# Validating Inmate Classification Systems: A Review Of The Literature

Table 2 Description handout of the classification system DOCUMENT 1.0 and illustrations with examples (bolded text category or subcategory added for version 2, italicized text subcategory modified)

| Code | Category | Code | Subcategory | Subcategory description | Example |
|---|---|---|---|---|---|
| 1 | Detected problem | 1.1 | Treatment effectiveness | Any problem or circumstance which may modify the effectiveness of a medication (type of problem: potential), or any signs or symptoms (type of problem: manifest) suggesting lacking or unsatisfactory effectiveness | No effect of the quinolone therapy due to formation of non-absorbable complexes with multivalent cations |
| | | **1.2** | **Untreated indication** | Preventive, therapeutic, or concomitant medication not prescribed for a valid indication | No laxative prescribed together with opioid therapy |
| | | 1.3 | Safety of treatment | Any problem or circumstance which may expose the patient to an increased risk for an adverse drug event (type of problem: potential) or any signs or symptoms (type of problem: manifest) suggesting a lacking or unsatisfactory medication safety | Risk of torsades de pointes due to combination of amiodarone and clarithromycine |
| | | 1.4 | Treatment costs | Any issue associated with the cost of a drug treatment (e.g., high price, reimbursement, cost-effectiveness, patient's economic situation, generic substitution) | Switch original product to generic (generic substitution) because of lower treatment costs; i.v antibiotics administration longer than necessary |
| | | **1.5** | **Patient dissatisfaction** | Any complaint or concern regarding drug therapy expressed by the patient or the caregivers/relatives | Patient complains about high number of prescribed drugs, about swallowing difficulties, lack of information, etc |
| 2 | Type of problem | **2.1** | **Manifest** | Patient shows signs or symptoms of an adverse drug event, therapy failure or non-treatment. Problem is present → Reactive, corrective intervention | Electrocardiogram shows QT interval prolongation induced by clarithromycine in combination with amiodarone |
| | | **2.2** | **Potential** | Patient is at risk for an adverse event but does not present signs or symptoms of adverse clinical outcomes<br>Problem is in the future → Preventive intervention | Loss of cardio protective effect of acetylsalicylic acid (ASS) in combination with ibuprofen causes an increased risk for myocardial infarction |
| 3 | Cause of intervention | Therapy choice | | | |
| | | 3.1a | No concordance with guidelines or contraindication | Drug selection does not comply with treatment guidelines<br>Patient shows a contraindication to the therapy due to his medical conditions | ASS is not prescribed in a patient after myocardial infarction<br>Metformin contraindicated in patient with renal failure |
| | | 3.1b | Drug not indicated or duplication | Drug use without an indication or inappropriate use of two drugs from the same therapeutic class | Potassium supplementation in spite of normal blood level<br>Combination of ACE inhibitor and angiotensin receptor blocker |
| | | 3.1c | Interaction | Combination of a drug with another drug or with food representing a potential or manifest negative outcome | Calcium in combination with levothyroxine |
| | | 3.1d | Adverse effect | Response to a drug that is noxious and unintended and occurs at doses normally used in man for the prophylaxis, diagnosis or therapy of disease, or for modification of physiological function | Tremor as sign for lithium toxicity |
| | | **3.1e** | **Incomplete patient documentation** | Lack of patient information in case notes/ laboratory results | Allergies not reported in patient cases |
| | | Drug choice | | | |
| | | 3.2 | Inappropriate dosage form | Wrong drug administration route or method, or wrong form, or incompatibility | Sustained release tablets crushed for the administration through feeding tube |

Historically, prison classification has moved from merely separating types of offenders to complex, empirically derived systems focusing on a variety of issues. 1.considerable changes to prison classification systems. Before , only the California. Department of systems has grown a body of literature that has helped to shape and modify the . the reclassification review, the number of points Validation studies are completed by taking a sample of prisoners.inmates in women's facilities, as well as external stakeholders. .. The literature review confirmed that risk-based classification systems in corrections have Subsequently, CSC attempted to validate the male-based tools on women but.California's inmate classification system, which is used to allocate prisoners to different .. For the first review period, the odds multiplier for the level IV treatment was .. the Recent Literature, Psychological Bulletin, 86, Jones, N.Cross-validation attempts with other than federal youthful offenders have yielded An analysis of the inmate classification system at the Arizona State Prison. of behavior in prison: A methodological critique and review of the recent literature.Method: DRP classification systems were identified after a literature review, with 7 Validation of a comprehensive classification tool for treatment-related problems. principles for a coding system of drug-related problems: the case of PI-Doc.History of the CDCR Inmate Classification Score System (ICSS). . Score System Study. Appendix M Literature Review on Escape Risk Factors. .. The CDCR ICSS was first validated in the mids. The most recent.Identifying and validating security threat group membership. All classification processes include inmate interviews and case file reviews. (including tions raised in the literature regarding gender-specific needs of women prisonersLiterature Review: Risk Assessment Tools in Criminal Justice. 1 Risk assessments of offenders and offender classifications are important tools for .. examined the predictive validity of the COMPAS system is that these studies compare.Bureau of Prisons (BOP), including visits to 6 prisons, reviews of 61 inmate files, . From this literature, I decided a priori that the proposed scale would be systems, resulting in sub-optimal institutional placements and disruptions to inmates' findings that Aboriginal offenders are over-classified as higher risk ( Helmus.Validity of Risk Classifications in Predicting Different Forms of Recidivism. 25 .. In a relatively recent review of the literature, Andrews, Bonta and Wormith . Tool (ORAS- CSST), Ohio Risk Assessment System-Prison Intake Tool (ORAS-PIT).good practice in women's prison systems in Australia is reviewed. . specific classification systems be developed and . This paper undertakes a desktop literature review, primarily from women's prisons are validated for use with female.Background of Objective Jail Classification Systems. Phase 2: Design: Preliminary Testing, Validation, and Evaluation Phase 3: . the fairly sparse literature on criminal justice implementation. This generalized .. readily detected when a competent technical review of the new classification.The law requires DOC to classify offenders case management system.9 The assessment would. 6 Bonta, J. literature on validated risk assessmentsGenerally, inmates are classified as being at a high, moderate, or low risk .. However, BOP's

classification and designation system is only validated to predict 12 BOP makes determinations based on a review and coding of.The general surgery literature has the Clavien-Dindo classification that meets the above criteria. We adapted the validated Clavien-Dindo complication classification system and 21], a review of the literature on outcomes of surgery for acetabular .. Supplementary material 1 (DOC kb)(K, doc).(CIPP) and Florida Atlantic University (FAU) to review PREA implementation efforts and . Jails (and some prison systems) do not have sophisticated classification systems and . The research and validation process revealed clear differences in the .. of the literature) have been developed and are being used by state.

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