



## SCOTT COUNTY COMMUNITY CORRECTIONS

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Community Corrections Director

### SAFE STREETS RESTORED -Program Information -

**GOAL:** The goal of the Safe Streets Restored program is to ensure public safety and reduce recidivism through appropriate programming and treatment of offenders. Case planning with the offender will be focused around issues involving chemical dependency, employment, education, family, peers, and mental health. This repeat offender program was created from MN Statute 169A.74.

#### **REFERRAL PROCESS**

- Resident of Scott County
- Felony DWI's
- Gross Misd DWI's – 3 in 10 years
- Offenders with 8 or more lifetime DWI's

#### **SUPERVISION CONDITIONS**

1. Jail time- as ordered by the Court.
2. 30 days of Electronic Home Monitoring with alcohol monitoring.
3. 60 days of an Alcohol Monitoring Device.
4. Chemical Use Assessment and follow recommendations.
5. No use of any alcohol or non-prescribed drugs.
6. Submit to random testing as directed by Officer.
7. Drivers Impact Panel.
8. Cognitive Skills Program.
9. Long Term Monitoring per MN Statute 169A.277.
10. No driving without a valid license or insurance.
11. DNA- if applicable

#### **PROGRAM PHASES** (see reverse side for details)

- Phase 1: 0 – 6 months
- Phase 2: 6 - 12 months
- Phase 3: 12 - 18 months

\*The length of time is approximate and is based on each offenders needs and progress.

#### **PROGRAM COMPLETION**

As conditions of supervision are completed and the offender shows positive progress in case planning, they must apply to move between PHASES and for graduation. Following successful completion of the program and graduation, the offender will remain subject to the ongoing conditions of probation.

#### **SANCTIONS FOR NON-COMPLIANCE**

There are a number of sanctions which can be levied against the offender, either through the probation officer or through a formal violation hearing.

Possible sanctions may include:

- Community work Service or Sentence to Service
- Additional EHM and/or AMD
- Revocation of Probation
- Reset to previous PHASES
- Increased urinalysis or breath testing
- Referral to a new treatment program
- Revocation of probation/supervised release
- Local jail time
- Executed jail or prison sentence

## Safe Streets Restored Supervision PHASES

### **PHASE 1 (0-6 months)**

- \*Meet with probation officer at least twice per month.
  - \*Complete a Chemical Use Assessment.
  - \*Begin treatment.
  - \*A case plan will be developed within 120 days.
  - \*Comply with curfew from 10:00pm to 7:00am.  
- 7 days a week, unless otherwise approved.
  - \*Complete 30 days of EHM with AMD.
  - \*Complete 60 days of AMD.
  - \*Sign releases of information for Ignition Interlock records.
  - \*Show positive progress towards case plan goals.
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- \*Apply to move to PHASE 2 (see below).
  - \*Offender may request a reduction in UA testing in PHASE 2.

### **PHASE 3 (12-18 months)**

- \*Meet with probation officer at least once every eight weeks.
  - \*Curfew only applies to overnight traveling.
  - \*Show positive progress towards case plan goals.
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- \*Apply for graduation from the Safe Streets Program.
  - \*UA testing reduced to the lowest level.

### **PHASE 2 (6-12 months)**

- \*Meet with probation officer at least once per month.
  - \*Complete Drivers Impact Panel.
  - \*Complete Cognitive Skills Program.
  - \*Successfully complete treatment.
  - \*Comply with curfew from 10:00pm-7:00am.  
-Thurs-Sunday's unless otherwise approved.
  - \*Show positive progress towards case plan goals.
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- \*Apply to move to PHASE 3.
  - \*Offender may request a reduction in UA testing in Phase 3.

### **Post Safe Streets graduation**

- \* Once all conditions of supervision are completed and there has been a reduction in the risk assessment, the offender's supervision will be decreased.
- \*Urine and breath testing will be reviewed on a case by case basis.

## Application Process for moving PHASES

\*After the offender feels that all conditions have been met and they have shown positive progress towards the agreed upon case plan goals, they may submit a request to move to the subsequent PHASE.

The request should include the following:

\_\_\_\_\_ A description of their success and struggles during that PHASE of supervision.

\_\_\_\_\_ Two letters of support from people close to the offender supporting why they should move to the next PHASE/graduation.

\_\_\_\_\_  
Offender Signature

\_\_\_\_\_  
Date