implement procedures that will effectively protect Agency and offender information from unauthorized access, alteration, or destruction.
6. The Researcher will abide by the laws and regulations of this State, the agency, and the federal government and any present or future rules, policies, or procedures adopted by the same, to the extent they are applicable to information provided under this agreement. This includes complying with accepted professional and scientific ethics and issues of legal consent and release of information. The Researcher agrees to be subject to any civil or criminal penalties applicable to the use of confidential information accessed under this agreement under Arkansas or federal law.
7. If the agreement is to provide offender record information on a continuing basis, the Agency reserves the right to immediately suspend furnishing information under this agreement should any rule, policy, procedure, regulation, or law be violated or appear to the Agency to be violated.
8. The Researcher agrees to indemnify and save harmless the State of Arkansas, the Agency, other signatory agencies and their employees from and against any and all causes of actions, demands, suits, and other proceedings of whatsoever nature; against all liability to others, including any liabilities or damages by reason of or arising out of any files, arrest, or imprisonment or any cause of action whatsoever; and against any loss, cost, expense, and damage resulting there from, arising out of or involving any negligence on the part of Recipient in the exercise of enjoyment of this agreement.
9. The Agency or researcher may, upon written notice, terminate this agreement at any time.

AUTHORIZATION FOR RELEASE OF INFORMATION

- I authorize ACC to perform a criminal background check on me at the time of application and throughout the term of this agreement with ACC. Such criminal background checks include, but are not limited to ACIC, NCIC, and FBI records.
- I do not authorize ACC to perform a criminal background check on me.

Note: Refusal to authorize a criminal background check may result in the denial of access to certain protected classes of information. Similarly, granting authorization does not guarantee access to said information.

Researcher

ACC Authorized Representative

Name (Print)		Name (Print)	
Researcher Signature	Date Signed	Signature	Date Signed

ACC INTERNAL REVIEW NOTICE OF DECISION

This notice is to inform you of the results of the Arkansas Community Correction internal review of your proposed research project. If you have questions or comments, you may contact me via the email provided below. Please also see the following attached documents for additional information:

ACC Administrative Regulation 1.9 – Research and Program Evaluation
ACC Administrative Directive 13-10 – Research and Program Evaluation

ACC RESEARCH PROJECT NO:

ACC INTERNAL REVIEW TYPE: Expedited Full

RESEARCH APPLICANT(S):

PROJECT TITLE:

PROJECT TIME FRAME:

APPLICATION DATE:

INTERNAL REVIEW DECISION: Approved Revision Required Denied

INTERNAL REVIEW DECISION DATE:

REQUIRED ACTIONS (if applicable): None See Attachment

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COMMENTS (if applicable): None See Attachment

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FOR OFFICE USE ONLY	
Verified By: Research and Planning Administrator Arkansas Community Correction Cell Number:	Signature: Date:

Email:	
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