Community Corrections Task Force **December 5, 2022**
Colorado Commission on Criminal and Juvenile Justice

The following includes a summary of the current points of Task Force member concurrence. These general points can be delineated further at the next meeting. Also included at the end of the summary are points for further explication at the next meeting of the Task Force on January 9, 2023.

Question: Are there persons convicted of misdemeanors who would benefit from placement in community corrections? If so, for whom specifically?

- **Yes,** misdemeanants may benefit from placement in community corrections programs.
- **Pilot.** The Task Force agreed to recommend a pilot project (not a statewide/broad initiative)
- **Population**
  - For High Risk and High Need offenders, as defined by state probation risk/need assessments
  - For those at risk of revocation on probation
  - For individuals as a Condition of Probation (CoPR) but (See next bullet: Opt-in)
- **Opt-in.** It might help to have clients "opt in" to Community Corrections as a Condition of Probation to gauge client desire/choice, in lieu of revocation.
- **Regular or Specialized Beds.** Regular beds preferred in order to better scale up the option after the pilot because there are already IRT placements, but would leave out Therapeutic Community [TC], Sex Offender [SXO] and Residential Dual Diagnosis Treatment [RDDT] beds.
- **Treatment duration.** Unlimited in time (no finite number of days) but funding should be limited by DCJ contracts to not to overspend state funds
- **Should misdemeanants be prioritized over felony placements?** CCJJ proposal should let that be determined locally by board/program discretion, transportation issues, jail backlog and waitlist issues in pilot project. This should be answered in the pilot study as an implementation issue.
- **Funding.** General Assembly should appropriate new dedicated funds for the pilot, including evaluation and implementation support funding for DCJ or an external research entity. Could be achieved as a new line in DCJ budget (placements line footnote) with legislative intent established in Long Bill footnote.
- **Scale of Pilot.** Two to three sites to include urban and rural sites or maybe limit to number of beds or Average Daily Population (ADP) for sake of funding limits. Scale should be large enough to generalize to larger population.
- **Implementation**
  - DCJ to issue RFP/Competitive procurement process to interested boards and providers
  - CCJJ initiative should contain specific budgetary/legislative intent to fund rural initiative to study those unique issues
  - Pilot should also include county-run run versus for-profit/non-profit facilities.
- **Pilot duration.** Pilot should last long enough to give people time at risk for termination and recidivism outcomes and also to get a large enough sample to generalize to a larger population.
- **Board discretion.** Local board and program screening/discretion should be preserved for this pilot

Next Meeting
- Discuss the finer points on Scale and Duration of Pilot
- Type of programming/Standards. Same programming offered now or should there be specialized programming for this population?
- Funding. Define finer points on additional funding versus existing funding for programming and for research/evaluation. Funding for specialized funding or programmatic requirements? Implementation support? What else?
- What research questions should be answered and what data should be collected as part of pilot?