Rev: 3/21/2018

PROCEDURES FOR COMMUNITY CORRECTIONS REFERRAL.

1 Complete referral cover page.

Only complete the referral cover page titled *El Paso County Community Corrections Diversion Referral*. Avoid terms such as "see attached" or "see PSIR."

2 Submit referral documentation.

The Community Corrections Board (CCB) has determined that the following information will be needed for both El Paso County service providers and the CCB to make decisions:

a) Completed referral cover page from Step 1
b) LSI (Level of Supervision Inventory)
c) *Pre-sentence Investigation Report (PSIR)* for current/past offense(s) **
d) Psychosexual for Sex Offender referrals (Required)
e) *Probable Cause Affidavit* ***(single sided)***
f) Probation *Complaint and Report* form
g) *Summary of Supervision* (of time while offenders was on probation or under ISP supervision)
h) Disposition on any PENDING felony cases as soon as available
i) *Minute Order* reflecting probation revocation (if referral is a revocation)
j) *Minute Order* reflecting community corrections screen
k) *Minute Order* reflecting a 35B Reconsideration referral
l) *Minute Order* reflecting plea agreement or documentation of plea agreement
m) Community Corrections Board funding approval for out-of-district referrals by any jurisdiction other than the 4th Judicial District

**if a PSIR was not ordered, please submit a Summary of Supervision that outlines defendants mental or physical health issues, special accommodations needed, and criminal history (all felony convictions and misdemeanor convictions involving violence).

3 Referral documentation submittal.

Email all referral documentation from Steps 1 and 2 to Maurice Motley, Community Corrections Specialist. Referrals can also be placed in the Community Corrections box at the Probation Department.
Email: megannelius@elpasoco.com
Fax: 719-520-7972

4 Notice of referral results.

a) When a decision has been made by the service providers, the sentencing court, the referral agency, and the defense counsel will be notified immediately.
b) Referrals that fit one or more of the below criteria require full review by the CCB before notification of referral results are sent. The CCB screens referrals every Wednesday. Notification of results will be sent by close of business on the day of the review.
    i) Criteria: Sex offenders, out-of-district referrals, violent referrals (murder, robbery, kidnapping, 1st/2nd degree assault, menacing, 1st degree burglary, 1st degree arson, or weapons involved case), any crime against an at-risk person, possession or distribution of at least 25grams or 1 ounce of scheduled 1 or schedule 2 controlled substance

Any missing or unreadable paperwork may result in your packet being returned for clarification.

El Paso County Community Corrections Diversion Referral

DELIVERY 2880 International Circle, Colo Spgs, CO 80910
TELE (719) 520-6795 FAX (719) 520-7972

Revised: 1/3/18

Date	

Referral Contact:	Name:	
	☐ Probation ☐ Public Defender ☐ Attorney ☐ Other	
Phone #		Email:

Referral Type (Check applicable)	☐ Direct Sentence	☐ Revocation	☐ Other:
	☐ Condition of Probation	☐ 35B Reconsideration	

Defendant:								
Last known address:				Phone number:				
SSN#				SID#				
DOB:		Sex:		Race:		In Custody:	☐ CJC	☐ Other

Sentencing Date:	

DNA Collection Needed?	☐ Yes- Arrest date is prior to 9/30/10	☐ No – Arrest is after 9/30/10

Defense Counsel Name & Contact Phone:	

Current Case #	Felony Class	Convicted Charge	Judicial District	Judge

Are there any pending cases? ☐ yes ☐ no case(s): _____
Is the offender able to work? ☐ yes ☐ no
*RDDT Screen ☐ yes ☐ no

Additional Information:

*Residential Dual Diagnosis Treatment (RDDT) is for co-occurring mental health and substance abuse treatment