



IOWA | Department of Corrections

Iowa Department of Corrections Strategic Plan

July 1, 2026 - June 30, 2031

MESSAGE FROM THE DIRECTOR



As we launch this comprehensive, five-year strategic plan (July 1, 2026 – June 30, 2031), we affirm the Iowa Department of Corrections' commitment to fostering a safe, rehabilitative, and supportive environment.

Our approach remains inherently collaborative, data-driven, and responsive. The creation of this plan has been shaped by the essential insights and experiences of our staff, community partners, and experts, ensuring our strategies align with our mission to create opportunities for safer communities and our vision of an Iowa with no more victims.

That commitment is reflected in our outcomes. In FY2025, 67.2% of individuals released three years earlier successfully reentered the community and did not return to prison. This Successful Reentry Rate represents more than a statistic. It reflects lives stabilized, families strengthened, and communities made safer. At the same time, it reminds us there is still work to do, and this plan is designed to build on that progress.

This ambitious initiative is strategically structured around three essential, overarching priorities, which establish clear focus and direction across all departmental functions:

STRATEGIC PRIORITY 1: Safety and Security – Establishing and maintaining a culture of security that protects staff, individuals in our care, and the communities we serve.

STRATEGIC PRIORITY 2: Reentry, Treatment, and Programming – Expanding evidence-based opportunities for rehabilitation to ensure successful reintegration and reduced recidivism.

STRATEGIC PRIORITY 3: Culture and Wellness – Fostering a professional, unified organizational culture supported by comprehensive wellness initiatives and dedicated support for all team members.

Furthermore, we will intentionally institutionalize our five core values—Flexibility, Innovation, Courage, Trust, and Professional Development—to equip our staff with the mindset and professional resilience needed for success. This Strategic Plan is a living document, and we are committed to ongoing engagement through meetings, forums, and feedback opportunities.

A handwritten signature in black ink, appearing to read 'B/S', with a long horizontal stroke extending to the right.

Beth Skinner
Director, Department of Corrections

MISSION, VISION, AND CORE VALUES

IDOC Mission: Creating opportunities for safer communities.

IDOC Vision: An Iowa with no more victims.

IDOC Core Values:

The following five core values represent the essential traits of an organizational culture required to successfully implement and sustain strategic change. By intentionally institutionalizing these characteristics, DOC staff will be fully equipped with the mindsets, practices, and professional resilience needed to achieve the department's vision for the future.

- **Flexibility** is defined as maintaining organizational agility by demonstrating the ability to adapt effectively and rapidly to evolving operational circumstances; this includes a commitment to an open-minded approach for implementing necessary modifications and a display of resilience to sustain performance when faced with complex challenges.
- **Innovation** means cultivating an environment that encourages strategic, forward-thinking solutions that move beyond conventional methods; this requires dedicating resources to implementing creative, evidence-based solutions for systemic problems and promoting calculated experimentation to drive operational efficiency.
- **Courage** is the commitment to act with moral and professional fortitude when navigating complex, adverse, and uncertain situations, which includes embracing and upholding accountability for our decisions at all levels and fostering a culture that views mistakes as critical learning opportunities for continuous improvement.
- **Trust** is established through transparent decision-making processes and authentic, open communication across the department; this is supported by ensuring a system of multi-directional feedback where staff feel safe and empowered, and by maintaining organizational integrity through consistently adhering to stated commitments.
- **Professional Development** prioritizes the ongoing growth of our staff by formally recognizing and investing in opportunities for continuous learning, implementing a structured system of regular performance and goal discussions to align individual contribution with strategic objectives, and utilizing unique, tailored development plans to guide and support the career trajectory of every member of the workforce.

EXECUTIVE SUMMARY

The Iowa Department of Corrections (IDOC) proudly introduces a comprehensive, five-year strategic plan (July 1, 2026 – June 30, 2031) designed to elevate the state's established correctional system into a national model of excellence. This ambitious and forward-focused initiative is strategically structured around three essential, overarching priorities and three corresponding areas for sustained organizational improvement. These foundational components are articulated with clear, actionable, and measurable metrics to ensure complete departmental alignment, thereby empowering all staff members to fully understand and contribute meaningfully to the achievement of the department's overarching strategic objectives.

The core objective of this strategic plan is to establish unequivocal focus and directional clarity across all departmental functions. Consequently, this document will serve as the definitive operational framework for delivering on the Department of Corrections' (DOC) mission and vision. The framework's implementation will be demonstrated through the following key strategic applications:

- **Strategic Initiative Development:** Driving the systematic development and rigorous implementation of new, data-informed initiatives that demonstrably strengthen the department's capacity to achieve its established objectives.
- **Operational Alignment:** Explicitly connecting and communicating how the daily operational tasks and efforts of every team member contribute directly and measurably to the achievement of the three core strategic priorities.
- **Integrated Communication Strategy:** Ensuring that the strategic priorities are consistently and visibly reflected and embedded across all internal and external communication platforms and materials.
- **Cultural and Collaborative Guidance:** Utilizing the framework to guide all departmental collaboration, decision-making, and reinforcing a unified, professional organizational culture.

IDOC STRATEGIC PRIORITIES

The three strategic priorities that form the foundation of the department's plan are:

- **STRATEGIC PRIORITY 1: Safety and Security:** Establishing and maintaining a culture of security through advanced practices and systems that protect staff, individuals in our care, and the communities we serve.
- **STRATEGIC PRIORITY 2: Reentry, Treatment, and Programming:** Expanding evidence-based opportunities for rehabilitation, comprehensive treatment, and robust programming to ensure successful reintegration and reduced recidivism.
- **STRATEGIC PRIORITY 3: Culture and Wellness:** Fostering a professional, unified organizational culture supported by comprehensive wellness initiatives, development resources, and dedicated support for all team members.

The current sitting Governor sets priorities for their administration annually; therefore, this section will be updated accordingly following the Governor's State of the State Address throughout the life cycle of the strategic plan to ensure alignment.

The 3 Strategic Priorities are each tied to the Governor's priorities for 2026

- Security & Safety -Priority 6 (Preserving Public Safety)
 - Key performance indicator identified as, "Overcapacity of prison population" to measure overall prison population.
 - Key performance indicator identifies as, "Staff Vacancies" to measure staff numbers in Prison and Community Based Corrections.
- Reentry, Treatment & Programing – Priority 2 (Transforming Healthcare in Iowa), Priority 5 (Serving Iowans Who Served US) and Priority 6 (Preserving Public Safety)
 - Key performance indicator identified as, "Department of Corrections requests to release review to Board of Parole" to measure Prison release to community supervision.
- Culture and Wellness – Priority 5 (Serving Iowans Who Served Us)
 - Staff surveys to assess morale, job satisfaction, and perceptions of organizational culture
 - Hold quarterly activities at each location in CBC's and Institutions.

These three foundational components—**GOAL**, **Key Initiatives**, and **Measures of Success**—establish the definitive operational framework used to articulate and execute the strategies within this document. The **GOAL** defines the overarching objectives the department aims to achieve within each Strategic Priority area. The **Key Initiatives** then outline the specific, actionable steps and projects that will be undertaken to successfully reach those goals. Finally, the **Measures of Success** detail the clear, measurable metrics that will be used to rigorously track and evaluate progress toward goal achievement, ensuring complete departmental alignment and accountability throughout the five-year plan year over year (YOY).

STRATEGIC PRIORITY 1: Safety and Security

GOAL 1: Reduce Critical Incidents

Decrease the rate of critical security incidents (including assaults on staff, assaults on individuals in our care, and contraband infractions) through data-driven analysis and intervention.

Key Initiatives

- **Implement a Predictive Analytics and Early Warning System:** Develop and deploy a data-driven system to identify and flag individuals, housing units, and operational times at high risk for critical incidents, allowing for proactive, targeted intervention and resource deployment.
- **Standardize and Elevate De-escalation Training:** Mandate enhanced, scenario-based de-escalation and communication training for correctional staff, focusing on conflict resolution, behavioral health crisis response, and the principles of procedural justice.
- **Conduct Comprehensive Post-Incident Reviews:** Establish a formal, interdisciplinary review board for every critical incident to identify root causes, systemic failures, and necessary procedural changes, ensuring lessons learned are immediately integrated into policy and training.
- **Enhance Contraband Control Measures:** Systematically review and upgrade all physical and technological security measures, including advanced scanning technology, search protocols, and intelligence gathering to drastically reduce the flow and presence of unauthorized items.

Measures of Success

- Increase the safety and protection of staff members and incarcerated individuals: Reduce the total number of violent incidents each fiscal year for Institutions. Total violent incidents (TVI): Includes staff assaults, I/I assaults, and I/I fights as a metric to determine safety and security, striving for a YOY % reduction.

	FY25 (baseline)	FY27	FY28	FY29	FY30	FY31
# Total Violent Incidents (TVI) in IDOC Institutions (YOY)	620					

Source: Critical Incident Reports

- Strengthen facility security to eliminate contraband: Reduce the total number of serious contraband violations by 5% each fiscal year in CBC Residential Facilities. Serious Contraband: Includes reports for possession of dangerous contraband as a metric to determine safety and security, striving for a YOY % reduction.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
# Total Violations for Serious Contraband in CBC Residential Facilities	TBD					

Source: ICON

- Ensure staff are provided necessary safety training to be adequately prepared to respond: Increase the # of sessions of safety training completed: Includes Personal Safety, Situational Awareness, De-escalation/Communication.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Personal Safety Training Sessions completed	6554					

Source: IDOC Learning Management System

- Through prison reduction efforts, reduce population YOY to achieve standard capacity rates.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Prison Overcapacity Rate (as reported at end of fiscal year)	20.2%					

Source: ICON

GOAL 2: Maintain Safety Standards

Within institutions, maintain the injury and illness rate below 35% (3.9) of the Corrections industry average of 11.3 cases per 100 workers as provided by the Bureau of Labor and Statistics for NAICS code 922140 through data-driven analysis and intervention.

Within CBCs, maintain the injury and illness rate below of the Parole and Probation industry average of 1.5 cases per 100 workers as provided by the Bureau of Labor and Statistics for NAICS code 922150 through data-driven analysis and intervention.

Key Initiatives

- Execute OSHA Compliance and Physical Safety Audits:** Conduct facility-wide Occupational Safety and Health Administration (OSHA) compliance and physical safety audits annually. Use audit findings to systematically identify, prioritize, and remediate all physical workplace hazards that could lead to staff injury (e.g., poor ergonomics, slip/trip/fall risks, and equipment deficiencies).
- Integrate OHS Analysis into Critical Incident Reviews:** Formalize the Post-Incident Review process to include an Occupational Health and Safety (OHS) expert who will specifically analyze all critical incidents resulting in a staff injury to identify and correct any procedural or equipment failures that contributed to the harm, ensuring rapid system-wide safety improvements.

Measures of Success

- Maintain injury and illness rate below industry average of 11.3 cases per 100 workers (35%) in institutions and 1.5 cases per 100 workers (1.6%) in CBC).

		FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Institution	Workplace	3.9%					
Injuries							
CBC	Workplace Injuries	1.6%					

Source: OSHA 300 logs

- Ensure regulatory compliance: Maintain record of no serious OSHA citations each year through monthly inspections, quarterly meetings, and annual audits. (FY 25 baseline = 0% safety citations; # of monthly inspections of all institutions; 100% annual audits = 9 for the institutions; Increase # of annual audits of Residential Facilities from FY 25 baseline of 5.)

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Safety Citations	0%					

# of Monthly Inspections of all Institutions	108					
# of Annual Audits of all Institutions and Residential Facilities	14					
# of Quarterly meetings/site visits at Residential Facilities	0					

Source: OSHA 300 logs

STRATEGIC PRIORITY 2: Reentry, Treatment and Programming

GOAL 1: Maximize Successful Community Reintegration and Outcome

increase the success rate of community reintegration by optimizing supervision success rates and accelerating post-release career achievement. By building a high-performance infrastructure for proactive wraparound services—including stable housing, integrated medical care, and professional development—we empower individuals to reach their full potential.

The Wellness Recovery Action Plan (WRAP) is our premier, evidence-based initiative. It focuses on:

- Fostering Self-Determination: Empowering individuals to lead their own wellness journey.
- Proactive Wellness Management: Equipping participants with tools to maintain mental health and navigate challenges effectively.
- Enriching Quality of Life: Creating sustainable, positive change in daily living.

Key Initiatives

- Initiate a WRAP training campaign for staff and clients.
- Increase the use of virtual programming via increased collaboration between districts and institutions.
- Tech2Connect - Re-distribute tablets across institutions and districts to maximize their use and/or secure technology or grant funding to secure more tablets.

Measures of Success

- Year over Year increase in the number of clients with successful completions of WRAP intervention.
- Establish a formal Statewide WRAP Implementation Team.
- Year over Year increase the Statewide Staff and Client/Incarcerated Individuals capacity to facilitate the WRAP Wellness Program across Districts and Institutions.
- Establish a Statewide WRAP Continuous Quality Improvement Program (CQI) to align practices/facilitation with fidelity to the WRAP Curriculum.
- By targeting higher risk clients, we would expect to see a decrease in future violations, which will become a measure of focus in future years.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
WRAP Intervention Successful Completions (CBC)	2					

Source: ICON

- Year over Year increase intervention core programming successful completions (Core Programs include: ACTV, Good Lives, WRAP, MRT, Seeking Safety, Thinking for a Change.)

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Intervention Successful Completions (CBC & Institutions)	7139					

Source: ICON

- Year over Year increase in the number of individuals who successfully completed an educational intervention.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Number of Education Interventions Completed (CBC & Institutions)	1918					

Source: ICON

- Year over Year increase in the number of incarcerated individuals who are actively enrolled in registered Apprenticeship Programs and those who have successfully completed Apprenticeship programming. (FY 25 baseline = 34)

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Started in a registered Apprenticeship Program	253					
Apprenticeship Program Successful Completions (Institutions)	34					

Source: ICON

- Year over Year increase in the percentage of clients on probation supervision that successfully complete their supervision.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
% of Successful Probation Supervision Completions (CBC)	73.4%					

Source: Iowa Justice Data Warehouse (JDW)

- Number of incarcerated individuals and clients that successfully completed virtual programming via Tech2Connect

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Tech2Connect Reentry Program Successful Completions (CBC & Institutions)	180					

Source: ICON

- Year over Year increase in percentage employed three-years following prison

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
% Of Population Employed	TBD					

Source: Iowa Workforce Development

- Increase in the percentage of incarcerated individuals released from Iowa prison three years prior who successfully reentered the community and avoided returning to prison within Iowa. (Baseline = 67.2%) Recidivism refers to the likelihood that someone will reoffend after release. Successful reentry means they do not reoffend. To measure this, we follow a group of individuals over a three-year

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Successful Reentry	67.2%					

period, which is a standard approach used in research.

Source: ICON and Iowa Justice Data Warehouse (JDW)

GOAL 2: Strengthen Staff Expertise and Program Fidelity to Enhance Rehabilitation Outcomes

Strengthen rehabilitation outcomes by integrating high-fidelity, evidence-based programming (EBP) with robust staff capacity in Core Correctional and Case Management Practices. This will ensure all treatment is effective and aligned with EBP principles, prioritizing high-risk individuals, and maintaining fidelity through continuous quality improvement (CQI).

Key Initiatives

- The department will employ only core programming that utilizes evidence-based curriculums.
- To ensure fidelity to core curriculums and facilitate continuous quality improvement (CQI).
- All staff will be fully trained to improve their understanding of interpersonal skills and cognitive behavioral interventions.
- Staff training will also focus on strengthening case management expertise and aligning practices across the department.
- Fidelity and interpersonal skills will be continually improved through coaching, continuous improvement cycles, and the utilization of formal Continuous Quality Improvement (CQI) tools.
- Standards of proficiency in case management will be maintained through ongoing Continuous Quality Improvement (CQI).
- The department will improve and consistently utilize application and documentation procedures.
- A specific coaching plan will be established for Core Correctional Practices (CCP) interpersonal skills.

Measures of Success

- Ensure staff are provided necessary training to improve interpersonal skills and strengthen case management expertise by Increasing the # of sessions of completed: Includes Case Correctional Practices and Case Management (FY 25 baseline = 29, Case Management = 0)

Institutions & CBC	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
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Core Correctional Practices	29					
Case Management	0					

Source: IDOC Learning Management System

- Year over Year increase in the following:

Institutions & CBC	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Overall Proficiency IVVI (CBC & Institutions)	95.70%					
Overall Proficiency DRAOR (CBC & Institutions)	96.75%					
Overall Proficiency Case Review Audits (CBC)	72.49%					

Source: IDOC Learning Management System

STRATEGIC PRIORITY 3: Culture and Wellness

GOAL 1: Create a culture that prioritizes psychological and physical safety across all levels of employment

Key Initiatives

- Develop and communicate a clear department-wide philosophy on leadership expectations, psychological safety, and professional accountability.
- Provide Wellness Recovery Action Plan (WRAP) training, an evidence-based, peer-led program focused on self-determination to manage mental health and improve quality of life to staff.
- Provide supervisor training focused on conflict resolution, and effective communication.

- Integrate regular wellness and workload check-ins into supervisory practices. Align flexibility practices, where operationally feasible, to promote work-life harmony.

Measures of Success

- Increase survey response rate Year over Year utilizing the Department of Administrative Services (DAS) Annual Pulse Survey as a measure of workplace climate and engagement.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
DAS survey response rate	1818					

Source: Qualtrics

- Increase survey response rate to DOC Annual Employee Engagement Survey

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
DOC-wide survey response rate	1620					

Source: Qualtrics

- Improve 1-year retention rate for all new hires.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
New Hires retained 1-year or >	49.23					

Source: Workday

- Number of staff trained in WRAP

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
WRAP (Institutions)	TBD					

Source: IDOC Learning Management System

GOAL 2: Create Clear Pathways for Growth and Development

Key Initiatives

- Implement individualized development planning as part of annual performance discussions.
- Develop standardized career pathway guides for key classifications.
- Launch or formalize a leadership development program for supervisors and emerging leaders.
- Conduct annual succession planning for critical leadership roles.

Measures of Success

- Increase staff opportunities for participation in professional development annually.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
# Staff completing training for the purpose of "Professional Development"	TBD					

Source: IDOC Learning Management System and Workday Learning

- Reduce the time to hire rates for all positions.

	FY25 (Baseline)	FY27	FY28	FY29	FY30	FY31
Average time from posting to hire open position in days	TBD					

Source: Workday

CONCLUSION

This five-year strategic plan (July 1, 2026 – June 30, 2031) affirms the IDOC's commitment to its mission of creating opportunities for safer communities and its vision of an Iowa with no more victims. Structured around three core priorities—**Safety and Security, Reentry, Treatment, and Programming**, and **Culture and Wellness**—this comprehensive strategy focuses on a rehabilitative environment, robust security, and holistic wellness for staff and the incarcerated population. Success will be driven by institutionalizing the five core values (Flexibility, Innovation, Courage, Trust, and Professional Development). This living document serves as the operational framework to elevate the state's correctional system into a national model of excellence, ensuring responsibility and continuous improvement over the next five years.