



TPC REENTRY HANDBOOK

Implementing the NIC Transition from Prison to the Community Model

A companion document to:
INCREASING PUBLIC SAFETY THROUGH SUCCESSFUL OFFENDER REENTRY:
EVIDENCE BASED AND EMERGING PRACTICES IN CORRECTIONS
and
THE NATIONAL INSTITUTE OF CORRECTIONS
TPC CASE MANAGEMENT HANDBOOK

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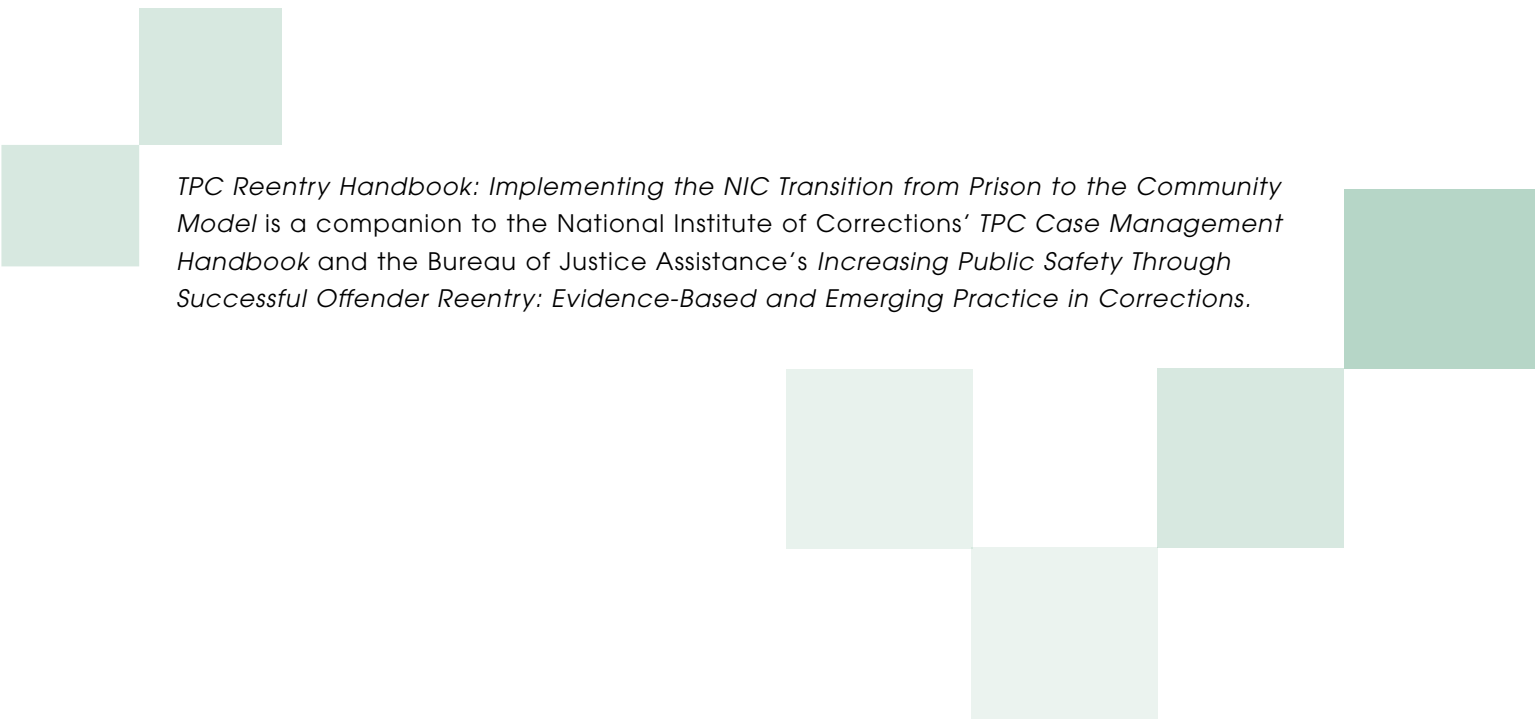
TPC REENTRY HANDBOOK

Implementing the NIC Transition from Prison to the Community Model

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TPC Reentry Handbook: Implementing the NIC Transition from Prison to the Community Model is a companion to the National Institute of Corrections' *TPC Case Management Handbook* and the Bureau of Justice Assistance's *Increasing Public Safety Through Successful Offender Reentry: Evidence-Based and Emerging Practice in Corrections*.

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Dedication

This handbook is supplemented throughout by the comments and observations of those who have been involved in implementing the Transition from Prison to the Community model. It is to them and their colleagues in the eight states that participated in the pilot test of the model that this handbook is dedicated. Too numerous to name, they are the individuals and teams who did the hard work of transforming both the goals and the culture of corrections to embrace the vision of offender success for community safety. They have been courageous enough to hold themselves to the challenging standards of evidence, collaboration, and leadership to make a difference for communities, victims, and offenders.

Foreword

In recent years, correctional agencies across the nation have focused on the challenge of helping a growing number of offenders make a safe transition from prison to the community. In 2001, the National Institute of Corrections (NIC) launched its Transition from Prison to the Community (TPC) Initiative to bring the best of practical thinking and research knowledge to this issue. Our goal was to articulate a comprehensive and strategic approach to transition that would incorporate the lessons of evidence-based practice, emphasize the importance of collaboration, and provide a practical tool for corrections agencies to utilize.

The result was the creation of the TPC model, and the significant accomplishments of eight states that worked with NIC to implement and adapt the model to the realities of day-to-day operations. This *TPC Reentry Handbook* presents the important principles of the TPC model and documents the experiences of the eight states that have put the model into practice: Georgia, Indiana, Michigan, Missouri, New York, North Dakota, Oregon, and Rhode Island. It summarizes the significant accomplishments already achieved in these states, provides insight into the challenges they faced, and provides guidance about successful strategies for bringing about change in transition and reentry practices.

Perhaps one of the most significant lessons from this experience is that the work of transition and reentry does not belong to corrections agencies alone. It overlaps with the interests and mandates of many public agencies, community organizations, victims, offenders, and their families. However one may decide to adapt the ideas in the TPC model, it seems clear that a collaborative approach will be essential.

I would like to commend the TPC teams in the eight states that have worked with NIC on this Initiative. Their efforts are generating improved outcomes for community safety and providing a valuable set of experiences to help guide their colleagues in other jurisdictions as they continue to address the challenges of transition and reentry.

Morris L. Thigpen

Director

National Institute of Corrections

Acknowledgments

Bringing the National Institute of Corrections' (NIC's) *TPC Reentry Handbook* to press has been a challenging undertaking. The effort has drawn on the work of so many practitioners, researchers, funders, policy-makers, thinkers, and leaders that it seems an almost impossible task to acknowledge everyone to whom it is indebted.

NIC's Transition from Prison to the Community (TPC) Initiative has undertaken the formidable tasks of:

- Widening the focus of corrections from custody, security, and compliance to include reducing the likelihood of reoffending as a community safety strategy.
- Suggesting that the functions of prisons, release, and postrelease supervision should work collaboratively.
- Insisting that interventions with offenders comport with the principles of evidence-based practice.
- Encouraging the use of good information, monitoring, and evaluation to guide policy and practice.
- Demanding that measurable outcomes be defined—and that they be measured.
- Encouraging corrections agencies to invite other stakeholders (service providers, victim advocates, community organizations, and others) to come to the table and work collaboratively on the challenge of transition and reentry.

NIC must be recognized for its vision and leadership in identifying the need and focus for the TPC Initiative. At first, Cranston Mitchell, and then, Kermit Humphries of NIC have led and guided the work with great skill and competence. NIC's Cooperative Agreement Partner, Abt Associates, in particular Dale Parent and Liz Barnett, deserve recognition for their clear thinking and the inclusive process they used to seek input and guidance for developing the model. As implementation proceeded, the work of the technical assistance team led by the Center for Effective Public Policy was immensely critical in carrying the ideas of the model forward, and in working with the states to shape and adapt its content to be helpful in practical ways. That team, including my colleagues Madeline Carter, Becki Ney, Paul Herman, Gary Kempker, and Richard Stroker at the Center, along with Donna Reback, Bill Woodward, and Elyse Clawson of the Crime and Justice Institute, and Jeff Padden, Le'Ann Duran, and Paul Elam of Public Policy Associates, all deserve recognition for their work. Richard Stroker, in particular, made significant contributions to the drafting of chapter 4 about implementation of the model. Tim Bynum and Scott Decker provided important guidance that shaped the Initiative's approach to measurement and evaluation strategies.

Most of all, of course, we must acknowledge the "stakeholders" in the eight participating states who came to the table to do the hard work of system change. In particular the leaders and chairs of change teams, as well as the staff who supported the work in each state, were critical to the Initiative and to the development of this handbook. It is impossible to name them all, but without their passion, dedication, hard work, and creativity, this handbook would not have been written. More importantly, the basic system change taking place in those states could never have happened.

A key aspect of the cooperative agreement for technical assistance with the Center for Effective Public Policy was the naming of a site coordinator to work with each of the states, advise them on the formation of

teams, and facilitate their progress through the steps of the TPC implementation strategy. Following are the individuals and organizational partners assigned as site coordinators over the course of the effort:

Georgia: Richard Stroker, Senior Manager, Center for Effective Public Policy

Indiana: Elyse Clawson, Law and Justice Institute, and Gary Kempker, Senior Manager, Center for Effective Public Policy

Michigan: Jeff Padden, Le' Ann Duran, and Paul Elam, Public Policy Associates, and Becki Ney, Principal, Center for Effective Public Policy

Missouri: Paul Herman, Senior Manager, Center for Effective Public Policy

New York: Donna Reback, Criminal Justice Consultant

North Dakota: William Woodward, Center for the Study and Prevention of Violence, University of Colorado

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INTRODUCTION

Background

During the first years of the 21st century, the field of corrections has faced challenges unlike anything experienced before. Almost 700,000 prisoners were released from federal and state prisons in 2005, a trend that continues to grow. These individuals transition to communities all across the nation; most are still under correctional supervision. A high percentage of them are rearrested in short order, and roughly two-thirds return to prison within 3 years—either as a result of new convictions or as a result of parole revocations. At the same time, many states are facing considerable budget shortfalls while prison populations continue to grow. Communities and policymakers alike are asking how this cycle of failure and escalating costs can be interrupted. Thus has come to be the high-profile issue known as “transition” or “reentry.”

In response to these concerns, the National Institute of Corrections (NIC) launched its Transition from Prison to the Community (TPC) Initiative in 2001. From the beginning NIC conceived of the initiative as an effort to draw together and synthesize the best thinking of practitioners and researchers in the field on how to revamp correctional efforts to enhance the successful return of offenders, increase community safety, and reduce recidivism. Over 18 months during 2001 and 2002, NIC, with the assistance of Abt Associates as its “cooperative agreement” partner, assembled five working groups of practitioners, researchers, and policy experts who met periodically to debate the lessons emerging from the field and from research that could help reshape practice.

The results of the TPC Initiative have been threefold:

- A **TPC model** that outlines the elements of practice that, if fully implemented, represent the

best thinking and evidence about how to manage transition and reentry successfully for community safety and reduced victimization.

- A **TPC implementation strategy** that outlines clearly the sequence of tasks, decisions, and management approach needed to implement the model.
- The **accomplishments of eight states**—Georgia, Indiana, Michigan, Missouri, New York, North Dakota, Oregon, and Rhode Island—that participated in a pilot test of the TPC model. In transforming practice in their own jurisdictions, these states provide significant lessons that will encourage and guide other jurisdictions interested in improving reentry practices.

Not surprisingly, given the critical nature of the reentry challenge, the NIC TPC Initiative is not the only national effort to improve practice. The National Governor’s Association Reentry Policy Academy; the Council of State Governments’ Reentry Policy Council; the Serious and Violent Offender Reentry Initiative (SVORI); the President’s Prisoner Reentry Initiative (PRI) of the U.S. Justice Department, Bureau of Justice Assistance; and the JEHT¹ Foundation’s support of reentry efforts in a number of states all underline the importance of reentry as a public policy issue. All of these efforts converge and reinforce one another on many levels.

The NIC effort distinguishes itself in a number of ways. It is at once very specific, but also far reaching. The TPC Initiative has provided hands-on guidance to the participating jurisdictions, supporting on-the-ground improvements in operating agencies from which demonstrable results are

already emerging. Participating jurisdictions receive technical assistance from NIC and have opportunities to exchange information and experiences with other jurisdictions participating in the Initiative and to participate in periodic cross-site workshops.

The TPC Initiative is also far-reaching, because it has produced a model and an implementation strategy that other jurisdictions can draw on, adapt, and use to guide change in their own unique circumstances. The TPC model does not require significant additional resources to initiate but is about system change and redeploying current resources to accomplish desired outcomes. However, success with TPC has enabled a number of the participating states to secure additional resources from their own state legislatures and from federal and private foundation funding.

It is often said that the greatest insights are often the most simple. The TPC model is, at its heart, very simple. It poses three major tenets.

- The goal is successful offender reentry to enhance public safety—no new crimes, no new victims—for safer, stronger communities.
- Reentry requires collaboration both within the fragmented correctional arena and also across traditional boundaries to include human service agencies, community organizations, and citizens. No one can do this alone, least of all correctional agencies. Agencies whose mission it is to provide substance abuse services, to enhance employability and employment rates, to provide education, to provide health care financing and services, and to provide mental health services all have a reason to be at the table.
- Corrections must base practice on evidence, adopting strategies and methodologies proven to work and discarding those that do not work.

In contrast to the simplicity of the TPC model, endeavors to truly enhance and support successful reentry are challenging and complex. For many years, corrections as a profession has focused heavily on custody, control, and surveillance,

protecting community safety by incapacitating offenders. Virtually all offenders return to the community, however, so community safety requires expanding the focus of corrections to include behavior change. This expansion of corrections' mission constitutes a significant shift for much of the field. Collaboration, while ultimately sensible, is a relatively new mode of doing business and flies in the face of the silos that characterize much of public policy. Basing practice on evidence, particularly in a field that only a few decades ago asserted that there was no evidence that behavior could be changed, requires a major shift in outlook.

The jurisdictions that have participated in the TPC Initiative to date have recognized and taken on these complex challenges. They have demonstrated the essential soundness of the model, reshaped and improved it, and made it their own. Their efforts within the context of the TPC model have generated significant change and improvements in how their systems operate, how they engage a wide range of stakeholders, and in what the outcomes are for offenders.

This handbook presents the TPC model and summarizes the experiences and accomplishments of the eight states that have helped develop, improve, and bring the model to life. The handbook also presents the TPC implementation strategy that developed out of the experiences of the eight participating states. Jurisdictions interested in implementing the TPC model will find the following tools to help them get started:

- Suggestions on how to organize such a transition effort (whom to involve and how to organize into steering, implementation, and task groups).
- A step-by-step set of activities to assist jurisdictions in setting their own vision and goals, collecting information to better define transition challenges (and strengths) unique to their own situations, and identifying targets of change.
- Examples of the innovations that participating sites found to be important and helpful in revamping transition practices.

- Information on how the principles of evidence-based practice can strengthen reentry efforts.
- The outlines of a new approach to case management to support transition and reentry.
- A performance management strategy designed to measure progress.

NIC anticipates that leaders of reentry efforts, both correctional professionals and their colleagues from other disciplines, will find the lessons and experiences captured in the *TPC Reentry Handbook* helpful as they lead change in their respective jurisdictions.

Using This Handbook

The *TPC Reentry Handbook* has been developed as a resource for a broad range of stakeholders involved in improving transition and reentry practices. Chapter 1 discusses transition and reentry as a critical public policy issue, highlighting the reasons a variety of stakeholders have an interest in

this issue and providing some historical context for current discussions.

Chapter 2 outlines the origins, development, and key features of the TPC model and introduces the reader to the eight states that have worked with NIC to implement it.

Chapter 3 provides some insights into early accomplishments of the TPC Initiative and examines the challenges of implementation. It also reports some of the lessons emerging from the eight states' implementation experiences.

Chapter 4 walks the reader through the TPC Implementation Roadmap, the steps for implementing the TPC model. This chapter is fairly brief, so as to give a clear overview of the implementation process, but uses extensive cross-references to materials in appendix II collected from the eight pilot states to illustrate how these states approached each step in the process, translating the ideas of the TPC model into action. The chapter

Companion Resources

Additional resources have been developed—or are under development—as companion documents to this handbook.

Increasing Public Safety Through Successful Offender Reentry: Evidence-Based and Emerging Practices in Corrections is a guide developed as part of the Serious and Violent Offender Reentry Initiative (SVORI) of the Bureau of Justice Assistance (BJA), Office of Justice Programs, U.S. Department of Justice. It complements information contained in the *TPC Reentry Handbook* but addresses the challenges of correctional leadership and organizational change in more detail. The basic tenets and principles presented in *Increasing Public Safety Through Successful Offender Reentry* are based on the same body of evidence and on work done in some of the same jurisdictions reported on in this handbook.

Other products developed as part of the BJA effort include two curricula on the enhancement of public safety through successful offender reentry. They were developed as resources for jurisdictions interested in mounting training efforts to engage a broader set of policymakers and staff in successful reentry efforts. Although these resources have not been published to date, information about their contents and how to access them will be posted on the website of the Center for Effective Public Policy (www.cepp.com). The *TPC Case Management Handbook*, forthcoming from NIC, is being developed as a resource for correctional agencies working to change their case management practices to encourage offender success. It is intended to be a resource for line staff, first-line supervisors, and managers implementing the Integrated Case Management and Supervision approach discussed in chapter 5 of this document.

also includes a checklist for tracking overall progress in TPC implementation.

Chapter 5 introduces Integrated Case Management and Supervision (ICMS), a new approach to offender case management and supervision that emerged as the pilot states implemented the TPC model. This chapter highlights the innovations the pilot states found necessary and useful to managing reentry and transition at the individual case level. In introducing ICMS, chapter 5 is more detailed and hands on than the chapters that precede it. It includes a checklist for reviewing current practices and exercises to guide users through the choices they will have to make in adapting current supervision and case management practices to the ICMS model. A forthcoming NIC publication, the *TPC Case Management Handbook*, will provide more detailed guidance about putting ICMS into practice.

Chapter 6 explains an approach to performance measurement to assist practitioners in reshaping their management information systems and evaluation procedures. This approach captures important information about progress in implementing the model and in tracking its outcomes in terms of both reentry indicators and public safety outcomes. The goals are to track progress using:

- System change measures.
- Intermediate outcomes, or “reentry indicators,” such as participation in programming, employment, education, job skill development, and so forth.

- Offender outcomes related to community safety, namely, reductions in recidivism and increases in successful transition.

This chapter is also more hands on, with worksheets and exercises to help users consider their own choices in refining performance measurement.

Chapter 7 discusses key emerging issues and challenges recognized by the states undertaking this work. In essence, the challenge of transition and reentry calls for long-term and continuing improvements in correctional and community supervision practices, changes that will likely continue to unfold for years to come.

A bibliography of resources on offender reentry and two appendixes complete the handbook. The bibliography lists a wide range of Web-based and print resources relating to offender transition and reentry, organized by topic. Appendix I presents capsule descriptions of the process of implementing the TPC model in each of the eight pilot states, highlighting distinctive aspects of each state’s work on transition and reentry. Appendix II provides extensive examples of tools and work products from the pilot states that illustrate their efforts to implement the model and improve their approach to offender reentry.

Note

1. The JEHT Foundation’s name stands for the core values of justice, equality, human dignity, and tolerance that underlie the Foundation’s mission.

CHAPTER 1

Transition and Reentry: A Key Public Policy Issue

The Significance of Reentry

Scope and Nature of Transition and Reentry

The attention of communities and policymakers all across the country is focused on the phenomenon of offender reentry. More than 698,000 offenders returned from state and federal prisons to communities nationwide in 2005.¹ As large numbers of offenders return to the community, citizens and policymakers alike are asking whether offenders are equipped to become law-abiding, tax-paying members of society. Can they be expected to refrain from reoffending and from revictimizing their fellow citizens?

At present, the answers to these questions are not reassuring. Even as offenders transition to the community, a significant proportion of them return from the community to prison in fairly short order for new crimes or for violations of parole. If current trends continue, we can expect that within 3 years of release, 67.5 percent of released offenders will be arrested, 46.9 percent will be convicted of a new crime, and 51.8 percent will be returned to prison.²

Policymakers and the public are concerned about the public safety and about the costs of unsuccessful reentry. Spending on corrections has been among the fastest growing items in state budgets over the past 20 years. American taxpayers spent \$9.6 billion for corrections in 1982. By 2003, this figure had risen to \$61 billion. These figures do not include the costs of arrest, prosecution, or court processing; the costs to victims; or other collateral costs. Between 1977 and 2003, total state and local

expenditures for corrections increased 1,173 percent, compared with:

- 505 percent for education,
- 572 percent for hospitals and healthcare, and
- 766 percent for public welfare.³

Successful Offender Reentry as a Public Safety Issue

Perhaps the most significant reason for the widespread interest in offender reentry is the growing awareness that successful offender reentry promotes public safety. If an offender can return to the community without reoffending and without victimizing another person, then the community is safer. If he/she can also become a productive member of society—working, supporting his family, and paying taxes—the community is stronger and more stable. Everyone wins.

As the dialogue on reentry continues, communities are beginning to look to correctional agencies not only to maintain safe and secure institutions and to monitor offenders upon release, but also to equip those offenders during and after their incarceration to be law-abiding once released. There is a growing understanding that, if we can be more successful in enhancing offender transition and reentry, we can anticipate fewer victims, contain correctional costs, and have stronger, healthier communities.

As correctional agencies take stock of their ability to respond to these expectations from the public and from state-level policymakers, they are finding that there are significant aspects of correctional systems, as these have evolved over the past 30 years, that do not effectively support a seamless

process of reentry. First, correctional systems themselves exhibit a high degree of fragmentation in offender management. The management of prisons and the management of postrelease supervision have developed into very distinct areas of expertise and responsibility—whether or not they are located within the same agency—and the sharing of complete information across those boundaries is not typical. Traditionally, prisons have seen their role as the maintenance of safety and security within their own walls, and they have not been expected to concern themselves with offenders after release. On the other hand, parole or postrelease supervision agencies have seen their role as beginning once a released offender arrives in a field office, not before. Moreover, despite the obvious needs of offenders for educational, substance abuse, and employment-related services, funding such services for offenders has not been a priority either within prisons or in the community, given the fiscal demands of constructing and operating expanded prison capacity.

In short, until very recently, the concept of comprehensive, collaborative partnerships among key stakeholders to support successful offender reentry simply did not exist. The widespread realization that these partnerships, beginning within corrections, are essential to support public safety has sparked widespread interest in developing a strategy for collaboration. The National Institute of Corrections (NIC) Transition from Prison to the Community (TPC) Initiative provides a workable, practical framework to guide the formation of these critical partnerships.

Beyond Corrections and Criminal Justice

Barriers to Reentry

Even a cursory review of the data regarding offenders indicates some of the barriers they face in reentering the community and some of the services they need:

- Up to one-third of all adult offenders within correctional institutions have a diagnosable mental disorder, yet receive no appropriate services in prison.⁴
- Three-fourths of adult inmates have substance abuse problems, yet only about 10 percent receive formal treatment while incarcerated.⁵
- Of incarcerated adults and juveniles with mental disorders, 60 to 75 percent have co-occurring substance abuse difficulties.⁶
- Of adults released from correctional placement, 40 percent have not obtained a general equivalency diploma (GED) or high school diploma.⁷
- Only one-third of inmates receive vocational training while incarcerated.⁸
- Fifty-five percent of inmates have children under 18 years of age.⁹

Clearly, these deficits and challenges raise barriers to offenders seeking employment that will generate a living wage and lead to a stable and law-abiding lifestyle. Yet the public agencies created and funded to provide services to address these challenges have not traditionally identified returning offenders as a population in which they have an interest.

Strategic Partnerships

Offenders are often parents and members of the workforce. Giving them access to the services that strengthen their ability to be parents and productive members of the workforce and help them manage their physical and mental illnesses can only make the community at large stronger and healthier. Recognizing this, the individuals who developed the TPC model with NIC incorporated a heavy emphasis on partnerships both within and outside of corrections. The premise is that major public and community agencies addressing education, employment, and mental and physical health issues share a common interest with corrections. Their client populations overlap considerably, creating incentives for joint planning to identify needs and

deliver services to those populations. As the TPC Initiative has unfolded, the wisdom of this premise has been affirmed many times over. A key policy advisor from the Governor's Office in Georgia, involved in the TPC Initiative in that state, commented on the importance of such partnerships:

Reentry occurs outside of the bricks and mortar of the prison walls, and, therefore, involving those state and local partners who connect with . . . offender[s] once they leave prison is critical While engaging those nontraditional partners certainly takes more time and effort, it's very encouraging to see solutions brought to the table that any one agency alone could never provide, and to see agencies begin to understand their organization as playing a part in ensuring that prisoners exit prison as law-abiding, contributing members of society.

—Hannah Heck, Policy Director
Office of the Governor
State of Georgia

Historical Context

Correctional Paradigms

For much of the first half of the twentieth century, the business of corrections—indeed the very name “corrections”—was focused largely on the rehabilitation of offenders. Individuals were sentenced to prison for an indeterminate period. While incarcerated, offenders were to participate in various programs that would contribute to their rehabilitation. Parole boards were charged with releasing offenders when they had been rehabilitated.

By the 1970s, faith in this model of corrections was beginning to wane. First of all, those studying the effectiveness of correctional programming found little evidence from research and concluded, famously, that “nothing works.”¹⁰ At the same time, critics of parole and the indeterminate sentence found that parole boards had few, if any, standards upon which to make their judgments and charged

that their actions ran counter to the principles of fundamental fairness. Also at the same time, crime rates began to rise, and the public became more demanding of sentences that were “tough on crime.”

These three developments gave rise to a new “determinate” sentencing model that focused on the punishment aspects of a sentence, abandoning interest in rehabilitation. Many states abolished discretionary parole release. During the 1980s and 1990s, this “just deserts” approach to sentencing and the notion that criminal sentences could not really change behavior and reduce the likelihood of reoffending opened the door to longer and longer periods of incarceration. Such sentences were geared primarily for punishment and incapacitation. If criminal sentences couldn’t change behavior, at least they could keep people behind bars—and out of communities—longer. In response to this paradigm shift, correctional agencies invested heavily in increased bedspace capacity, and investment in correctional programming decreased proportionally. Although most institutions did retain programs of some sort, they have not had the priority, funding, or support to serve great numbers of offenders.

Community corrections agencies have similarly emphasized incapacitation with enhanced surveillance and monitoring technologies such as electronic monitoring, substance abuse screening, and use of the Global Positioning System. These agencies stressed compliance with conditions and expected staff to bring noncompliance to the attention of the court or paroling authority.

The New Century

As the new century opened, the heavy investment in incapacitation began generating large numbers of returning offenders. The combination of this growing population with the significant fiscal crises facing many states gave rise to the burgeoning interest in reentry.

A parallel evolution in the field also influenced the development of NIC's TPC model. Ironically, as state sentencing schemes were focusing more on deserved punishment and incapacitation, a body of research was accumulating that provided well-founded insights into the types of interventions with offenders that are, in fact, associated with reductions in recidivism. Beginning with the work of Canadian researchers who utilized the techniques of meta-analysis to systematically analyze large numbers of studies, this research provides the evidence upon which to base correctional practice that reduces recidivism.

In sum, four developments in the field are reshaping how agencies define their correctional mission. First, larger numbers of offenders are being released from prison to the community. Second, a significant proportion of these offenders are returning to prison, raising questions of community safety and the effectiveness of current strategies. Third, fiscal crises in many states have heightened concerns about ever-growing correctional costs. Fourth, research is beginning to define specific principles of evidence-based practice that can help shape correctional practice to reduce this failure and enhance community safety.

Ripe for Change

In the face of these significant developments, NIC launched an initiative to build a sound model to guide efforts toward more successful offender transition and reentry. Beginning in late 2000, the agency brought expert practitioners and researchers together in several overlapping advisory groups to define and flesh out a new model of the transition process. The advisory groups were charged with designing a model that would account for the realities of operating agencies but draw on the latest thinking on effective interventions, collaboration, and the use of good information to shape and evaluate transition strategies. The overarching goal of the model was to enhance public safety by

supporting successful offender transition to the community. Success, in the context of the TPC model, was defined as the reduction of recidivism and the increased ability of offenders to become law-abiding, contributing members of their communities.

Early working papers generated by the initiative identified the basic premises of the model:¹¹

- Corrections, law enforcement, and human services agencies are stakeholders in the transition process. These stakeholders need to articulate and promote common interests, integrate and coordinate policies, and develop mutual ownership of an improved transition process.
- Stakeholders should freely share information about transition both within and among their organizations.
- Transition should be built upon proven reforms and best practices.
- Transition reforms should be affordable, transferable, and adaptable.
- Basic transition reforms should apply to all imprisoned offenders, including those given discretionary release and those who leave at the end of their prison terms.
- The allocation of resources for programming, supervision, and services should be directly proportional to the level of risk posed by any given group of offenders.

NIC then took steps to disseminate the TPC model through a national technical assistance initiative that would work with states interested in implementing the model. The subsequent chapters of this handbook describe the implementation process, highlight lessons and accomplishments, and outline new approaches to case management and performance measurement that are products of the implementation effort.

Notes

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CHAPTER 2

The Transition from Prison to the Community Model

Vision, Mission, and Goals of the TPC Model

Webster's New World Dictionary, Second Edition (1984) defines a *model* as "the representation of a planned object that is regarded as a standard of excellence to be imitated." The Transition from Prison to the Community (TPC) model was developed for precisely this purpose. It was intended to define a standard of excellence for offender transition that would encourage correctional practitioners to implement its various elements. As chapter 1 explained briefly, the TPC model is based on knowledge and experience drawn from a varied group of practitioners and on extensive work by the National Institute of Corrections (NIC) to synthesize the knowledge emerging from the research on effective interventions with offenders to reduce recidivism.

In essence, the TPC model is a framework that can assist jurisdictions to undertake system change designed to:

- Reduce recidivism among transitioning offenders.
- Reduce future victimization.
- Enhance public safety.
- Improve the lives of communities, victims, and offenders.

The Challenge of Reentry Defined

As NIC began its work on developing a model and strategic approach for transition and reentry, its advisers identified a constellation of problems that

defined the reentry challenge. Large numbers of offenders were being released to communities across the nation, and far too many of them were failing, for many reasons. The approach to reentry at that time was characterized by:

- Lack of focus on offender success as the desired outcome of correctional efforts.
- Lack of consensus that transition should begin at admission to prison (or before) and extend through discharge in the community (and beyond).
- Extreme fragmentation among the agencies involved in managing transition, both among correctional agencies themselves and between criminal justice and other stakeholders.
- Lack of empirically based, validated assessments of risk and need conducted at intervals during the transition process to target the use of interventions.
- Lack of offender programs/interventions based on the principles of evidence-based practice.
- An offender population with a high incidence of untreated mental illness and substance abuse and deficits in employment skills and education.
- Lack of a single, dynamic case management strategy for offenders that could guide the targeting of interventions, enhance linkages to informal networks of support, and involve the offender.

The NIC advisory groups began articulating a model that would address these problems.

Distinctive Elements of the TPC Model

Several elements distinguish the TPC model from other models of reentry:

- The concept of transition and reentry as a seamless process with key decision points.
- Community safety achieved through offender success.
- Involvement of noncorrectional stakeholders.
- System and organizational change.
- Collaboration as a way of doing business.
- Collaborative teams and change management.
- Evidence-based practice.
- Performance measurement.

Each of these elements is addressed below.

Seamless Process With Key Decision Points

Unlike many earlier efforts that have focused on offender reintegration, the TPC model takes a very broad view of reentry. Rather than waiting until 6 months before release or until after release to focus on reentry, TPC efforts begin at admission or sooner, with assessments used to plan the interventions and activities needed to prepare an offender for release. A single, dynamic Transition Accountability Plan (TAP)¹ is developed for each offender and is modified as the offender moves through the entire correctional process to reflect both progress and changes in risk and need.

This integrated, continuous, and coherent process is illustrated in exhibit 2-1. The model identifies 10 steps, 6 of which (in bold) are also key decision points for correctional agencies:

1. Sentencing
2. Admission to prison
- 3. Assessment and classification**
- 4. Behavior and programming**

5. Release preparation

6. Release/revocation

7. Supervision and services

8. Discharge

9. Aftercare

10. Law-abiding citizen

The reentry process has an enormous impact on public safety, effective use of scarce public resources, and restoration of victims. Accordingly, the entities that have a stake in how well the process supports successful offender transition—the prison, community supervision, the release authority, and human services agencies—and their overlapping involvement in the steps in the process are shown at the top of the model diagram. The model rests, importantly, upon a foundation of a sound Transition Accountability Plan and Integrated Case Management and Supervision.

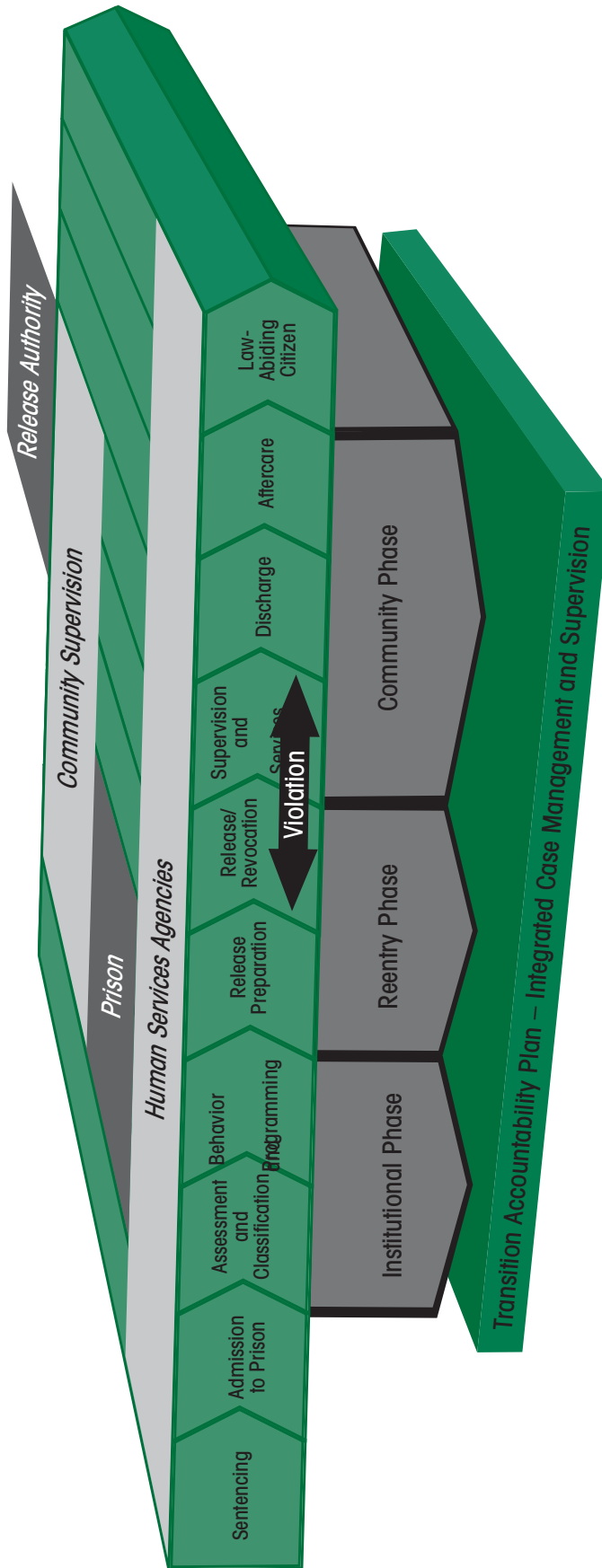
Community Safety Through Offender Success

Perhaps the most distinctive aspect of the TPC model is that it refocuses correctional practices on the goal of public safety through offender success. It does so by viewing virtually every aspect of correctional operations as an element in that overall strategy. This is a departure from the recent emphasis on risk management and surveillance in incarceration and postrelease supervision (i.e., using security levels and levels of supervision to target control by level of risk). The TPC model includes risk management, but also incorporates risk reduction as a key interest.

Involvement of Noncorrectional Stakeholders

The model also specifically identifies reentry as important to both correctional and noncorrectional stakeholders. This perspective grew out of several important insights provided by those who developed the model:

Exhibit 2-1. The Transition from Prison to the Community Model



- Transitioning offenders have significant deficits and needs for services that are typically funded and/or provided by noncorrectional agencies, by community organizations, and by informal networks. Therefore, these stakeholders must be part of developing a reentry strategy if offenders' needs are to be addressed.
- Noncorrectional agencies in particular have mandates—from legislative funders, executive leadership, and from the community—to serve certain populations that often overlap significantly with the correctional population. If those agencies are aware of this overlap, they will likely identify which of their interests can be served by coming to the table to plan a collaborative strategy regarding reentry.
- Collaboration means strength in numbers and strength to effect change. The advantages of collaboration can be a powerful incentive, engaging partners in mutually reinforcing efforts.

Leadership

Given the dimensions of the reentry challenge and the significant realignment of goals and resources it will require, the TPC model also explicitly spells out the need for leadership commitment at the highest levels of state government. From the beginning, NIC defined participation of the chief executive of at least three state entities as essential: the agency responsible for administration of prisons; the agency responsible for release decisionmaking, setting of conditions, and revocation decisionmaking; and the agency responsible for postrelease supervision. All would be critical stakeholders in implementing the model. In addition, NIC sought the partnership of the chief executives of state agencies involved in the provision of mental health, substance abuse, employment, and educational services.

System and Organizational Change

Recognizing that many of the challenges to successful reentry were inherent in current correctional practices, the architects of the TPC model

made system and organizational change and the management of that change key elements in the model. Implementation of the TPC model would involve not simply the addition of resources and the filling of gaps, but basic changes in how correctional agencies and their partners do business. It would involve embracing new goals and partners, redefining the roles and responsibilities of staff (and offenders), developing new skills, and redefining measures of success.

One important example of system change envisioned by the model is the use of empirically based, valid assessments of risk and need to guide the management of an offender through incarceration and community supervision. This policy could well require an agency to develop an entirely new assessment protocol, train staff in its use, and then incorporate the new protocol into case planning and management. It could also mean the realignment of program resources to adopt evidence-based program interventions. It might also involve the need to move offenders within the prison system to ensure that they have access to interventions appropriate to their risk and needs and that they complete those programs before release. This in turn could require adaptations in security classification and housing policies.

Collaboration as a Way of Doing Business

To combat the extreme fragmentation inherent in our correctional systems and other public service delivery systems, the TPC model specifically incorporates collaboration as a method for stakeholders involved in the effort. Collaboration has been defined as “the sharing of information, the changing of activities, the dividing of resources, and the improvement of the capacity of another for the benefit of all and to achieve a common goal.”² It is the effort to improve the capacity of others that makes collaboration a unique enterprise. Collaboratives are different from cooperatives and coalitions because they involve more formal and sustained commitment and rely on the conviction

that, while retaining their uniqueness and autonomy, organizations that share and pursue common goals can accomplish much more together than they can alone.

In Oregon, the keys to our sustained and ongoing focus on improving reentry have been broad-based involvement in the process and sustained leadership from the department's director. A steering committee consisting of prisons, community corrections, the parole board, local criminal justice system representatives, social service agencies, the juvenile justice system, crime victims, and families of offenders was charged with guiding the effort to improve transition. Then work groups were formed with additional participants with expertise in the specific change areas identified by the steering committee. Involving literally hundreds of people from inside and outside the Department of Corrections provided a momentum that could not be stopped.

—Ginger Martin, Assistant Director
Transitional Services Division
Oregon Department of Corrections

Collaborative Teams and Change Management

The depiction of the TPC model in exhibit 2-1 can be considered an ideal to be achieved, a schematic of how transition efforts could look in the future if the model and its principles are adopted and implemented. The developers of TPC recognized that current practice differs substantially from the model in many respects and therefore made forming, chartering, and supporting collaborative teams a central element of implementing the model. These teams are responsible for defining a vision and mission for transition and identifying and making the changes necessary to bring practice into alignment with the model, using the principles of collaboration. They are the change agents that undertake the detailed and complex work of transforming policy, practice, and all of the

trappings of large, geographically dispersed organizations to reflect the model itself.

Chapter 4 of this handbook discusses in detail the teams to be mobilized and gives practical guidance about the management of such teams, and appendix II gives examples of forming and chartering teams. When energized by strong leadership, these teams are the linchpins in implementing the model and creating a successful approach to offender transition.

Evidence-Based Practice

One of the assumptions underlying the TPC model is that, even with collaborative efforts, good planning, and state of the art assessments, offender success and reduced recidivism will continue to be elusive unless the interventions used with offenders are effective. Evidence of effectiveness is a complex and demanding requirement of the TPC model, but essential nonetheless. Offenders must not only be assessed periodically using valid assessments of risk and criminogenic need, but effective interventions must also be available and targeted by risk and need, in adequate dosage levels, with attention to the principle of responsivity.

The most recent endorsement for this requirement comes from the National Research Council, which recently issued a set of recommendations for correctional agencies emphasizing the importance of implementing interventions that have been demonstrated through sound research to be effective in reducing recidivism. The council places particular emphasis on the importance of sound implementation strategies, training of staff, and adherence to good program design.³

Another aspect of evidence-based practice vital to the TPC model is its emphasis on the role of line staff in interacting with offenders to enhance their motivation and engage them in the process of change.⁴ It is important to involve higher risk offenders in specific treatment programs targeted to their criminogenic needs. It is equally important for staff to use techniques such as motivational

The Responsivity Principle

The responsivity principle is based on the understanding that characteristics such as culture, gender, motivational stage, developmental stage, and learning style influence how an individual will respond to different types of treatment. In the context of corrections, the responsivity principle calls for considering individual characteristics when matching offenders to services. Responsivity also requires using treatment strategies that have been proven effective with the offender population, such as cognitive-behavioral therapy and motivational interviewing.

Source: Lore Joplin, Brad Bogue, Nancy Campbell, Mark Carey, Elyse Clawson, Dot Faust, Kate Florio, Billy Wasson, and William Woodward, *Implementing Evidence-Based Practice in Community Corrections: The Principles of Effective Intervention* (Boston, MA: Crime and Justice Institute, 2004), www.crjustice.org/cji/NICCCJI_Project_ICCA.pdf.

interviewing or cognitive-reflective communication in their day-to-day interactions with offenders to encourage behavior change.

Performance Measurement

Recognizing that many previously implemented correctional initiatives have proven ineffective, the TPC model addresses the need of correctional systems to define outcomes clearly, measure desired outcomes (e.g., reductions in recidivism and increases in community stability), and track the system changes geared to bring about these results.

In sum, the TPC model seeks to move correctional practice:

- **From:** Focusing primarily on custody and monitoring.
To: Including recidivism reduction through behavior change as a major focus.

- **From:** Allowing silos to fragment the transition process.
To: Redesigning efforts into a coherent process.
- **From:** Defining transition as a corrections problem.
To: Defining transition as a public policy issue in which many stakeholders have an interest.
- **From:** Using unproven methods.
To: Using practices based on evidence.
- **From:** Measuring inputs.
To: Measuring intermediate and final outcomes.

Major Components of Implementation

The TPC model itself defines the destination where transition and reentry efforts need to arrive to be successful. The implementation process is akin to the journey toward that destination.

A jurisdiction seeking to implement the TPC model will need to:

- **Mobilize interdisciplinary, collaborative leadership teams** (convened by correctional agencies, governors' offices, or other appropriate authorities) to guide reentry efforts at state and local levels.
- **Engage in a rational planning process** that includes a careful definition of goals, a clear understanding of the current reentering population and rates of recidivism, and a thoughtful review of existing policies, procedures, and resources for reentry.
- **Deliberately involve noncorrectional stakeholders—public, private, and community agencies—** who can provide services and support as reentry initiatives are planned and implemented.

- **Implement validated offender assessments** at various stages of the offender's movement through the system.
- **Develop the capacity to create a Transition Accountability Plan** for each offender to guide case management and program interventions from the time of admission to prison until the time of discharge from supervision in the community.
- **Choose effective interventions**, as demonstrated by good research, for individual offenders on the basis of risk and criminogenic needs identified by assessments.
- **Ensure that all transitioning offenders are equipped with basic survival resources** such as identification, housing, appropriate medications, linkages to community services, and informal networks of support before, during, and after they are released and move into the community.
- **Expand the traditional roles of correctional staff** beyond custody, security, accountability, and monitoring to include an integrated approach to offender management that engages offenders in a process of change.
- **Develop the capacity to measure progress** toward specific desired outcomes, to continually track progress, and to use such information for further improvement.

Pilot Test: Eight Participating States

Once developed for pilot testing, the TPC model became a framework for NIC-funded technical assistance to states interested in implementing its goals and strategies. In 2002, Missouri and Oregon, two states whose experiences had significantly shaped those designing the model, agreed to serve as pilot sites to further develop and test the ideas in the model.

Subsequently, other states were invited to apply to participate in the TPC Initiative. Applicants were

asked to commit key leadership from their correctional institutions, postrelease supervision agencies, and paroling authorities. They were also expected to form two teams: a policy team at the state level involving chief executives of other state agencies with a stake in offender reentry and an implementation team of top-level managers from those agencies. Ultimately, Georgia, Michigan, North Dakota, Indiana, New York, and Rhode Island were selected to participate.

Exhibit 2-2 highlights the diversity in general populations, correctional populations, and incarceration rates among the participating eight states. Despite this diversity, the TPC implementation process has proven to be a productive undertaking for all the states, assisting each one to make significant changes in its focus and approach to reentry.

Profiles of the Eight Pilot States

Georgia

Georgia was accepted as a participant in the TPC Initiative in April 2004. With leadership for this effort provided by personnel from the Office of the Governor, key managers from numerous agencies have collaborated on what is called the Georgia Reentry Impact Project (GRIP). A steering committee of the heads of the agencies that are the primary partners in this initiative oversees the effort. A policy team composed of key managers who have decisionmaking authority from the partner agencies directs the investigation of reentry practices, identification of critical issues, and coordination of implementation activities. Three implementation workgroups are making necessary modifications or improvements to reentry practices throughout the state, following recommendations made by the policy team and embraced by the steering committee. The vision of the GRIP effort is "Promoting public safety through collaborative partnerships, which reflect a seamless system, to ensure that all returning offenders are law-abiding, contributing members of their community."

Exhibit 2-2. Overview of States Participating in the TPC Initiative Pilot Test

| Site | 2005 State Population | 2006 Prison Population | 2005 Releases | 2006 Incarceration Rate per 100,000 Population | 2005 Parole Population | Postrelease Supervising Agency |
|--------------|-----------------------|------------------------|---------------|--|------------------------|--------------------------------|
| Georgia | 9,073,000 | 51,536 | 16,974 | 550 | 23,344 | Parole Board |
| Indiana | 6,272,000 | 27,472 | 16,432 | 435 | 6,627 | DOC |
| Michigan | 10,121,000 | 50,701 | 12,397 | 502 | 20,924 | DOC |
| Missouri | 5,800,000 | 30,639 | 18,881 | 524 | 17,400 | DOC |
| North Dakota | 637,000 | 1,342 | 998 | 211 | 246 | DOC |
| New York | 19,255,000 | 62,950 | 25,198 | 326 | 54,524 | DOP |
| Oregon | 3,641,000 | 13,614 | 6,177 | 368 | 20,515 | CC/DOC |
| Rhode Island | 1,076,000 | 2,079 | 769 | 195 | 344 | DOC |

Key: CC = Community Corrections; DOC = Department of Corrections; DOP = Division of Parole.

Note: For all states, DOC was the agency in charge of institutions.

Sources: State population—Lauren E. Glaze and Thomas P. Bonczar, *Probation and Parole in the United States, 2005* (Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, 2006); prison population, releases, and incarceration rate—William J. Sabol, Todd D. Minton, and Paige M. Harrison, *Prison and Jail Inmates at Midyear 2006* (Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, 2007); parole population—U.S. Census Bureau, Statistical Abstract of the United States, Resident Population—States: 1980–2006, www.census.gov/compendia/statab/.

Indiana

Indiana has participated in the TPC Initiative since 2003. The effort was revitalized under the direction of newly appointed Indiana Department of Correction Commissioner J. David Donahue in 2005 under the title “Road to Reentry.” Commissioner Donahue has received leadership support from the Indiana governor and a wide range of state agencies. The mission set out by these leaders is “(t)o enhance public safety through improving the successful transition of offenders to the community.”

Michigan

Michigan began participating in the TPC Initiative in 2003, and the state’s program is known as the Michigan Prisoner ReEntry Initiative (MPRI). With technical assistance from the National Governors Association in addition to NIC, Michigan’s goal is to have the entire state involved in MPRI by 2008. The goals of MPRI are to promote public safety by

reducing the threat of harm in communities where released offenders take up residence, and to increase success rates of released offenders by fostering effective risk management and treatment programming, offender accountability, and community and victim participation.

Missouri

Missouri has been engaged in the TPC Initiative since 2002. The Missouri Reentry Process (MRP) was formalized by executive order of newly elected Governor Matt Blunt in September 2005. A cabinet-level leadership group spearheads the effort. Along with representatives from the community, eight state agencies have partnered to strengthen offender reentry practices: the Office of the State Courts Administrator and the Departments of Corrections, Social Services, Mental Health, Revenue, Health and Senior Services, Economic Development, and Elementary and Secondary Education. An MRP steering committee with

membership drawn from top-level staff from all the participating state agencies and from private service providers and community members is charged with implementing the decisions and strategy of the cabinet leaders.

New York

New York began its reentry work in 2003 and was selected to participate in the TPC Initiative in early 2004. The vision of the New York State Interagency Reentry Task Force and Transition from Prison to Community Initiative is “a safer New York resulting from the successful transition of offenders from prison to living law-abiding and productive lives in their communities.” To accomplish its vision, the task force is working to increase the number of offenders who successfully transition from prison to their communities through a coordinated statewide system that assesses and responds to offender risks and needs, supports offender accountability and reparation to victims and communities, promotes offender self-sufficiency, and encourages family and community involvement in offender success.

North Dakota

In mid-2003, North Dakota began initial work on the TPC model. In July 2005, the newly appointed director of the North Dakota Department of Corrections and Rehabilitative Services reaffirmed this state’s participation in the TPC Initiative. Since that time, the Department of Corrections and Rehabilitative Services has led the North Dakota TPC effort with the support of the State Workforce Development Agency, North Dakota Job Services, the North Dakota Department of Human Services, and the North Dakota Housing Finance Agency. In addition, North Dakota has revised its databases serving both prisons and community supervision to directly emphasize the three highest scoring criminogenic needs for each offender.

Oregon

Oregon has participated as a pilot TPC site since 2002. The Oregon Department of Corrections has

made a commitment to what it calls “The Oregon Accountability Model,” which is consistent with the TPC model and provides a foundation for inmates to lead successful lives upon release. Oregon’s model has six components: criminal risk factor assessment and case planning, staff-inmate interactions, work and programs, children and families, reentry, and community supervision.

Rhode Island

Rhode Island joined the TPC initiative in 2002. Commitment to the effort was formally established in March 2003 by an Executive Order of the Governor naming the membership and charge of The Governor’s Steering Committee on Prisoner Reentry. The initiative has been implemented in a three-tiered reentry governance structure. Tier I is chaired by the Governor’s Office, and its membership consists largely of the Governor’s cabinet, although representatives from the city of Providence are also members. Tier II (the steering committee itself) represents the deputy directors or those with similar positions within each Tier I member agency. These agencies are the Department of Corrections; the Department of Labor and Training; the Department of Education; Rhode Island Housing; the Department of Children, Youth and Families; the Parole Board; the Rhode Island Board of Governors for Higher Education; the Division of Information Technology; the Department of Health; the Department of Mental Health, Retardation and Hospitals; the Public Transit Authority; and the Department of Human Services. Tier III represents local community service organizations actively involved in discharge planning for offenders and individuals with case management responsibility representing institutional corrections, probation, and parole.

Appendix I describes the work in each of these eight states in greater detail.

Technical Assistance

The eight pilot states have received technical assistance over the course of their participation in the TPC Initiative. During the early phases of the

initiative, as the model was being developed, Abt Associates provided assistance in collaboration with consultants drawn from the Center for Effective Public Policy (the Center) and other partners.⁵ In mid-2004, NIC asked the Center, along with its consultants and partners, to lead the technical assistance on implementation of the TPC model under a cooperative agreement with NIC. Each state received a site coordinator, who assisted the various TPC teams formed in each state by facilitating their meetings, helping to develop and implement work plans, identifying other resources, and supporting exchange of information among the sites. NIC also convened several cross-project workshops on topics important for implementing the model.

Continuity

Of the eight participating states, four have experienced a change of governor and cabinet-level leadership since the inception of the effort. In each instance, change in leadership and party affiliation has not led to change in support for the initiative. When asked about their ability to sustain this effort through significant changes in leadership, many of the key stakeholders involved in several of the participating states cited the compelling nature of the work. Because the focus on transition and reentry is ultimately about public safety and reducing victimization, it is embraced from all quarters. The states also credit the resiliency of the partnerships forged at many levels within correctional agencies and across traditional boundaries—partnerships that build trust, commitment to the vision, and momentum for change.

Notes

1. The term “Transition Accountability Plan” is used here, although the states participating in the initiative have varied in their choice of name for this tool. The central ideas of the plan are more important than the specific name. It is a single, dynamic plan, shared across a case management team, updated as progress is made, and used to guide case management.
2. Chris Huxham, ed., *Creating Collaborative Advantage* (London, UK: Sage, 1996), cited on www.collaborativejustice.org.
3. National Research Council of the National Academies, *Parole, Desistance from Crime, and Community Integration* (Washington, DC: The National Academies Press, 2007).
4. Scott T. Walters, Michael D. Clark, Ray Gingerich, and Melissa L. Meltzer, *Motivating Offenders to Change: A Guide for Probation and Parole* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2007), NIC Accession Number 022253.
5. The members of the TPC technical assistance team are listed in the Acknowledgments.

CHAPTER 3

Why and How To Take on the Challenge of Transition and Reentry: Lessons from the Eight TPC States

Accomplishments

Perhaps the most persuasive argument for taking on the challenge of transition and reentry is the growing evidence that the goals of reduced recidivism and reduced victimization can be attained. This handbook is not intended to constitute an evaluation of the Transition from Prison to the Community (TPC) Initiative or of the work of the participating states. It does, however, report on the work undertaken by the states to improve their efforts at performance measurement, and it relays some of the encouraging indications coming from those efforts.

Georgia, Michigan, Missouri, and Oregon—the states with the most advanced outcome measurement efforts in place—are beginning to report reductions in recidivism for offenders moving through the restructured transition and reentry process. Georgia reports increasing levels of successful parole completion—71 percent in 2007, up from 66 percent in 2005. Michigan’s overall recidivism outcomes through May 2007 show a 23-percent improvement in total returns to prison against a 1998 baseline when controlling for a history of prior parole failure. Missouri reports lower levels of technical and criminal violations for offenders going through its transitional housing units: 6.8 percent lower after 6 months and 4.1 percent lower after 12 months, in comparison with a 2005 baseline. Oregon’s balanced scorecard reports for 2006 and 2007 show decreasing rates of revocation and absconding during the first 180 days after release.

To generate these types of outcomes, the participating states have made major changes in how they do business by implementing the TPC model.

They have begun to document their “system changes”—basic shifts in policy, practice, resource allocation, and their own performance measurement systems. This chapter reports encouraging examples of:

- Embracing successful offender transition, reductions in recidivism, and reductions in victimization as the vision and goal of transition and reentry efforts.¹
- Creating and sustaining collaborative partnerships among correctional agencies and nontraditional partners at the state and local level.²
- Embracing the principles of evidence-based practice, including the implementation of empirically based, validated assessment of risk and criminogenic need.³
- Targeting resources according to those assessments of risk and needs.⁴
- Increasing ability to measure outcomes, from increases in employment, housing, and treatment accessibility at release to decreases in returns to prison for parole violations and new crimes.⁵

Dimensions of the Implementation Challenge

Some of the most important lessons emerging from the experience of the eight pilot states have to do with the genuine challenges of implementation. The three major tenets of the TPC model—highlighted in the introduction to this handbook—are fairly simple:

- The goal is offender success in pursuit of recidivism reduction and public safety.

Positive accomplishments of the TPC team include implementation of the COMPAS risk/needs assessment, emphasis on prison and community programs and services, creation of a successful reentry housing model, and the partnership that has been formed between the criminal justice agencies and the nontraditional organizations such as social services and faith-based groups. Working together, we can make a difference.

—Garland Hunt, Chairman
Board of Pardons and Parole
State of Georgia

- The approach is a collaborative one, requiring the resources and expertise of a range of stakeholders.
- The practices adopted must be effective, as demonstrated by good research, i.e., they must be evidence based.

On the other hand, implementation is far from simple.

It is hard to argue with the notion that it is in the best interests of community safety to reduce recidivism among transitioning offenders and to encourage these offenders to become contributing, law-abiding members of society. It is also important to understand the efforts required to change our current system of corrections and human services so that these outcomes are possible. An early working paper produced by the TPC development committees and staff made the following realistic assessment:

The TPCI (TPC Initiative) will be a sea-change for participating jurisdictions. It will mean a fundamental shift in the mission of correctional agencies, and, consequently, equally fundamental changes in agencies' priorities, operating procedures, staffing and management practices. It will require corrections, releasing, supervision, and human service agencies to form strategic and tactical partnerships to integrate and

coordinate basic policies, and to sustain and nurture those partnerships and policies over time. It will require many agencies to reallocate resources and to seek more effective and targeted ways to use them. Progress toward the model envisioned by the TPCI will be difficult and will require administrative and political commitment over time. Transition reform is not for the short-winded or faint-spirited.⁶

From the beginning, then, the architects of TPC saw significant changes in mission, priorities, operations, and resources as essential to accomplishing its vision of more successful offender reentry in service of community safety. The challenges would be considerable, but the anticipated gains provided a worthy goal for the effort.

This chapter outlines the lessons that have been learned in implementing the TPC model; many of these lessons represent new challenges that emerged during implementation. The goal is not to dispel enthusiasm or optimism for the effort—quite the contrary. Anticipated benefits are being realized in the participating states, and the rewards, as reported by those who have been part of the effort, are impressive. However, it is also important to be realistic about the challenges inherent in implementation, to go into the work with a clear understanding of what to expect (especially of how long it will take), and to learn from the experiences of those who have gone before.

Lessons Regarding Change in Correctional Culture

Organizational Culture Change

The TPC model implies shifting from an exclusive focus on custody, security, and surveillance within correctional agencies to a wider focus that engages offenders in a process of change. It is hard to overestimate the implications that this shift implies for most correctional agencies—a move from containing offenders to engaging them in change

efforts, from risk management to risk reduction. This shift implies new roles for staff involving new skill sets, new ways of interacting with offenders, and new measures for staff performance and organizational achievements.

When asked about his advice for colleagues in other states undertaking the challenge of structuring a correctional facility around reentry goals . . .

Be patient. It will take a lot of time to change the culture of corrections at a facility level. Changing the culture . . . is necessary in order to give offenders the opportunity to take responsibility for themselves, which is something that they don't do in conventional prisons. . . . You will also need the right type of staff. Staff need to be aware that there will be a learning curve. . . . [T]he first instinct may be to punish someone for a minor infraction. It is more important to educate the offender on the reason that the infraction is wrong . . . to allow the offender to consider the consequences of his action the next time.

—Michael Lloyd, Superintendent
Plainfield Reentry Educational Facility
Department of Corrections
State of Indiana

A focus on offender behavior change, risk reduction, and reentry success requires nothing less than a shift in organizational culture, the “values, assumptions, and beliefs the people in an organization hold that drive the way they think and behave within the organization.”⁷ Participants in the TPC Initiative have found that implementation changed everything from job descriptions to performance evaluation systems, management reports, and classification practices. Such significant cultural change requires the participation and training of a wide range of staff and the patience and tenacity to stay with a long and difficult undertaking.

The TPC model implies significant change for noncorrectional agencies as well, in that the model defines offenders as a population to be served.

Offenders may well have been a population ignored or even avoided in the past, and one that brings different and challenging needs.

Leadership

Clearly, fundamental change across organizations and systems does not just happen. It requires strong, purposeful leadership and commitment to reshaping the work of corrections. Because successful transition and reentry require the involvement of postrelease agencies and stakeholders, the TPC model redefines who needs to be at the table. Key correctional leaders must commit to active participation, to a willingness to revisit basic assumptions, and to engagement with other, nontraditional stakeholders in the implementation effort.

Lessons Regarding a Collaborative Approach to Transition and Reentry

Partnerships Within Corrections

The designers of the TPC model were struck from the beginning by the excessive fragmentation that characterizes correctional systems, which typically are compartmentalized and geographically dispersed. Institutions and field supervision are traditionally quite separate, even if located in the same department. The releasing authority is typically distinct from both, even if administratively part

As we have addressed the challenge of reentry and transition, a key to success has been the involvement and leadership of the Governor's staff. System changes have both a policy and a budget impact. Their presence and encouragement for agency heads to participate has instilled accountability from agency staff to implement the improvements needed for successful offender reentry.

—Beth Oxford, Director of Parole
Board of Pardons and Paroles
State of Georgia

of a correctional department. Indeed, one of the most imposing gaps to bridge in the implementation of the TPC model has been the movement of an offender from inmate status to parolee status by way of a single, dynamic case planning process that shares information across the divide between institutional and community supervision. States implementing the TPC model have observed the importance and benefit of working more collaboratively across these traditional boundaries.

One of the major issues affecting collaboration within corrections (and collaboration between

corrections and noncorrectional agencies) is the ability to exchange case information in an electronic format. Many agencies have found this issue to be among the most tenacious of problems, but many have also surmounted those problems with technology that allows them to share case plans. At a minimum, implementation strategies must anticipate information sharing as a key issue.

Partnerships Beyond Corrections

A commitment to enhancing successful reentry, as outlined in the TPC model, and to evidence-based practice also implies that correctional leaders will build partnerships with other stakeholders at the policy and service-delivery levels. Noncorrectional stakeholders may find that coming to the transition/reentry table will enable them to accomplish their own missions more effectively—a powerful incentive for them to participate.

The notion that transition and reentry are issues that go beyond the purview of corrections is basic to the TPC model. A particularly good summary of this concept, which is also integral to other national reentry initiatives, appears in the Reentry Policy Council’s website at www.reentrypolicy.org/government_affairs/national_initiatives. This website describes a number of national reentry initiatives and includes a summary of the Reentry Policy Council’s exhaustive report outlining the interests of many noncorrectional stakeholders in transition and reentry.

Participation of legislative stakeholders can be critical for accessing funding. Participation of law enforcement, prosecution, and legal defense stakeholders can create support and anticipate barriers. Other key stakeholders can facilitate the availability of appropriate, effective interventions. Although correctional agencies do fund and provide certain types of services, they also rely on other agencies to provide services such as access to state-issued identification, benefits for eligible offenders, and informal networks of support (e.g., family and faith-based organizations).

The Probation and Parole unit has become part of the Department’s thinking about offender management including, but not limited to, the transition of incarcerated offenders back into the community. Awareness of community supervision is now taken into account in planning and providing prison programming, preparing offenders for discharge, tracking program participation, and sharing information.

Probation and Parole staff has had the opportunity to contribute to significant projects that in the past would likely have involved institutional staff only, such as participation on Tier II of the Prisoner ReEntry project; the development of the Transition from Prison to Community Data System (TPCDS); . . . and improved information exchange with the Discharge Planners.

At the other end, Probation and Parole Officers are becoming more familiar with the prison functions and the needs of newly released offenders. Just as institutional programming needs to be based on awareness that inmates have lives before and after prison, so too do community corrections staff need to be aware that incarceration is not merely a break in the action: for the offenders, prison is a set of experiences that must be factored into their postrelease lives.

—Sisan Smallman
Assistant Probation and Parole Administrator
Department of Corrections
State of Rhode Island

At the local level, nontraditional partners can be particularly helpful in building informal networks to support offenders' basic needs as they transition back to the community. In Indiana, for instance, a local bank has become one of the vital partners of the Plainfield Educational Reentry Facility (PERF). PERF has been established by the Indiana Department of Correction as a facility devoted to preparing offenders for reentry, many of whom will be transitioning back to nearby Indianapolis. The bank

Establishing Transitional Housing Units in each of our Minimum and Medium security institutions created an environment where offenders can honestly focus on preparing themselves for their transition home and both staff and services are oriented toward successful reentry.

Released offenders now go home with a real transition plan that is developed in the institution and follows the offender into the community. In many cases, the plan includes prearranged appointments for aftercare treatment and job placement assistance in the community.

Community Workforce Development staff meet with offenders in prison before release to bridge the gap between "wanting a job" and "getting a job" with assistance from the local Workforce Development Career Center.

—Thomas Clements
Assistant Division Director, Division of Adult Institutions
Department of Corrections
State of Missouri

I was already aware of considerable overlap in the populations that DMH and DOC serve. As I said early on, "Your clients are our clients." Given that overlap, it was clear that we had comparable goals—in particular, reducing recidivism and making communities safer. Working at these goals together made a lot more sense than going at it independently. I believed that DOC could help us as much as we could help them.

—Mark Stringer, Director
Division of Alcohol and Drug Abuse
Department of Mental Health
State of Missouri

has partnered with PERF to equip offenders with bank cards for accessing their own funds to make purchases in the facility's canteen. After the offenders' release, these cards can be linked to checking accounts that the bank is willing to establish for those who used their bank cards responsibly while incarcerated. This equips transitioning offenders with a basic survival tool, provides a local business with an opportunity to contribute to safe and orderly reentry, and expands the customer base for other local businesses.

Lessons of Committing to Evidence-Based Practice

The Basics of Evidence-Based Practice

The TPC model calls for the use of evidence-based interventions and programs for offenders. As the research on effective interventions mounts, and as jurisdictions focus increasingly on offender success as a community safety issue, the importance of evidence-based practice to transition and reentry becomes ever clearer. Interest and support for services and programs designed to change offender behavior continue to grow. To be credible, program interventions intended to change behavior must be built on the evidence, identify specific outcome measures, and be evaluated to demonstrate their worth—all essential concepts within the TPC model. Moreover, existing programs should be routinely reviewed for their effectiveness and adherence to the principles of evidence-based practice. The challenges facing jurisdictions implementing the model include the following:

- Creating sufficient program capacity to address the criminogenic needs of high-risk offenders.
- Ensuring that programs are effective and comport with the principles of evidence-based practice, namely:
 - Interventions must be targeted appropriately by risk, need, and responsiveness.

❑ Dosage must be appropriate.

- Creating the expectation that programs will be routinely evaluated and measured against their recidivism-reduction goals.
- Terminating interventions and programs that are ineffective.

When asked what had been learned from the TPC implementation process that would have been helpful to know at the beginning . . .

It would have been enormously helpful . . . to have been more fully aware of the value of developing a long-term strategic reentry plan in collaboration with other state and community agencies, of the need to design programs based on formal validated needs assessments, of the wisdom of instituting programs that are evidence based, with the understanding that every program should be designed with an evaluation component that identifies performance measures and routinely collects and analyzes data.

Had I known then what I know now I would have begun the work with a formal strategic three- to five-year plan and gradually constructed the pieces of reentry work incrementally based on evidence-based practice and individual assessments in a more sequenced and systemic manner.

—Roberta Richman, Assistant Director
Rehabilitative Services
Department of Corrections
State of Rhode Island

Strong leadership will be necessary to reshape practice to support these endeavors. Implementation will likely require change in population movement practices to allow offenders access to appropriate programming for appropriate lengths of time. To support such programming, leadership will need to secure adequate resources and funding both within institutions and in the community.

Programs Are Necessary but Not Sufficient

As one of the key leaders involved in early TPC implementation efforts in Missouri is fond of saying, “TPC is a philosophy, not a program.” Many jurisdictions have developed specific programs geared to working with offenders before and after release, and the TPC model assumes that some new programs will be essential, either with new funding or with redeployment of existing resources. Yet such programs will not be truly effective unless agency policy and practice begin with a valid assessment of risk and need, respond to failures in treatment or technical violations in treatment, and follow principles of good case management. TPC is not only about the implementation of effective programs, but also about the system change needed to support those programs appropriately.

One critical element of evidence-based practice is the involvement of staff—both correctional and noncorrectional—in efforts to enhance the motivation of the offenders with whom they come into contact. Evidence-based practice emphasizes that frontline staff in correctional facilities and community supervision agencies have the opportunity to influence offender change. Every meeting with an offender to discuss a case plan or consider the offender’s progress or challenges gives the staff member involved an opportunity to interact with the offender in ways that can enhance the offender’s motivation.⁸ Promoting motivational interactions requires reshaping staff roles responsibilities, skills, and performance evaluation.

Orientation to the Research

It may seem self-evident that reentry efforts should incorporate programs and treatment that work. Understanding precisely what that means requires some degree of self-education as transition efforts unfold. The National Institute of Corrections (NIC) has supported the development of a set of materials produced by the Crime and Justice Institute that synthesize the principles of evidence-based

practice and effective interventions with offenders (see exhibit 3-1). The principles are meant to guide policymakers and practitioners as they develop, fund, and evaluate program models. A full explanation of the principles of evidence-based practice and complete references linking the principles to the empirical research underlying them is available on the Crime and Justice Institute website, <http://crjustice.org/cji/evidencebased.pdf>.

Perhaps one of the most difficult of these principles to implement is targeting interventions by risk of reoffense. Within institutions, an offender's security level and housing assignment are often tied to an assessment of institutional misconduct or escape risk. Housing assignment often limits accessibility to programs, which may be in another unit or facility altogether, and significant crowding and high case loads can make access to programming problematic for any offender. However, targeting interventions can be a means of coping with limited resources because it provides a substantive rationale for selectively assigning program resources.⁹

Reentry efforts oriented to research must keep in mind that research is constantly changing. For an organization's practice to be evidence based, it must constantly refresh its understanding of the literature, review its own performance measurement data, and be a "learning organization"¹⁰ capable of changing course and modifying practice as new information becomes available.

The greatest reward so far is to have been part of an effort that is an extraordinary model for systems change in state government.

—Mark Stringer, Director
Division of Alcohol and Drug Abuse
Department of Mental Health
State of Missouri

Exhibit 3-1. Eight Evidence-Based Principles for Effective Interventions

1. Assess actuarial risk/needs.
2. Enhance intrinsic motivation.
3. Target interventions.
 - a. Risk principle: Prioritize supervision and treatment resources for high-risk offenders.
 - b. Need principle: Target interventions to criminogenic needs.
 - c. Responsivity principle: Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs.
 - d. Dosage: Structure 40–70 percent of high-risk offenders' time for 3–9 months.
 - e. Treatment: Integrate treatment into the full sentence/sanction requirements.
4. Skill train with directed practice (use cognitive-behavioral treatment methods).
5. Increase positive reinforcement.
6. Engage ongoing support in natural communities.
7. Measure relevant processes/practices.
8. Provide measurement feedback.

Source: Lore Joplin, Brad Bogue, Nancy Campbell, Mark Carey, Elyse Clawson, Dot Faust, Kate Florio, Billy Wasson, and William Woodward, *Implementing Evidence-Based Practice in Community Corrections: The Principles of Effective Intervention* (Boston, MA: Crime and Justice Institute, 2004), www.crjustice.org/cji/NICCCJI_Project_ICCA.pdf.

Being Prepared for Implementation

To be prepared to implement the TPC model, practitioners should appreciate both the potential impact of success, as well as the hard realities of the work ahead. The next chapter takes the reader through the steps of the TPC Implementation Roadmap, linking the discussion to extensive examples and illustrations from the eight pilot states whose programs are described in appendix I of this handbook.

Commit yourself to the long haul and form collaborations at every opportunity . . . Shared, real-time decisionmaking by persons with the authority to make the decisions forms bonds that are long lasting. And this work takes years and years, so those bonds are critical.

—Dennis Schrantz, Deputy Director
Planning and Community Development
Administration
Department of Corrections
State of Michigan

Notes

1. See appendix II, examples 9 (Georgia) and 10 (Michigan, New York, Rhode Island).
2. See appendix II, examples 1 (Indiana), 2 (Michigan), and 3 (Rhode Island).
3. See the assessment strategy section for each state in appendix I.
4. See Michigan's case management framework in appendix II, example 28.
5. See extensive examples from Oregon and Missouri in chapter 6.
6. Dale Parent and Liz Barnett, *Transition from Prison to the Community Initiative* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2002):4–5, NIC Accession Number 017520.
7. Carol Flaherty-Zonis, *Building Culture Strategically: A Team Approach for Corrections* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2007):15, NIC Accession Number 021749.
8. Scott T. Walters, Michael E. Clark, Ray Gingerich, and Melissa L. Meltzer, *Motivating Offenders To Change: A Guide for Probation and Parole* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2007), NIC Accession Number 022253. This recent NIC publication provides extensive guidance about the techniques of motivational interviewing as one way to engage offenders in the process of change.
9. The Washington State Institute for Public Policy also has published a concise and readable overview of a significant body of research on effective correctional interventions. See Steve Aos, Marna Miller, and Elizabeth Drake, *Evidence-Based Public Policy Options To Reduce Future Prison Construction, Criminal Justice Costs, and Crime Rates* (Olympia: Washington State Institute for Public Policy, 2006), www.wsipp.wa.gov/rptfiles/06-10-1201.pdf.
10. Peter Senge, *The Fifth Discipline* (New York: Doubleday Currency, 1990). See also Carol Flaherty-Zonis, *Building Culture Strategically: A Team Approach for Corrections*, pages 33–34.

CHAPTER 4

Implementing the Model

The TPC Implementation Roadmap

In light of the complexities of addressing the challenges of transition and reentry, the National Institute of Corrections (NIC) committed significant technical assistance resources to the eight states participating in the Transition from Prison to the Community (TPC) Initiative. Under a cooperative agreement with NIC, the Center for Effective Public Policy has been providing this implementation assistance and documenting the evolution of the TPC work in those states.

One tool developed as part of the assistance is a framework known as the TPC Implementation Roadmap, a sequence of 10 steps necessary to move a jurisdiction from its current situation to more seamless and effective transition and reentry practices. The steps are as follows:

1. Create and charter teams.
2. Develop a clear vision and mission.
3. Develop a workplan.
4. Understand current policy, practice, populations, and resources.
5. Align with evidence-based practice.
6. Conduct a gaps analysis.
7. Identify targets of change.
8. Develop an implementation plan.
9. Execute, monitor, adjust, correct.
10. Evaluate.

Exhibit 4-1 is the graphic representation of the roadmap. Down the left-hand side of the table are

the various elements of the transition process. Across the top of the table are the systematic steps that a team implementing the model should follow with respect to each element of the model. Each cell on the matrix represents a set of work tasks that must be completed. The cells are deliberately open, because each state will define the specific work to be done in each. These steps in implementation appear in logical sequence but often there may be a need for more than one iteration of a step. For instance, as the work proceeds, it will be necessary to charter task teams as specific objectives are selected, and it will likely be necessary to return to the gathering and analysis of information as more issues are defined.

At the bottom of the table a set of “conditions” is listed that provide the foundation for the implementation process. This part of the graphic communicates that the implementation effort must be based on strong leadership, vision, collaboration, information, evidence-based practice, and a commitment to system change. Throughout the process, each element of transition should be addressed—from sentencing through admission, assessment and classification, behavior and programming, release preparation, release, supervision and services, responses to violations, discharge, and aftercare. Also, throughout the process the requirements of a unifying Transition Accountability Plan should be considered. The roadmap graphic is the framework and outline of the process by which a jurisdiction would complete the work of implementing the TPC model.

This chapter discusses the 10 steps of the TPC implementation roadmap using examples drawn from each of the eight TPC pilot states to help

Exhibit 4-1. TPC Implementation Roadmap

Increasing public safety by reducing the threat of harm by released offenders and increasing offender success by fostering effective risk management, accountability for both offender and system officials, and community and victim participation

| Elements of the Transition Process | Components of an Implementation Strategy | | | | | | | | | |
|--|--|--------------------|----------|---|------------------------------------|---------------|-------------------|---------------------|-----------------------------------|----------|
| | Team(s) | Vision and Mission | Workplan | Understand Current Practice, Policy, Populations, Resources | Align With Evidence-Based Practice | Gaps Analysis | Targets of Change | Implementation Plan | Execute, Monitor, Adjust, Correct | Evaluate |
| Sentencing | | | | | | | | | | |
| Admission to Prison | | | | | | | | | | |
| Assessment and Classification | | | | | | | | | | |
| Behavior and Programming | | | | | | | | | | |
| Release Preparation | | | | | | | | | | |
| Release | | | | | | | | | | |
| Supervision Services | | | | | | | | | | |
| Responses to Violations | | | | | | | | | | |
| Discharge | | | | | | | | | | |
| Aftercare | | | | | | | | | | |
| Support for Implementation | | | | | | | | | | |
| <ul style="list-style-type: none">• Committed Leadership• Shared Vision• Collaboration Across Traditional Boundaries Within and Outside the Criminal Justice System• Good Information for Decisions• Evidence-Based Practice• Commitment to System Change; Identifying Common Interests and Mutual Benefits | | | | | | | | | | |

explain the process and illustrate how these states have used the process to make significant change. These examples are found in appendix II.

1. Create and Charter Teams

As mentioned earlier, significant system change requires leadership and detailed work—gathering information, evaluating performance, identifying options, and developing new strategies. Essentially, the engines of change for TPC are teams chartered by leadership at the highest levels of state government. Usually these teams are required on at least three levels:

- **State policy**—Representatives from the Governor’s office, cabinet members leading a range of state agencies, state court leadership, law enforcement, and statewide victim advocacy and ex-offender groups.
- **State implementation**—Deputy director-level officials from state agencies and representatives of private and community organizations.
- **Local/community**—District/regional staff of state agencies, local service providers, and local elected officials.

Specific implementation subcommittees and task teams may also be formed and then disbanded as their work is completed.

Although TPC envisions participation of stakeholders both from within the corrections community and from other agencies with some influence on or interest in transition, among most of the pilot states corrections has taken a lead role in inviting stakeholders to the table. This requires nontraditional collaborations, with correctional leaders reaching out to invite and encourage the participation of others. As the initiative got underway in one state, the director of corrections hosted a series of early morning sessions in his office that brought fellow cabinet members together on a monthly basis for the better part of a year. This laid the support and groundwork for those agencies assigning deputy

director-level staff to what became a statewide steering committee.

In Indiana the Department of Correction chaired both a policy group at the highest level of state government agencies and a steering committee from those agencies to conduct analyses and develop recommendations. Membership included the state police and the state departments of health and workforce development (see **example 1, appendix II**).

Variety of Teams

As the TPC Initiative has unfolded in the eight states, the specific approach to team formation has depended on differences in how states typically do their work. Some states have structured teams or groups as a way to gather broad input from interested citizens and organizations and to garner public support. In Michigan, an advisory group drawn from citizens, various organizations, and agency employees has numbered as many as 300 individuals during the course of the effort. Other states take other approaches. In North Dakota, working teams were organized around specific aspects of the TPC model and around evidence-based practice, whereas Michigan and Rhode Island took other approaches in their team configurations, based on their size and organizational frameworks (see **examples 2, 3, and 4, appendix II**).

Chartering

Another key aspect of team formation is the chartering of teams. As such groups are brought together, it is critical that they have a clear understanding of what is expected of them, what their timeframe is, who should be involved, and what resources they have. Participating states have made extensive use of team charters to provide clear direction and to enhance the productivity of teams at all levels. When Missouri organized a number of teams around substantive aspects of transition—housing, substance abuse, employment—it used team charters to clarify exactly what was expected of each team. The charter for

Missouri's Substance Abuse Ad-Hoc Team (**example 5, appendix II**) is a good example of how a charter can be an important tool in using teams to manage change.

Structure and Roles of Teams

Exhibit 4-2 presents information on the typical purpose, activities, and membership of the types of teams that states have found helpful in TPC implementation. Team membership frequently overlaps, both to facilitate communication and to capitalize on the specialized knowledge, experience, and credibility of key participants in the effort.

Team Member Roles

The implementation process outlined by NIC also encourages states to delineate specific roles and responsibilities for individual members of chartered teams. For instance, the Michigan Prisoner ReEntry Initiative, or MPRI as the TPC effort is known in that state, identified five roles for each team: cochair, facilitator, recorder, research coordinator, and liaison. Cochairs would define the agenda and guide the work of the group. A facilitator would prepare agendas and guide discussions to keep the group on task. A recorder would make sure that a complete record of the group's work was made and disseminated. A research coordinator would take responsibility for organizing efforts to gather and analyze information. A liaison would keep abreast of the work of other teams and how it affected his or her own team's efforts.

Substantive Focus of Teams

Typically, team and subcommittee efforts have focused on the seven decision points of the TPC model: assessment and classification, behavior and programming, release preparation, release decisionmaking, release revocation, supervision and services, and discharge. Michigan had these decision points in mind when it took the additional step of creating clusters of committees to avoid duplication and fragmentation. The clustering meant that the four teams working on assessment/

classification, inmate behavior and programming, inmate release preparation, and inmate educational/vocational and employment issues were charged with working closely together.

Structuring the Work Activities of Teams

Given the number of teams, the complexity of the work, and the extended period of time TPC implementation requires, tools for structuring committee work have proven helpful. A simple meeting template was developed and adapted for use by the working teams (see **example 6, appendix II**). It serves as a sort of generic agenda to keep a team's attention focused on goals, completion of specific tasks, and accountability. In addition to structuring meeting activities, the template also provides a standard format for recording the discussions, decisions, and participants at each meeting—creating a critical record of the work and accountability for each team's charge.

Because participants in this process are drawn from many different disciplines, issues, terminology, and operating assumptions must be clarified. In New York, for instance, the TPC Initiative assembled a glossary of criminal justice terms (see **example 7, appendix II**) to make certain that all terms routinely used in discussion would be understood by non-criminal justice participants. Another way of facilitating such "cross training" is the exchange of contact information with names, titles, agencies, and organizational charts.

Local Teams

The TPC Initiative assumes the importance of leadership at the state level. Correctional institutions, postrelease supervision (in many states), funding of social services, and sentencing policy are typically the responsibility of state government. However, as one TPC participant is fond of saying, "All reentry is local." As offenders leave prison, they are returning to communities where they will either be successful or not. The TPC model, as it has unfolded, has involved the development of critical partnerships at the local level, typically involving

Exhibit 4-2. Some Types of Teams Involved in TPC Implementation

State Level Policy Team

Purpose: To provide leadership, direction, authority, resources, decisionmaking to the statewide effort.

Activities: Establishing a vision, chartering implementation and task teams, providing resources, setting priorities, reviewing alternative proposals for change.

Membership: Governor's office, cabinet members, state court administrator, law enforcement, prosecution, leadership of statewide stakeholder groups (victim advocates, associations of county-level community corrections agencies, defense bar, community-based service providers).

Implementation Team (or Steering Committee)

Purpose: To present information and recommendations to the state-level policy team in support of the vision they have articulated.

Activities: Conducting information-gathering, analysis, and development of proposed priorities, changes, and shifts in policy and practice—and implementing the decisions of the state-level policy team.

Membership: Deputy director-level officials of state operating agencies, service providers, research and planning staff from participating agencies.

Implementation Subcommittees

Purpose: To develop specific proposals and implementation plans for specific elements of transition and reentry.

Activities: Becoming specialists on a specific reentry topic such as assessment, case planning and management, treatment programming of particular types—and developing specific proposals for change.

Membership: System experts on specific aspects of the system, potential collaborative partners.

Task Teams

Purpose: To carry out specific ad hoc assignments for the policy and implementation teams.

Activities: Organizing and conducting events to seek input or disseminate information about transition and reentry efforts, developing specific campaigns or strategies for community education.

Membership: Staff from partner agencies.

Local Reentry Teams

Purpose: To assist in soliciting support and involvement in transition efforts at the community level.

Activities: Forming collaborative case management teams to work with individual offenders, conducting analysis of existing resources/capacities to assist in transition, identify gaps, and marshal resources to ensure a range of resources are available.

Membership: Local elected officials, local community-based organizations involved in providing services to offenders, management and line staff of state agencies operating within communities to provide services to offenders in institutions and in the community.

representatives of state agencies who operate within communities, local elected officials, community organizations, service providers, victim and offender advocacy groups, faith-based organizations, and individual citizens. For example, the State of Missouri has local reentry teams that serve every county in the state. Michigan has commissioned and secured funding for local-level teams to provide services to transitioning offenders. In New York, federal Byrne funds and state funds have been used to support the work of County Reentry Task Forces (CRTFs).

In St. Louis, the Missouri Eastern Region Re-Entry Group Effort (MERRGE) Steering Committee has taken on the reentry challenge within the context of the state's Missouri Reentry Process structure. The local team is chaired by Missouri Probation and Parole and involves the Missouri Department of Mental Health, the State Division of Workforce Development, the Boone County Community Partnership, a St. Louis circuit judge, the University of Missouri (St. Louis), the Missouri Career Center, U.S. Probation, the mayor's advisor on housing issues, and community and faith-based organizations that provide services to offenders returning from prison.

Recruitment of local stakeholders calls for some creativity. In Missouri, the Missouri Reentry Process working teams, or MRP as the TPC Initiative is known in that state, developed an information piece that was circulated among agencies, inviting them to become part of the initiative. It introduced the concepts of transition and reentry, putting them in the context of desired results such as decreased rates of crime and unemployment and observing that those released from Missouri's prisons overlap significantly with the target populations of other state agencies. The document hits on some of the key themes that encourage such joint investment in transition: overlapping populations, universal interest in community safety, and benefits from

community stability. This tool can be found as **example 8, appendix II.**

2. Develop a Clear Vision and Mission

The leaders of any transition and reentry initiative must make the effort to articulate their goals for the future—why they are undertaking this work and how their state will be different in the future if they are successful. Within the TPC framework, this is a collaborative endeavor of all corrections stakeholders and noncriminal justice stakeholders. Once the effort has been made to bring diverse stakeholders to the table by identifying common clients, common interests, and mutual benefits that cross traditional boundaries, articulating a unifying vision and core mission becomes possible. This shared vision then creates the impetus to complete the work of collaborating on policies, procedures, information sharing, and outcome measures across agencies.

From the very beginning, this effort had a winning feel to it. The leadership at DOC was charismatic and visionary. The TPC model made perfect sense. . . . The task—reducing returns to prison—was crystal clear and apolitical. . . . The original steering team members were decisionmakers who were not afraid to call shots and take risks. . . . Everyone believed that the effort would have historical significance. We were right.

—Mark Stringer, Director
Division of Alcohol and Drug Abuse
Missouri Department of Mental Health

Given the changes in focus and purpose that criminal sentencing and corrections have experienced in recent decades, the work on vision and mission is critical to ensure the commitment of key stakeholders and unity of purpose. The vision statement should be written and widely shared so that it can provide direction and purpose for the significant efforts required to reshape transition and reentry. Although a vision statement is not meant to

communicate how a state will accomplish its future vision of reentry, it should make clear the direction of efforts and why they are important. A vision will also reflect the values, ideals, and principles of collaborative undertaking and provide an optimistic framework to guide the work.

All of the states involved in the TPC Initiative have crafted vision statements that link community safety with successful offender transition and reentry. Vision statements are often developed in a retreat setting that allows the leadership team to spend enough uninterrupted time together to discuss in depth the compelling nature of the reentry challenge and how they envision meeting that challenge. Georgia's TPC effort, the Georgia Reentry Impact Project, or GRIP as it is known in that state, provides a good illustration of how a clear, concise vision statement links successful transition with public safety, and how one state presented its TPC effort clearly as an initiative directly supported by the Governor. This particular document also brings in a statement of the specific mission of GRIP, another key product of leadership's work on reentry. (See **example 9, appendix II** for the GRIP vision statement, and **example 10, appendix II** for some other states' vision statements.)

3. Develop a Workplan

The subsequent steps of the roadmap encompass multiple tasks involving many agencies and individuals organized into a variety of teams. For an orderly movement through the process, the next step is the development of a workplan articulating specific information-gathering and analytic tasks in support of the teams' work. Specific timelines and assignment of responsibilities are important aspects of this work planning.

As teams are chartered and take on the work, first of understanding the present situation and then of developing strategies for change, a structured way of outlining specific objectives, tasks, schedules, and products will be essential. Each of the participating states has developed a structure for this.

Example 11 in appendix II presents the structure created by Rhode Island to manage the work of its various subcommittees.

4. Understand Current Policy, Practice, Populations, and Resources

Current reentry practices and outcomes so clearly need improvement that the temptation to move quickly to solutions is understandable. However, based on practitioner and researcher experience, the TPC implementation strategy includes a deliberate and collaborative review of the current situation to identify and then prioritize targets of change. Too often, public policy initiatives are begun on the assumption that the appropriate solutions are obvious and all that is needed is the will to put them in place. Because the corrections and reentry systems are complex, fragmented, geographically dispersed, and overlap the boundaries and interests of so many stakeholders, it is likely that no one agency or individual has a really clear picture of how things currently operate. To develop a clear strategy to move forward requires a shared understanding of the current situation.

Policy and Practices—Institutions, Release, and Community Phases

Once working teams are assembled, efforts should be undertaken to clearly understand exactly how current policy and practice shape the process of offender transition and reentry. This step in the process should result in a system map that charts the flow of cases through key decision points and includes the following:

- A review of policy and practice governing transition and reentry, including assessment, case planning, current transition preparation, and protocols for sharing information.
- A clear profile of the transitioning population including numbers, recidivism rates, times served, and access to programs.

- A resource inventory identifying current, formal interventions available for transitioning offenders both within institutions and in the community.

There are numerous strategies to be used in gathering and analyzing this information, but in general, the goal is to develop a clear picture of how cases move through the system and where the current situation works at cross-purposes with the goal of successful reentry. Critical areas to examine include assessment, case planning and management, preparation for postrelease housing, employment, substance abuse and mental health services, and linkages with informal networks of prosocial support.

The technical assistance team developed a primer on system mapping to assist the pilot states (see **example 12, appendix II**). This primer outlines a step-by-step process for creating a map of current reentry practices, adding quantitative information, and identifying areas that require further information gathering. It is critically important to conduct the system mapping in the context of a group discussion involving individuals with firsthand knowledge of various aspects of the system. These individuals would include both correctional staff (institutional and field, program and custody), service providers in institutions and in the community, and those who understand automated case management systems, the assessment protocols in place, and the guidelines governing discretionary release and responses to violations. **Examples 13 and 14, appendix II**, are maps developed by those involved with the Rhode Island TPC effort.

Offender Populations

Offenders transitioning from prison to the community are a large, diverse, and growing population. Understanding the risks, needs, dimensions, and other characteristics of the population is critical to planning appropriate interventions and case management.

Examples 15 and 16, appendix II, present the type of information that pilot TPC states found helpful to assemble in their work. The examples differ in the

level of detail about population, but that is to be expected. Available data systems and research capabilities vary from state to state and determine exactly how detailed and sophisticated an analysis will be possible. Whatever the limitations, however, it is essential that those planning changes in transition and reentry practices know how many offenders are typically released over a given period of time, what their current success rates are, and what factors are associated with success and failure.

Resources and Services

A critical element of the TPC model is the use of effective, evidence-based correctional programs of various sorts to address and reduce the criminogenic needs of offenders, particularly high-risk offenders. With the steep growth in prison population and need to deploy significant budget to build and maintain prison bed capacity, funding for institutional and community programs is generally regarded as insufficient. Nevertheless, most states have programs that should be documented and used to best effect. A first step is to catalog existing programs, target populations, eligibility requirements, costs (if offenders in the community, for instance, must pay for services), and accessibility (i.e., location and hours of availability). **Example 17, appendix II**, is an inventory that identifies precisely the nature, location, and capacity of program resources available within Georgia's correctional facilities.

Information and Measurement Capacity

One of the basic tenets of the TPC model is that practice should be based on evidence of effectiveness. This tenet implies that whatever program interventions we adopt should have a track record of success. It also implies that the leaders and managers of change must have good information to guide their work, including information about current practices, feedback about their own efforts, and documentation of outcomes. To be so well informed requires good management information, sharing of information across boundaries, and some

capacity for evaluation and research. As part of “understanding current practice,” the TPC implementation effort should take stock of those capacities. What information is routinely provided to managers and staff? How can that information be used to best effect? How can it be improved?

One of the most difficult challenges in conducting good transition planning is securing access to data from different state agencies. Participating TPC states confronted many difficulties in information and measurement capacity due to fragmentation of agencies, incompatibility of information systems, and rapid obsolescence of legacy systems. New York provides a good example of how to overcome information problems and generate good information. The New York TPC Initiative chartered a Research and Information Support Team (RIST) to build new partnerships and approaches in information sharing. **Example 18, appendix II**, outlines the problem of sharing case-level information and the solution devised by RIST. **Example 19, appendix II**, is the presentation that introduced this innovation to those involved in the TPC Initiative in New York. It provides a specific example of how the RIST partnership was presented to the New York TPC steering group with a list of the projects undertaken and of how one critical question of eligibility for benefits was addressed.

5. Align With Evidence-Based Practice

This step in the process addresses another implication of the commitment to use evidence-based practices: the need to review existing offender programs to determine the degree to which they comport with the principles of effective intervention. This step also asks teams to review overarching policies regarding the targeting of those interventions on the basis of risk, need, and responsivity. Situations where interventions fall short or where it is not possible to know of their efficacy become candidate targets of change under step seven in the TPC implementation roadmap.

Reviewing programs is perhaps one of the most difficult aspects of reviewing current practice, as it requires staff time and expertise or obtaining assistance from outside. It also means questioning the usefulness of programs that may be longstanding and popular, regardless of their foundation in evidence.

Of course, many correctional agencies have been making progress on this front for some years. Indeed, Oregon—one of the states that served as a model site for the TPC Initiative—is operating under state legislation passed in 2003 that requires the Oregon Department of Corrections and other agencies to allocate an increasing percentage of their program funding to evidence-based practices. The legislation stipulates that, beginning in July 2009:

The Department of Corrections, the Oregon Youth Authority, the State Commission on Children and Families, that part of the Department of Human Services that deals with mental health and addiction issues, and the Oregon Criminal Justice Commission shall spend at least 75 percent of state moneys that each agency receives for programs on evidence-based programs.¹

Example 20, appendix II, provides the full text of this Oregon legislation.

NIC has developed a range of resources and tools for operating agencies to use in reviewing programs. These materials include a checklist that agencies can use to review their current interventions² and a quality assurance manual with specific guidance on practices to enhance alignment with evidence-based practice.³ Other tools, such as the Correctional Program Assessment Inventory,⁴ are also available to states engaged in reviewing programs to see if their design and implementation match the best thinking in the field.

Be consistent, persistent, patient. Moving research into practice is a long-term commitment. It will take years to align your agency practices with the principles from research. So start with the basics: those three principles of effective interventions of targeting high-risk offenders, focusing interventions on criminal risk factors, and delivering programs in styles appropriate for the offender population. Then look to begin aligning your agency functions. For example, if you are going to target higher risk offenders, you must first know who they are. Then you will want to know how your programs and personnel resources are being invested.

—Ginger Martin, Assistant Director
Transitional Services Division
Oregon Department of Corrections

Alignment with evidence-based practice requires going beyond assuring the availability of sound, proven treatment programs. It also requires redefining staff roles to include interactions with offenders to enhance their motivation and engage them in the process of change. Chapter 5 of this handbook details the role of line staff as key influencers in offenders' motivation to change.

6. Conduct a Gaps Analysis

Having agreed on a vision for the future and developed an understanding of the present (about offenders, policies, practices, resources), teams will need to analyze the gaps that exist between where they want to be and where they are. This step of the implementation process involves a conscious comparison between current practices, resources, policies, and perspectives and those implicit in the TPC model. **Example 21, appendix II**, is drawn from early work conducted in Indiana under the TPC Initiative. Known as the Indiana Offender Reintegration Project, the effort conducted a careful review of practice and then articulated the gaps that existed between that practice and the principles of the TPC model. This document illustrates one way of compiling

information to highlight gaps or problems that might be addressed and of connecting them to the specific recommendations for change.

7. Identify Targets of Change

The gaps analysis will likely reveal a wide range of gaps or mismatches between the real and the ideal. For example, after completing their gaps analyses, the TPC policy team in Georgia and the TPC steering committee in Indiana identified many targets of change (see **examples 21 and 22, appendix II**). Leaders must then establish priorities. They will determine which problems are most urgent and important, what sequence makes most sense, what ingredients for change are necessary and available, and which are most important for moving practice closer to supporting successful reentry. Inevitably, there will be some changes that can be initiated rather quickly and yield measurable improvements. Other changes will require more time, effort, resources, stakeholder buy-in, or even legislation. Leadership and staff will be challenged to think strategically about how to move forward on targets of change. Recommendations emerging from the Georgia GRIP project provide a good example of how the various analyses can be used to articulate and support specific changes in practice (see **example 22, appendix II**).

The experiences of the eight states participating in the TPC Initiative indicate that targets of change corresponding to the components of the TPC model will include many of the following problem areas.

Case Management

As the TPC model was designed, the need for a single, dynamic case plan was recognized almost immediately. In the past, if case plans were prepared at all, they were prepared separately before incarceration as part of a presentence investigation or at some point during incarceration. Then, upon release, if a case plan had been prepared at all, it would be prepared all over again, without

benefit of information from the original plans developed by court or prison staff. The TPC model includes a Transition Accountability Plan (TAP), conceived of as a single, dynamic plan developed at the time of admission to prison or even before, incorporating the presentence investigation information and then updated and revised as the offender completes programs, acquires strengths, and prepares for release. It is intended to transfer to field staff for reassessment and updating in the community. It should include the results of assessments and identify the interventions appropriate to an offender's level of risk and criminogenic need. Each of the participating jurisdictions found they needed to design and implement a TAP because previous practices had simply not met these criteria.

The challenge of creating such a plan in electronic form so that it can be updated and shared is part of the TAP undertaking. Numerous agencies have invested in automated, electronic case-planning software that offers both opportunities and challenges. Such software typically populates certain fields in a case plan, drawing data from an automated assessment.

As efforts progressed in the eight states, it became apparent that a TAP was necessary, yet not sufficient, to glue together the principles and desired outcomes of the model. A plan was ultimately only a piece of paper or an electronic file. Also needed were a new way of interacting with offenders, a way to engage partners in this endeavor, and a way to integrate custody/security/surveillance with a focus on offender success. The need for a fuller concept of case management emerged, and a significant development effort was mounted as part of the technical assistance effort. Chapter 5 of this handbook details the new case management approach for transition and reentry, Integrated Case Management and Supervision.

Designing and implementing the TAP itself proved to be a significant challenge. Many of its basic, planned characteristics were difficult to implement.

Among these were linking it effectively to assessments, creating new protocols and data systems to support it, transforming it into electronic format that could be shared across agencies and divisions, training staff on developing improved case plans, and ensuring that it was updated to reflect changes in program completions and changing levels of risk and need.

Yet participating states made significant strides toward a single, dynamic, sharable TAP. Missouri's TAP (**example 23, appendix II**) is presently available in electronic form and can be shared across institutions and fields within corrections and with other agencies involved in the management of the case. Georgia is developing similarly automated case plans that can be shared with partnering agencies.

Assessment of Risk and Need

Corrections has always practiced various types of assessment. Within correctional facilities, classification for security and housing assignments is well established. Since the 1980s, risk classification to establish a "level of supervision" in the community has also become well established. The development of risk assessment techniques that identify both level of risk and level of criminogenic need is an important step toward ensuring that effective interventions are appropriately targeted to generate maximum recidivism reduction. Participating TPC jurisdictions are all either using, developing, or in the process of implementing assessment protocols that are designed to be used periodically during an offender's incarceration and postrelease supervision to guide participation in programs. This has been a major change for some states but it is essential to the TPC model. Oregon,⁵ Rhode Island, and North Dakota now use the LSI-R (Level of Service Inventory-Revised) or the LS/CMI (Level of Service/Case Management Inventory). Michigan and Georgia have implemented COMPAS (Correctional Offender Management Profiling for Alternative Sanctions). Missouri and Indiana have or are developing assessment protocols based on their

own populations, and New York has developed and is considering implementing its own risk assessment tool.

Targeting by Risk, Need, and Responsivity

Scarcity of sound, evidence-based programs to address offenders' criminogenic needs is a major target of change for the TPC states. Most correctional agencies report insufficient funding for, or unavailability of, effective correctional interventions. To compound the problem, offenders typically do not have access to programs that match their risks and needs and are delivered according to their learning styles. Although some of the pilot states have succeeded in securing foundation and federal funding to underwrite services, they have had to struggle to ensure that even the available programs are targeted effectively. For example, within institutions, access to programs often depends on an offender's security level and, hence, housing assignment. Housing assignment, in turn, has a major influence on proximity and accessibility of programs.

Release Preparation

Release preparation is a segment of TPC work that has received a great deal of attention. At least five states, Georgia, Indiana, Michigan, Missouri, and Oregon, have developed specialized housing units so that individuals nearing release can be located with others also preparing for release in housing with access to programs and, optimally, in close proximity to the communities in which they will reside after release. "In-reach" procedures that bring together a team of parole officers, institutional staff, and program providers have begun to emerge as a way to do preplanning with incarcerated offenders anticipating release. Such in-reach procedures are not well defined at this time, but typically involve the activities of field-based staff and resources in meeting with the offender before his or her release from prison, often with the collaboration of institutional case managers.

Nontraditional, collaborative partnerships are supporting this work, bringing together community organizations, employers, and service providers. In Indiana, for instance, a partnership between the Department of Corrections and a local bank has created the opportunity for inmates nearing release to have access to ATM cards. The cards are issued initially to give offenders access to their inmate accounts (e.g., to make authorized purchases in the facility's canteen). As inmates use these cards responsibly, they are introduced to a common aspect of community life. Upon release, they are able to open a bank account with the participating bank.

Survival Needs

As states have worked to encourage successful offender transition and reentry and to target programming to higher risk offenders, they have recognized that virtually all offenders, regardless of risk and criminogenic need, have basic survival needs as they return to the community. Things as simple as state-issued identification cards, a roof over their heads, a job, or a supply of prescription medicine have not always been available. Furthermore, little systematic attention has been given to helping eligible offenders access benefits such as food stamps, veterans' benefits, Medicaid, and disability benefits when they are released from prison.

Finding appropriate housing has been a significant problem for many returning offenders, and some TPC states have shown particular interest in developing new solutions in this area. In Georgia, a special team was created to identify possible resources and new housing partners to create options for inmates who were eligible for parole but had no acceptable housing plan. The Georgia team has been able to place hundreds of inmates in appropriate housing that was previously unavailable, thus allowing them to be released on parole. The state estimates that this placement has resulted in a cost avoidance of approximately \$4 million.

Special Populations

All offenders returning to the community from prison experience challenges and barriers, but these are not all alike. The TPC states have focused on women offenders, offenders with mental illness, and sex offenders as populations with distinct challenges. **Example 24, appendix II**, illustrates how Michigan has adapted the principles of evidence-based practice to guide its reentry work with women offenders. In Rhode Island, the TPC leadership has developed what they refer to as a “learning lab” within their women’s correctional institution to test and study the innovations considered for transition and reentry statewide. In Missouri, work with specialized case loads of women offenders is generating much higher levels of successful transition. North Dakota continues to focus on women as a population of special interest in its TPC work.

Release and Revocation

In several TPC states, paroling authorities still have extensive authority in discretionary release decisionmaking, and have become quite involved in the TPC efforts. In both Missouri and Michigan, for instance, the paroling authorities establish a tentative release date that provides a goal toward which the offender can work in completing the programs set out in the TAP. In the postrelease period, clear policy on responding to violations can be an integral part of an overall transition and reentry strategy.⁶

Parole boards do more than just make release decisions. We must also be concerned that offenders have the skills, tools, and resources that they need so that they don’t return and so that we reduce recidivism. We have to be concerned about risk and public safety—these are the two main concerns for all parole boards and the two main concerns for the Michigan Prisoner Reentry Initiative.

—Barbara Sampson, Chair
Michigan Parole Board

Supervision and Services

All the TPC pilot states are working with state and local partners, including private service providers, to ensure access for returning offenders to programs targeted to their risks and needs. New York’s Division of Criminal Justice Services, a key stakeholder in the state’s TPC Initiative, has provided funding and guidance in membership, roles, and responsibilities to local reentry task force teams. (**Example 25, appendix II**, provides the program announcement for this part of New York’s work on reentry.)

Discharge and Aftercare

Two critical questions arise once an offender has completed a significant portion of supervision. The first question is: How long must the offender remain under supervision? In some of the pilot states, offenders are eligible for early termination of supervision once they have successfully completed a portion of the supervision period. Some of the states, such as Michigan, have investigated the extent to which case termination options are being used, the consistency with which rules or policies are being applied, and opportunities to expand termination options for certain types of cases.

The second question is: What does the offender need to continue positive community reintegration efforts once supervision ends? For many offenders, a variety of specific criminogenic risks/needs or survival factors may require additional attention, support, or programming after the completion of supervision. TPC sites answer this question by developing a discharge plan with considerable involvement of the offender, positive social support members, and community program staff. The discharge plan should identify those actions or activities that need to be completed before the end of supervision and should outline opportunities in the community for continuing positive or necessary activities after discharge from correctional supervision (e.g., substance abuse programming, job preparation efforts, working with a mentor).

After discharge from supervision, the “aftercare” period begins, with continuing case management provided by local community providers, mentors, or other appropriate individuals. Missouri and Michigan have striven to develop effective discharge plans and involve appropriate community members in appropriate aftercare activities.

8. Develop an Implementation Plan

Once priority targets of change have been identified and agreed to, steering committees or policy teams will need to outline and clarify the general and specific changes most needed for the jurisdiction to realize its broader reentry objectives. They will also have to identify precisely how to move forward with complicated tasks such as modifying existing practice, developing and using new tools or approaches, integrating new work or work expectations into an existing framework, overcoming barriers to the exchange of information, and finding compatible technologies to allow for interagency communication. The states generally determined that it is important to create implementation teams or work groups that have a clear understanding of their responsibilities, are provided with specific timeframes for completing this work, and involve individuals who are most knowledgeable about the specific issues to be addressed.

In the words of one person who is involved with the work of an implementation team:

The best advice I could give to someone who is just starting to work with an implementation work group is threefold: 1) Recognize that successful implementation requires a long-term commitment, 2) Don't lose sight of what you're ultimately trying to accomplish through your efforts, and 3) Make certain you have the right folks on the bus and in the right seats.

—Michael Nail, Assistant Director
Corrections Division
Georgia Department of Corrections

In each TPC state workgroups were charged with implementing (or recommending to a higher level group) policy changes, new tools (e.g., assessment tools), modifications to training, and amendments to specific work practices. The workplans created by individual TPC states generally contained the goals and objectives, specific tasks, anticipated timeframes, and responsibilities of particular individuals for each implementation workgroup (see, for example, Michigan's implementation workplan in **example 26, appendix II**).

9. Execute, Monitor, Adjust, Correct

Once implementation work teams are ready to initiate changes, organizations must consider the extent to which staff, particularly frontline staff and firstline supervisors, have been prepared to carry out the planned changes.

Preparing the Organization for Change

The preparation of staff for significant change has three broad components that work together to create an environment that will support the implementation changes that will be developed. Despite the necessity of new policies, training programs, information or tools, or other modifications to the practices of an organization, what will matter most is how frontline staff, frontline supervisors, and middle managers embrace the need for and value of the changes and how they use the tools, information, or policies to guide their day-to-day efforts.

The first component might be termed general staff preparation. It may largely be focused on informational sessions that broadly discuss reentry topics and familiarize staff with some of the reasons why change is needed, the vision of the organization regarding reentry, the importance of working collaboratively with other organizations to accomplish mutual goals, and the research on evidence-based practices. These sessions should help staff appreciate the need to make certain changes in approach, method, or the tools used to do the work at hand. This type of organizational preparation usually occurs early in an effort and often is

complete before implementation work teams are ready to move forward with their efforts.

Each TPC state found an appropriate method for initiating this type of staff education—either through special TPC “kickoff” meetings or tailored training events for managers and selected staff or by taking opportunities at regularly scheduled meetings or conferences to explain and describe the value of moving forward with interagency reentry efforts. Whatever their form or occasion, these training or informational events introduced staff to reentry concepts and provided a foundation for further work. They created an opportunity for staff to reflect on their current practices and organizational culture and to see something of the intended process and future direction of reentry efforts in their jurisdiction.

The second component of organizational preparation involves managers within an organization preparing other managers, supervisors, or their counterparts in partnering organizations for the planned changes to policy, practice, or methods so that these individuals can, in turn, prepare their staff members for these changes. Significant change within organizations occurs when all levels of staff not only see and appreciate the nature or direction of intended changes, but also understand and embrace the practical implications of these changes for their work.

During this stage of organizational preparation, leaders of implementation efforts make presentations to their peers, managers in other divisions of their organization, or managers in other organizations. With this second component, some specific things may start to happen. Individual policies might be amended, training lesson plans developed or changed, or resources allocated differently. The changes in approach or method are now more visible, are being discussed by people other than the directors of organizations or the leaders of the top-tier reentry group, and are being incorporated into the formal structure and processes of the organization.

An example of this component of organizational preparation is the series of presentations recently made by the incarceration implementation team of the Georgia Reentry Impact Project to all wardens or superintendents and chief probation officers within the state and to participants at the Georgia Probation Association Conference (see **example 27, appendix II**). These presentations show leadership at work bringing change into the core functions of correctional agencies as they manage offenders and prepare them for reentry. They reflect the value of delivering reentry information in a variety of ways and at a variety of levels within and across organizational lines to change the focus and culture of the individuals who work within organizations.

The third component of organizational change is characterized by the skill building and more specific training that staff receive to help them do work in new ways. This training may involve using new assessment tools, creating improved case plans (or making better use of case plans), interacting with offenders in different ways at prerelease centers or in housing units, delivering information to offenders that will be critical to reentry planning, or addressing “survival needs” after release. This training might cover general topics, such as motivational interviewing or effective communication skills, or very specific topics such as how to properly fill out a new assessment form or how to inform an inmate about particular assistance available regarding housing, employment, or various community services.

Frontline staff must be knowledgeable about the specific work activities they are expected to perform, and frontline supervisors must encourage and support the way their staff are accomplishing their work after the new training. The modification of audit content or processes, recognizing the accomplishments of specific types of new work through praise or publications, and other practical supports may be used to encourage, support, and continue the use of new or improved work practices. Evidence of organizational change on this level would be the delivery of motivational

interviewing information within the context of overall reentry objectives, the development of a single case plan that is used by frontline staff across divisions or organizations to help promote successful offender outcomes, and recognition of staff in publications or at meetings for their implementation of new offender reentry practices.

The Work of Implementation Teams

During implementation, work teams will complete their assignments, implementing actions or recommending them to steering committees or oversight teams. Several implementation teams may be created or one large team with several subgroups. These teams do substantial problem-solving work and may often adjust their activities to meet new or unforeseen circumstances, such as substantial problems with incompatible information technology systems, statutory barriers that were not originally considered, the need for additional resources or personnel that may not be available, and the development of issues or problems that were not present when the implementation groups were created.

As they work, implementation teams will need to receive feedback and to consider emerging data or information so that they can determine if they are moving forward in the best possible manner. The development of “critical reentry indicators” may help not only these implementation work groups, but also steering committees and policy teams, to make this determination and to know whether substantial modifications to approach or method will be necessary. (See chapter 6 for more information on performance measurement.)

10. Evaluate

The kinds of measurement discussed in the previous section involve routine monitoring of data regarding operations of the various partner agencies, which generally are produced through routine management information systems. In addition to this tracking of management indicators, efforts to revamp reentry practices should also allocate or seek resources and expertise to conduct sound evaluation research to provide feedback to leadership about performance and about potential changes and refinements in course. At least one of the participating TPC sites—Michigan—has been able to secure significant foundation funding to conduct an outcome evaluation. Others are exploring partnerships with universities to conduct controlled research studies of the impact of their interventions and broader efforts towards reentry.

A Checklist for Tracking Progress Along the TPC Roadmap

Exhibit 4-3 is a tool for tracking overall progress toward implementation of the TPC model. The checklist walks through the major steps of implementation, asking the user to reflect on progress toward the various aspects of the model. Other, more detailed workplans will also be needed, such as Michigan’s method of tracking a lengthy list of specific tasks and activities (see **example 26, appendix II**). The TPC Implementation Roadmap Checklist is designed to help leadership take a broad view of how efforts are progressing and identify both accomplishments and areas for further attention.

Exhibit 4-3. TPC Implementation Roadmap Checklist

Completing the following checklist periodically during the TPC implementation effort can provide a concise overview of progress toward changes in transition and reentry practices.

| Implementation Step | Begun | In Process | Completed | Examples From the TPC Pilot States (See Appendix II) |
|---|-------|------------|-----------|---|
| 1. Create and charter teams. | | | | |
| 1. Has a statewide leadership team been established with cabinet-level leadership and support? Does membership include: | | | | |
| <ul style="list-style-type: none"> Representative of the Governor's office? Institutional, community corrections, and releasing authority? State agencies charged with providing services for health, mental health, substance abuse, vocational education, and youth and family? Any other key stakeholders? | | | | <p>Example 1: Indiana Policy Group and Steering Committee</p> <p>Example 2: Structure of Michigan's Prisoner Reentry Initiative</p> <p>Example 3: Rhode Island Team Structure</p> <p>Example 4: North Dakota TPC Working Group Structure</p> <p>Example 5: Missouri Substance Abuse Ad Hoc Team Charter</p> |
| 2. Has a deputy director-level steering committee been sponsored by the leadership team with a clear charter? | | | | |
| 3. Are local reentry task forces established at the city, county, or regional levels addressing the challenges of reentry in those communities? | | | | |
| 4. Do those local reentry task forces have membership both from state agencies and local communities? | | | | |
| 5. Does each of these teams have a clear understanding of ground rules for membership; a designated chair, facilitator, and recorder; and adequate staff support? | | | | |
| 2. Develop a clear vision and mission. | | | | |
| 6. Has your leadership team articulated a clear and elevating vision of the future? Do all participants understand how your communities will benefit if you are successful in your transition and reentry efforts? | | | | <p>Example 9: Georgia Reentry Impact Project Vision</p> <p>Example 10: Vision Statements From Three TPC Sites</p> |
| 7. Is your vision supported by a clear statement of mission, i.e., an overall outcome that is measurable and achievable? | | | | |

Exhibit 4-3. TPC Implementation Roadmap Checklist (continued)

| Implementation Step | Begun | In Process | Completed | Examples From the TPC Pilot States (See Appendix II) |
|--|-------|------------|-----------|--|
| 3. Develop a workplan. | | | | |
| 8. Does each of the teams working on transition and reentry have: | | | | Example 11: Rhode Island's Strategic Use of TPC Subcommittees |
| • A specific set of tasks for which they are accountable? | | | | |
| • A timeline for completion of tasks and subtasks? | | | | |
| • Clear assignment of responsibility for these tasks to individuals or subcommittees? | | | | |
| • A regular meeting schedule and way of reporting work to the leadership of the transition and reentry effort? | | | | |
| 4. Understand current policy, practice, populations, and resources. | | | | |
| 9. Has your effort undertaken the following: | | | | |
| • Creation of a system map that outlines how cases currently move through the system from sentencing (or before) through discharge from supervision (and after)? | | | | Example 12: A Primer on System Mapping |
| • Analysis of the current incarcerated, reentering, and supervision populations that includes information on numbers, profiles of offenses, risk levels, criminogenic needs, and deficits? | | | | Example 13: Rhode Island TPC "Mapping the System—Zone 1" |
| • Collection of data on current outcomes or performance of the transition process, including recidivism (e.g., rearrest, reconviction, return to prison), at different time intervals? | | | | Example 15: Missouri Reentry Process (MRP) Offender Populations Analysis |
| • An investigation into current barriers for offenders returning to the community? | | | | Example 16: New York's Transition From Prison to Community Initiative: Population Analysis |
| • A review of current policies and practices of criminal justice agencies and their partner agencies that affect transition and reentry, specifically those that create barriers or hinder access to helpful services and resources such as: | | | | Example 17: Georgia Risk Reduction Programming Available Through DOC |
| o Assessment? | | | | Example 18: New York TPC Strategy on Data Sharing |
| o Programming and interventions? | | | | Example 19: New York Presents an Information Strategy |
| o Release preparation? | | | | |

Exhibit 4-3. TPC Implementation Roadmap Checklist (continued)

| Implementation Step | Begun | In Process | Completed | Examples From the TPC Pilot States (See Appendix II) |
|--|-------|------------|-----------|--|
| <ul style="list-style-type: none"> o Release practices? o Supervision and services? o Responses to violations? | | | | |
| <ul style="list-style-type: none"> • A review of existing resources and services available to offenders within both institutions and communities? | | | | |
| <ul style="list-style-type: none"> • Completion of the Integrated Case Management and Supervision Checklist to assess current practices in case management? | | | | |
| 5. Align with evidence-based practice. | | | | |
| 10. Does your system assess offenders' risks and needs (using validated, actuarial assessment tools) at entry into the system and at various points thereafter, especially before release to the community? | | | | |
| 11. Does your system use positive incentives to enhance the intrinsic motivation of offenders to transition successfully without reoffending? | | | | |
| 12. Does your system: <ul style="list-style-type: none"> • Prioritize supervision and treatment resources for higher risk offenders? • Target interventions to offender needs related to their criminality (criminogenic needs)? • Take into account temperament, learning style, motivation, culture, and gender when assigning programs? • Structure 40%–70% of high-risk offenders' time for 3–9 months? • Integrate treatment into incarceration, transition, and community phases of the sentence? | | | | |
| 13. Do you employ cognitive-behavioral treatment methods? | | | | |
| 14. Do you use and emphasize positive reinforcement for desired behaviors? | | | | |

| Exhibit 4-3. TPC Implementation Roadmap Checklist (continued) | | | | |
|---|-------|------------|-----------|---|
| Implementation Step | Begun | In Process | Completed | Examples From the TPC Pilot States (See Appendix II) |
| 15. Do you engage ongoing support for successful transition from offenders' natural networks of support? | | | | |
| 16. Do you measure outcomes of your practices? | | | | |
| 17. Do you provide feedback to staff and offenders about behavior and outcomes? | | | | |
| 6. Conduct a gaps analysis. | | | | |
| 18. Has your team carefully considered what it has learned about current practices and resources in contrast to its vision of the future? | | | | Example 21 : Indiana's Gap Analysis and Targets of Change |
| 19. What are the gaps between where you are now, and where you want to be in your "preferred future"? | | | | |
| 7. Identify targets of change. | | | | |
| 20. You likely will identify many gaps between the current situation and where you would like your transition and reentry practices to be in the future. You need to prioritize your desired changes, which will become your targets of change. Have you identified likely targets of change for the following? | | | | Example 22: Georgia's Targets of Change |
| • Assessment practice. | | | | |
| • Programming and interventions with offenders. | | | | |
| • Targeting strategies for resources by risk, need, and responsibility. | | | | |
| • Release preparation. | | | | |
| • Work with special populations. | | | | |
| • Release and revocation practices. | | | | |
| • Supervision strategies and services in the community after release. | | | | |
| • Discharge and aftercare. | | | | |
| • Integrated case management and supervision. | | | | |
| • Case plans (e.g., do you have transition accountability plans in place?). | | | | |

Exhibit 4-3. TPC Implementation Roadmap Checklist (continued)

| Implementation Step | Begun | In Process | Completed | Examples From the TPC Pilot States (See Appendix II) |
|--|-------|------------|-----------|--|
| 8. Develop an implementation plan. | | | | |
| 21. Do you have a detailed implementation plan in place? (Because TPC implementation is a complex undertaking, you must support the work of teams in executing your plans for change. It is important to sustain efforts, to structure them with a detailed implementation plan, to require regular progress reports, and to adjust and correct strategy based on the experience of planning and implementing change.) | | | | Example 26: Michigan's Implementation Plan |
| 9. Execute, monitor, adjust, correct. | | | | |
| 22. Do you currently have procedures in place to define and track outcomes? (At a minimum, your transition efforts must include the development of outcome measures and the capability to collect, analyze, and use data on outcomes. The most basic measures would involve recidivism data—including arrests, convictions, and reincarceration—on offenders transitioning from prison to the community. Outcome data should be collected at 6 months postrelease and 1, 2, and 3 years thereafter.) | | | | |
| 23. Do you have procedures in place to document indicators associated with successful offender outcomes such as employment, sobriety, involvement in and completion of required treatment, and stable housing? (Your efforts should include the development of process or interim measures that would track improvements in such reentry indicators.) | | | | See chapter 6 for examples of approaches to measuring and tracking changes in recidivism, reentry indicators, and system change. |
| 24. Do you have procedures in place to track changes in your own system and ways of operating over time? (A measurement strategy should define and collect data that documents improvements in such things as assessment, case planning, and targeted interventions as offenders move through the transition and reentry process.) | | | | |

| Exhibit 4-3. TPC Implementation Roadmap Checklist (continued) | | | | |
|---|-------|------------|-----------|--|
| Implementation Step | Begun | In Process | Completed | Examples From the TPC Pilot States (See Appendix II) |
| 10. Evaluate. 25. Have you discontinued interventions proven ineffective and supported those demonstrated to contribute to recidivism reduction? Optimally, the stakeholders involved in this effort will also be able to identify research capability—within agencies, local universities, or other research organizations—to plan and conduct controlled studies to document the outcomes of interventions currently in use.) | | | | |

Notes

1. 72nd Oregon Legislative Assembly, 2003 Regular Session, Enrolled Senate Bill 267.

2. Implementing Effective Correctional Management of Offenders in the Community: Implementation Checklist, Revised August 22, 2005, <http://nicic.org/Downloads/PDF/Library/020171.pdf>.

3. *Implementing Evidence-Based Practice in Community Corrections: Quality Assurance Manual* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2005), <http://nicic.org/downloads/PDF/Library/021258.pdf>.

4. The Correctional Program Assessment Inventory (CPAI) is an inventory developed out of the meta-analysis literature on effective programs. CPAI consists of 75 items covering 8 components critical to the understanding of what constitutes an effective program (e.g., program implementation, client preservice assessment, program characteristics, staff characteristics, evaluation) and two areas

integral to effective programs (emphasis on evaluation and ethical considerations). All of the components and the questions asked of programs consist of factors influenced by reviews of the literature on effective correctional programs. P. Gendreau and D.A. Andrews, *Correctional Program Assessment Inventory (CAI)* (Saint John, Canada: University of New Brunswick, 1996).

5. In Oregon, most community corrections agencies use the LS/CMI, and the Oregon Department of Corrections is moving toward implementing this instrument.

6. See NIC's *Parole Violations Revisited: A Handbook on Strengthening Parole Practices for Public Safety and Successful Transition to the Community* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2004), <http://nicic.org/Library/019833>. This publication summarizes the work that preceded the TPC Initiative. A Web-based version of this handbook is available at <http://nicic.org/Library/020398>.

CHAPTER 5

Case Management: A Critical Element of the TPC Model

The eight states selected to participate in the National Institute of Corrections' (NIC) Transition from Prison to the Community (TPC) Initiative have been working to integrate the goals and philosophy of TPC throughout their systems, including at the individual case level. As they began the process of searching for a case management model consistent with TPC, the states and the Center for Effective Public Policy (CEPP) sought guidance from the published literature. To identify innovations being implemented in operating agencies, they reviewed websites, and conducted telephone interviews. These efforts provided good but limited information. The literature yielded a few examples of efforts to develop new approaches to supervision that integrate the results of the research on evidence-based practice¹ and document a balanced approach to managing offenders that is designed to lower rates of both technical violations and new arrests.²

CEPP and the states also identified a number of automated packages that guide staff through the assessment process and then integrate assessment information into case plans.³ They also found that the term "case management" has become more frequently used in the journals and in presentations at professional correctional conferences, supplanting in part the older term "supervision."⁴ Yet despite this apparent interest in the field, a detailed model that would guide the management and supervision of cases from the time of admission to prison until discharge from postrelease supervision in the community and that incorporated the principles and goals of the TPC Initiative was not readily available.

Developing the Integrated Case Management and Supervision Model

In response to this lack of an available framework to guide case management for transition and reentry, NIC asked CEPP to develop such a model, consistent with the TPC Initiative and based on the experiences of sites implementing the TPC model. The result is the Integrated Case Management and Supervision (ICMS) model. It is integrated because it provides a framework to bring together differing but ultimately complementary perspectives, concepts, implementation efforts, and outcomes.

ICMS responds to recent developments in the field of criminal justice and corrections that have motivated the quest for a new approach to supervision and case management:

- The great number of offenders returning from prison to the community has led to the understanding that virtually all offenders will be back in the community at some point. In the interest of public safety, criminal justice efforts from the point of first formal contact should anticipate and plan for transition and reentry. (Optimally, this would occur before trial, but may occur at the presentence stage or at admission to prison.)
- Criminal justice agencies are more aware that, to encourage successful reentry, they will need to collaborate among themselves and with other systems that serve or have some contact with the offender, the offender's family, the offender's community, and the victim.

- The principles of evidence-based practice are gaining wide acceptance, and there is a growing interest in how these principles can reshape and strengthen case management and supervision.
- Research on evidence-based practice indicates that not all offenders are alike and that resources should be targeted to offenders at higher risk of reoffending, both to enhance public safety and to maximize resources.
- A growing set of innovations around the country is seeking to broaden thinking and practices beyond a traditional “supervision” framework of monitoring compliance with conditions and meeting of contact standards. Examples of such innovations are Effective Parole Supervision (Georgia), Proactive Community Supervision (Maryland), Environmental Corrections (as outlined by Cullen, Eck, and Lowenkamp), and Ohio’s evidence-based approach to supervision.⁵
- Collaborative “case conferencing” in New York and Michigan involves stakeholders such as corrections, local service providers, and work-force agencies.
- In Missouri, offenders are becoming more involved in developing their own case plans and taking ownership in the outcomes.
- Institutional and field supervision computer systems in North Dakota are sharing information on specific cases on an unprecedented scale.
- In Indiana, local partners located within the reentry institution are involved in assisting with plans for reentering offenders.
- In Rhode Island, institutional corrections and postrelease supervision staff are working together on inmate reentry plans.
- In Georgia, a completely new risk assessment protocol is now informing planning for offenders’ transition.
- Elements of ICMS are in practice in each of the eight states, and efforts are under way to bring the entire model into everyday operations.

The ICMS model was developed in parallel with the implementation efforts taking place in the eight TPC states. Not only did the innovations and experiences of the eight TPC states influence the ICMS model, but the development of the ICMS model influenced the states’ implementation of TPC. The efforts have been interactive and mutually supportive.

With the collaboration and assistance of the JEHT Foundation, CEPP held two workshops in late 2006 and mid 2007 that brought representatives from some of the TPC states together, along with project staff, to push forward the thinking on the ICMS model. The goals, principles, and major activities of the model continue to evolve:

- Oregon’s county community corrections agencies are developing and using in-reach protocols as they prepare for prisoners returning from prison.

The rest of this chapter presents an overview of the ICMS model. Although the chapter provides more detail than do the other chapters of this handbook, the discussion that follows here is primarily for those involved in leading the implementation of the TPC model or in leading major changes designed to enhance successful offender transition and reentry. A more detailed resource designed to guide the efforts of teams charged with tailoring and putting the ICMS model into operation will be found in the forthcoming *TPC Case Management Handbook*.

Overview of the ICMS Model

Case management and supervision are the strategic use of resources at the case level to accomplish agreed-upon objectives. The ICMS

model is the application of this strategic use to enhance community safety through the prevention of future victimization. It seeks to reduce relapse and recidivism, encouraging offenders to be successful in support of safer and healthier communities. It uses a common framework and language to monitor progress and to update outcomes during the phases of incarceration, release, and community supervision.

In essence, ICMS is a framework that synthesizes the goals and principles of the TPC model into a way of structuring interactions with individual offenders to accomplish the goals of successful transition and offender reentry. While facilitating custody, control, and supervision, ICMS assesses and motivates offenders, providing targeted interventions to address their risks and needs during incarceration, during a release phase, and after release to the community. Michigan has adapted the model to what it calls “collaborative case management.”

Example 28, appendix II, defines collaborative case management and outlines its core values, vision, and mission, within the Michigan Prisoner ReEntry Initiative.

The ICMS model is based on a significant departure from past attitudes. First, and perhaps most importantly, it is based on a clear understanding and acknowledgment that successful transition and reentry go hand-in-hand with community safety. It also recognizes that simply incapacitating an individual for a period of time and then monitoring behavior after release has little hope of reducing risk, whereas combining incapacitation/monitoring with support for change has proven to reduce recidivism. Finally, the notion that an offender is actually to be involved in setting goals and making plans—rather than given instructions and monitored—represents a radical departure from past practice.

A key feature of the ICMS model is that it recognizes and remedies much of the fragmentation that

has characterized our efforts with offenders in the past. The transition accountability plan provides the roadmap for the ICMS process, linking risks and needs to specific programs in which the offender will participate. The model also creates a mandate and a framework for key partnerships between staff in correctional institutions and correctional staff involved in postrelease supervision, between correctional agencies and other stakeholders, and between the offender and those other individuals involved in case management. Each of these partnerships is a radical departure from past practice. The gulf between institutional corrections and field staff is of long standing, confirmed by organization charts, chains of command, agency policy, and even by geography. Similarly, the gulf between correctional agencies and other public agencies, private organizations, community groups, and individuals is just as wide.

Another significant characteristic of the model, particularly for line staff, is its incorporation of the principles of evidence-based practice.⁶ This has implications in a number of areas. Sound, empirically based and validated assessments must be completed to identify offenders’ risks and criminogenic needs. The model then requires that line staff be involved in building case plans that address those risks and needs—linking offenders with appropriate correctional interventions, services, and programs to reduce risk. What research suggests, in addition, is that as correctional staff interact with offenders, they should use communication and problem-solving skills to engage offenders in the process of change, thereby enhancing their motivation to change, which is critical to reducing risk.⁷ Evidence-based practice, then, implies a significant culture change for many systems.

Exhibit 5-1 highlights the aspects of ICMS that integrate important and balancing goals, practices, and roles.

Exhibit 5-1. Features of the Integrated Case Management and Supervision Model for Reentry

Policy and system change integrated with day-to-day operations

Implementation of the Integrated Case Management and Supervision (ICMS) model begins at the highest leadership and policy levels within a state government. It recognizes that an effective approach to transition requires system change, redefining roles, responsibilities, building partnerships, and changing the way business is done. Unlike models of case management or supervision that focus primarily on what a line officer does (e.g., so many contacts of such a type per month, soliciting help for an offender from a community program), the ICMS model is supported explicitly by leadership, policies, procedures, assessment tools, program interventions, and organizational-level partnerships that support the work of line staff as they manage individual cases.

Community safety integrated with offender success

Too often in the past, correctional professionals have viewed the interests of the community and the interests of offenders as diametrically opposed. The TPC model generally and its ICMS model specifically recognize that, if an offender returning to the community can successfully transition (e.g., without reoffending, while supporting a family and paying taxes), then the interests of the offender and the community converge.

Custody, supervision, and monitoring integrated with case management and support for change

Emerging evidence about effective interventions suggests that treatment targeted to risk and criminogenic need is associated with reduced recidivism. Interventions are no longer simply a period of incapacitation through incarceration followed by monitoring offender behavior after release; rather, interventions geared to changing behavior are now becoming accepted. Instead of abandoning external controls and efforts to hold offenders accountable, this model balances appropriate supervision, surveillance, and compliance monitoring with effective treatment interventions.

Assessment and planning integrated with specific intervention activities

Assessment has been a common activity in corrections for decades. Until very recently, assessments were used to determine how much security (within institutions) or surveillance (during probation or parole) was required to manage the risk of an offender. The ICMS model specifically links assessments to interventions designed to reduce risk by addressing criminogenic needs beginning with sentencing and continuing through incarceration, release, postrelease supervision, and discharge.

Prison case management integrated with community supervision and case management

New case management approaches are surfacing in the literature, largely directed at offenders who are under parole or probation in the community. The ICMS model explicitly spans institutional, release, and community phases, recognizing the importance of a coherent management strategy across these three aspects of an offender's sentence. Of particular importance is a seamless transition between treatment interventions used during incarceration and those used in the community. Consistency in approach, building on past progress, and using information about past treatment experiences are critical to effective interventions and offender success.

Efforts of case managers (in prison and in the community) integrated with efforts and responsibility of offenders themselves

A traditional approach to offender custody and supervision is to define what is expected of the offender—compliance with rules and conditions—and then define the role of correctional staff as monitoring compliance with those rules and conditions. The ICMS model integrates these two streams of activity so that correctional professionals interact with offenders in supportive ways and offenders acknowledge and work to address their criminogenic needs. That is, offenders take

Exhibit 5-1. Features of the Integrated Case Management and Supervision Model for Reentry (continued)

responsibility for participating in, rather than simply complying with, efforts to reduce their risk.

Work of case managers integrated with involvement in specific “programs”

For some time, progressive correctional professionals have been looking to literature on evidence-based practice to guide them in developing and using specific programs for offenders to address criminogenic needs (e.g., cognitive restructuring programs, effective substance abuse programming, employment and education programs). ICMS recognizes that the interactions offenders have with custody staff and correctional case managers in institutions, or with parole officers/case managers in the field, are also “interventions” that can engage offenders in the process of change, enhance their motivation, and help them to maintain change.

Case management integrated with case planning

This aspect of the ICMS model recognizes that working with offenders on transition requires not just developing a plan (such as the Transition Accountability Plan identified in the TPC model), but understanding that there is a whole set of roles, responsibilities, and activities to be undertaken by the offender, the case manager, the case management team, and other staff in implementing the plan.

Automated case management systems integrated with human case management

A number of jurisdictions have had the resources and foresight to design (or tailor existing) automated case management systems (e.g., the Maryland Offender Software for Case Empowerment and the Level of Service/Case Management Inventory currently in use in Oregon). These software packages allow line staff to enter the responses to an assessment protocol directly into a database. The software then generates an

assessment report and walks staff through the development of a case plan, outlining interventions that might address the top criminogenic needs. These are very powerful tools that assist line staff in moving accurately and efficiently through assessment and planning. (Considerable training of staff and tailoring of the software are required.) The ICMS model acknowledges that to truly engage case management, such tools must also be integrated with the subsequent efforts of a case manager or case management team (e.g., in undertaking certain activities, interactions with offenders, and capturing of information and progress).

Recognition that not all offenders are alike integrated with the recognition that offenders have many similarities

Individual assessments and development of case plans are important and are repeatedly updated through the steps of the ICMS model. At the same time, the model builds on the fact that line staff find it very helpful to think about the similarities of groups or types of offenders in developing “tracks,” or specialized case loads, to enhance offender success.

Resources from the correctional system and other formal systems integrated with informal networks of support

The principles of evidence-based practice suggest that it is critical to link higher risk offenders with specific programmatic interventions geared to meet their criminogenic needs. In addition, those principles indicate that it is very important to link offenders with networks of formal and informal support that will reinforce prosocial values and provide assistance as they work to change their own behavior patterns and to reintegrate into the community. The ICMS model specifically highlights “resource stakeholders” who can assist in mobilizing transition resources such as housing, mentorship, and other social supports.

continued on 58

Exhibit 5-1. Features of the Integrated Case Management and Supervision Model for Reentry (continued)

Resources mobilized and/or directly managed by correctional agencies integrated with services/resources accessed through noncorrectional agencies

Although not as extensive as many would prefer, treatment interventions and other resources directly

provided and/or funded by correctional agencies do exist. The ICMS model specifically calls for building collaborative partnerships with other service delivery networks at the policy and operational levels to bring a broader range of resources to bear in the management of cases.

Goals of the ICMS Model

The first step in moving toward the ICMS approach is to clarify the goals for individuals moving through the correctional system. On both the institutional and the community sides, the goals of the TPC model and its approach to case management and supervision are (1) community safety through both the security and custody of institutions during a period of incarceration and (2) the successful transition of offenders from prison to the community once they have served their periods of incarceration. Over time, attainment of these two goals would be measured through reductions in recidivism.

In practice, collaborative teams at the state policy level involved in TPC implementation have set additional goals beyond crime reduction for their interactions with offenders (e.g., building stronger communities and families through enhanced employment, treatment of mental illness, educational attainment). The ICMS model also lends itself to such a broader set of goals because it deliberately brings to the table stakeholders who are involved in the provision of services that support those goals.

Elements of the ICMS Model

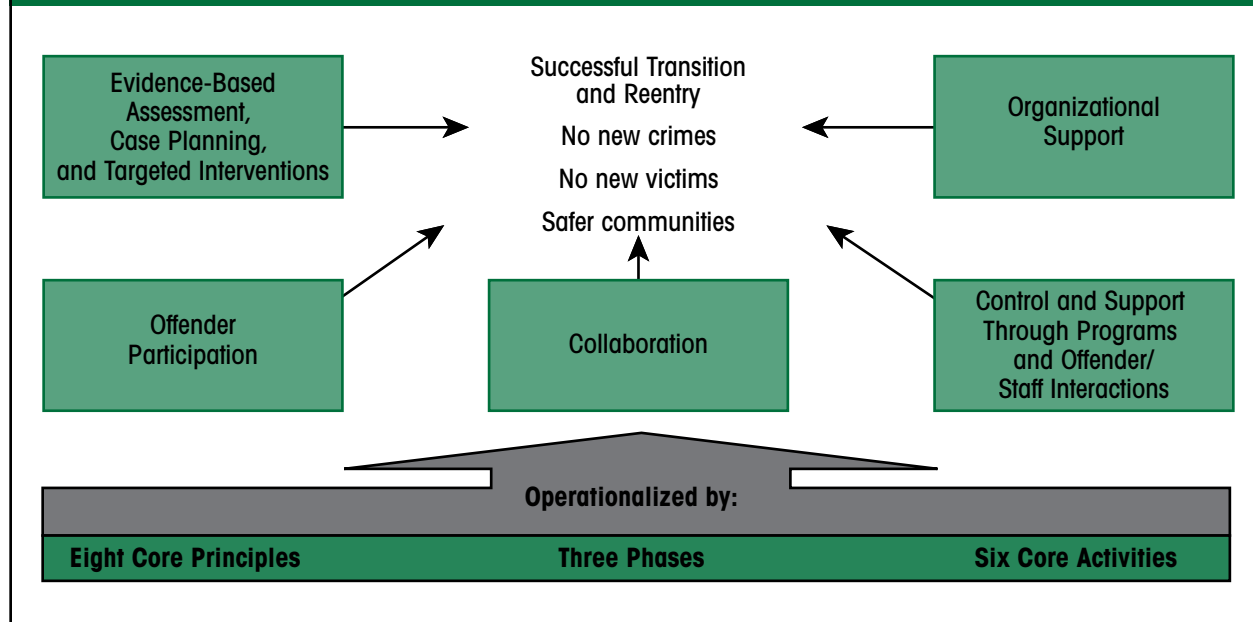
The Integrated Case Management and Supervision model has five components. As illustrated in exhibit 5-2, these components embody eight core principles and are implemented in three phases through six core activities. Each of these elements of the ICMS model is addressed below.

Eight Core Principles

Implementing ICMS demands a firm focus on the principles and values that underlie it. The ICMS model requires a commitment to the following eight core principles:

1. **Supervising and managing offenders** to enhance successful transition and reentry for community safety.
2. **Engaging case management and supervision** from admission to prison (or before) through discharge to the community (and beyond) in a coherent and integrated process. The largely fragmented process now in existence involves significant disconnects between what happens to offenders in prison and what happens after they are released to supervision.
3. **Using the principles of evidence-based practice.** This principle demands that policymakers use the lessons emerging from the research to shape their practices and use of resources, as specified in the next two principles.
4. **Basing supervision and case management plans on empirically based and validated assessments of risk and criminogenic need.** This principle requires a commitment to selecting and implementing assessment protocols that are valid, reliable, and normed to a jurisdiction's populations.
5. **Targeting supervision and case management by risk and needs** to have maximum impact on

Exhibit 5-2. Integrated Case Management and Supervision Model



reducing recidivism and enhancing community safety. This principle implies that choices will need to be made about where to use resources, with some offenders receiving proportionately more supervision/treatment and others receiving less.

6. **Engaging the offender in the process of change** by using supervision and case management interactions to enhance motivation. This principle implies that efforts will be made to engage offenders in the process of change during the course of incarceration and postrelease supervision.
7. **Defining supervision and case management as a collaborative process** that involves correctional staff (both institutional staff and field/community staff), community service providers, and informal networks of support such as families, mentors, employers, and associates. Such collaboration requires the close integration of efforts within correctional institutions with efforts in the community and also the involvement of non-criminal justice partners at all stages of the process.

8. **Forming multidisciplinary supervision and case management teams** to work with the offender through assessment, case planning, and implementation. This requires that, at the case level, correctional staff work collaboratively with others in a team approach to supervision and case management.

Five Components

The components of the ICMS model are those aspects of the model that most distinguish it from past practice in corrections and that are necessary to achieving its stated goal of community safety through successful offender transition and reentry:

1. Evidence-based assessment, case planning, and targeted interventions.
2. Participation of the offender.
3. Collaboration.
4. Control and support through programs and staff/offender interactions.
5. Organizational support.

Evidence-Based Assessment, Case Planning, and Targeted Interventions. The ICMS model involves a

continuing process of assessment and dynamic case planning and implementation based on evidence. Plans for individual offenders are targeted by risk and criminogenic need—during incarceration, during the release phase, and after release to community supervision and beyond.

Participation of the Offender. Much of traditional correctional policy and practice defines the offender's primary responsibility as compliance with rules within institutions and compliance with conditions of supervision in the community. The ICMS model expands the offender's responsibility to active participation in risk reduction. It recognizes that motivation for change is critical to offenders' success and employs techniques to enhance motivation for change.

Collaboration. Developing case plans and implementing and changing them over time involves collaborative partnerships among correctional agency personnel (institutional and community), other service providers and community organizations, and the offenders and their informal networks of social support. This collaborative approach is adopted at a variety of levels and across a range of boundaries. For instance, at the highest policy levels in a state, teams involving cabinet-level officials from a range of agencies will set expectations, direct the building of operational working protocols, and make resources available. Within corrections, collaborative work will involve both custody/supervision staff and program staff from institutions and the field. At the community level, collaboration will require involvement of correctional staff, other agency staff, community organizations, and informal networks in working with individual offenders.

Control and Support for Offender Change. The ICMS model combines custody/control/supervision with interventions specifically geared to reducing the likelihood of recidivism. It also views staff interactions with offenders as opportunities to engage the offender in the process of change.

Organizational Support. Implementation of the ICMS approach to managing and supervising offenders will, in many agencies, involve significant change in organizational norms and culture. The model clearly articulates the need for significant organizational support—including strong leadership at all levels for a deliberate organizational development strategy. This strategy would identify changes in organizational infrastructure, culture, and practices that must be implemented to support the ICMS model. This, of course, is a major part of the organizational change process required to implement the overarching TPC model (see "Lessons Regarding Change in Correctional Culture" in chapter 3). Organizational support will address such things as policy and procedures, staff job descriptions, staff performance evaluations, and management information systems.

Six Core Activities

Given the goal, principles, and components of the model, certain core activities will be essential to its implementation. Staff will need to know what is expected of them to bring the model into practice. What will they do to operationalize this new model? What are the activities in which line staff will be engaged? The ICMS model expects that staff will do the following:

1. Conduct assessments of offenders' risks, needs, strengths, and environment.
2. Form, participate in, and lead case management teams that work collaboratively.
3. Develop and implement—along with offenders and other partners within both correctional and other agencies—a transition accountability plan geared directly to the level of offender risk and the criminogenic needs.
4. Provide or facilitate access to programs and interventions to address risk and needs.
5. Involve offenders in the case management process and engage them in the process of change, making efforts to enhance their

motivation (e.g., by using incentives for positive performance).

6. Review progress and adapt plans accordingly over time, including monitoring conditions of supervision and responding appropriately to both technical and criminal violations.

For many jurisdictions, these activities are a radical departure from past practices that cast line staff primarily in a monitoring function—whether that be monitoring behavior and compliance with institutional rules by custody staff in institutions, or monitoring behavior and compliance with conditions of supervision by supervision staff in the community. Given these new expectations for staff activities, it will be absolutely critical to relieve staff of some responsibilities to enable them to take on these new roles. Ensuring that staff are not spending time on requirements directed at low-risk offenders will be particularly important.

Three Phases

The ICMS model structures activities from the time a person is admitted to prison, or before, until that individual is released from correctional supervision into the community, and even beyond. The model distinguishes three distinct phases, however, because challenges, activities, resources, and milestones will differ across time. The phases are intrinsically interrelated with the second phase building on the first and the third phase building on the first two.

- **Phase 1: Incarceration (see exhibit 5-3).** This phase lasts from admission to prison until roughly 6–12 months before release. This phase involves initial assessments, establishment of an anticipated release date, and development of a transition accountability plan to guide programming within the institution over the entire length of anticipated incarceration. This programming

Exhibit 5-3. Integrated Case Management and Supervision, Phase 1: From Admission Until Release Phase Begins

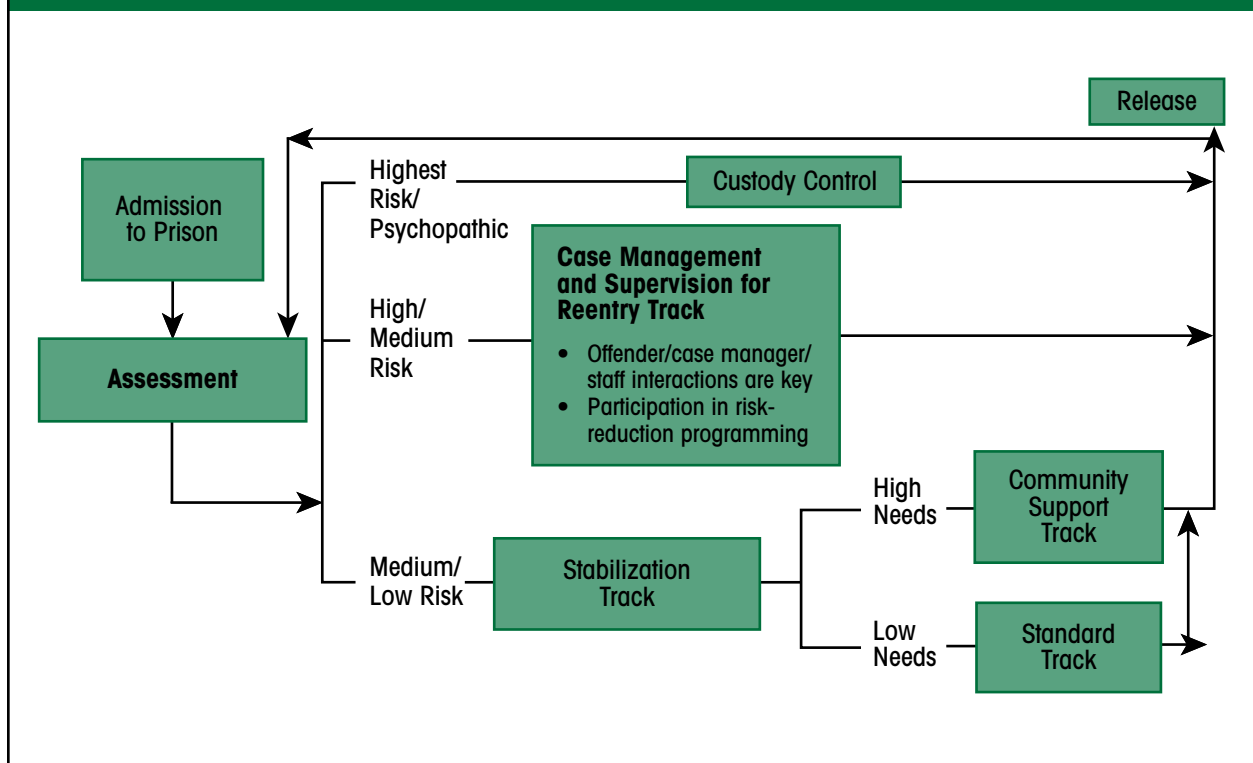
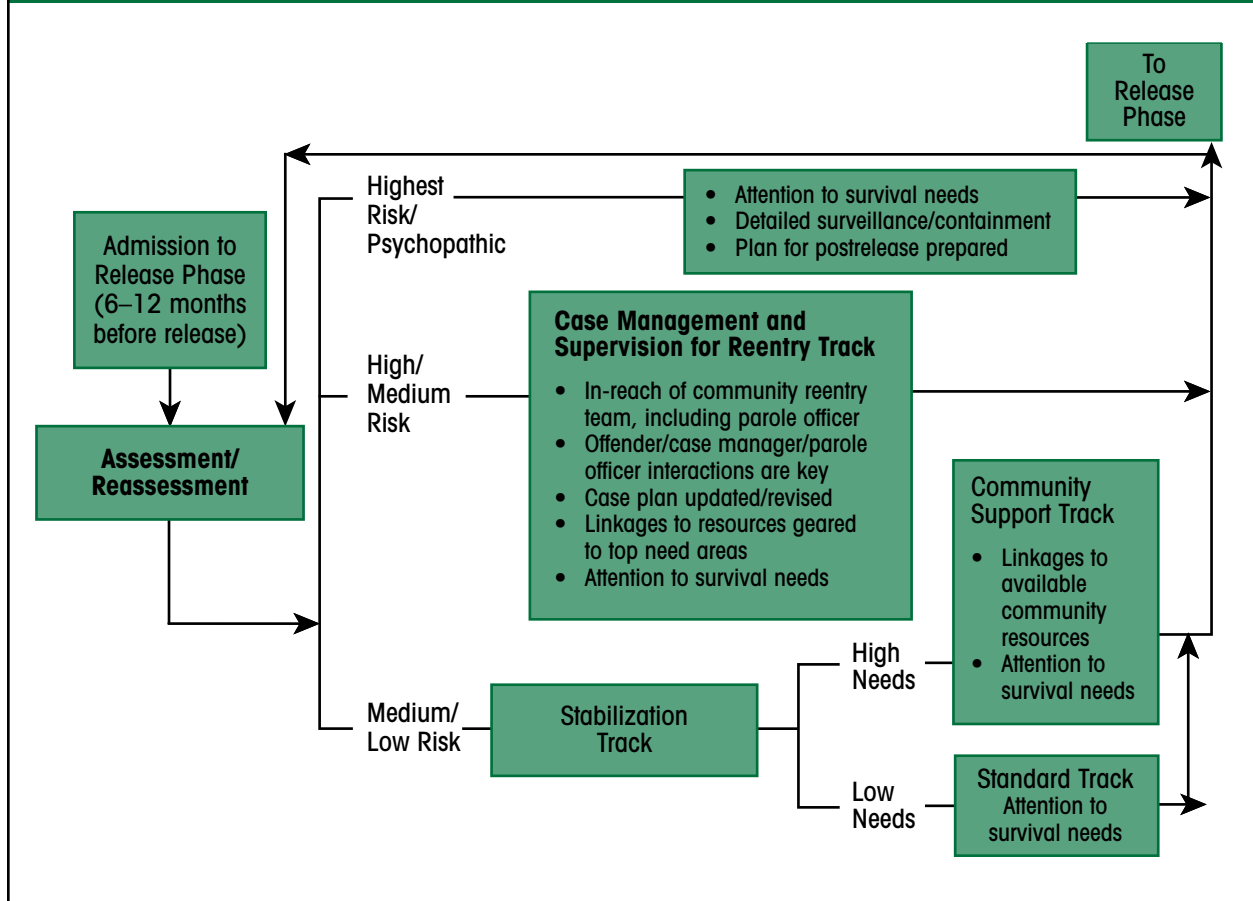


Exhibit 5-4. Integrated Case Management and Supervision, Phase 2: 6–12 Months Before to 6 Months After Release



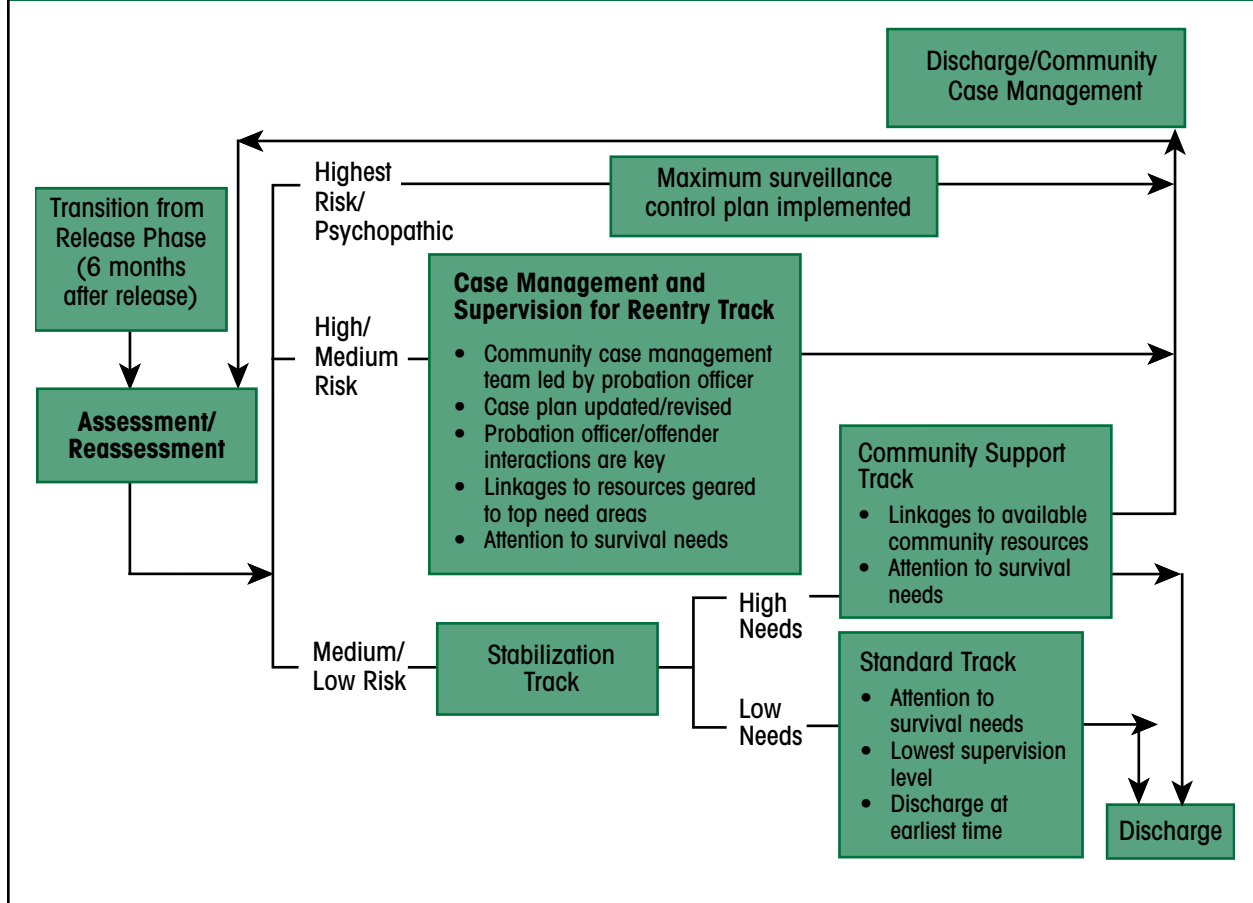
anticipates release and is geared to prepare the offender to be able to transition successfully, without reoffending.

- **Phase 2: Release (see exhibit 5-4).** Phase 2 begins 6–12 months before release and stretches through the first 6 months after release. This phase involves completion of remaining programming before release, establishing plans for housing and employment, establishing plans for needed community services in substance abuse and mental and physical health, and survival needs such as identification, application for benefits, and connections with informal networks of support. This phase continues through release until stabilization is accomplished.

- **Phase 3: The Community (see exhibit 5-5).** Phase 3 extends from 6 months after release through discharge from supervision into the community and beyond. This phase involves the long-term stabilization of the offender and, for those with significant relationships with community support networks, the movement of major responsibility for case management to those appropriate agencies.

The phases of the model reflect the assumption that case management will require different strategies and likely different partners as an offender moves through the ICMS process.

Exhibit 5-5. Integrated Case Management and Supervision, Phase 3: The Community Phase



Targeting Strategy: Tiers of Case Management Strategies

The ICMS model adopts a targeting strategy that integrates the principles of evidence-based practice into the core operations of correctional agencies and their partners, making explicit the fact that different “tiers” or “tracks” of case management are appropriate for offenders of different risk levels. For decades, probation and parole agencies and correctional institutions have engaged in “classification” efforts to articulate different groups of offenders and their varying needs for security, supervision, and interventions. Within prisons, custody classifications have served primarily to identify at what security level an offender must be housed to prevent violence and disciplinary problems. In community corrections, classification

has been used to assign the level of supervision for an offender, based on risk, and to determine whether assignment to a specialized case load (e.g., drug offenders, sex offenders) might be appropriate. Targeting seeks to ensure that individuals with higher levels of risk and need receive interventions targeted specifically to those needs, and that offenders at lower levels of risk and need receive fewer resources, both in security/custody/supervision and in programming/services/interventions.⁸ Targeting can be thought of as a way to allocate resources in line with an agency’s mission and with desired outcomes. It assumes that resources are limited and tries to “get the most bang for the buck.”

Because the ICMS model includes the reduction of recidivism as a primary goal, the targeting strategy

adopted here is geared to ensure the matching of offenders' level of risk and criminogenic need with appropriate interventions. It is not sufficient simply to assess offenders' risks and needs. This must be supported by policies, procedures, and allocation of resources to ensure that individuals with higher levels of risk and need will receive interventions targeted specifically to those needs. In addition, policies, procedures, and allocation of resources must be designed such that offenders at lower levels of risk and need also receive fewer resources—both in terms of security/custody/supervision and programming/services/interventions. The ICMS model incorporates several case management “tracks” that reinforce the targeting of resources, services, as well as staff time. Offenders with higher risk and needs are managed using the full panoply of assessment tools, programming, and staff time and attention. Individuals with higher risks and needs have a more detailed and resource-intensive transition accountability plan that includes specific objectives to address the several highest need domains. Michigan has adapted this ICMS model as part of its TPC implementation, basing levels of supervision on assessed risk as part of its collaborative case management strategy (see **example 29, appendix II**).

Regardless of track, however, the ICMS model requires that upon release, all offenders receive attention for basic survival needs and linkages to benefits and services to which they are eligible. This would include assessment of medical and mental health needs, strength assessments, eligibility for federal benefits, identification, housing issues, employment, and connections with informal networks of support. A basic transition accountability plan must be completed for every offender. Exhibit 5-6 lists some of the typical resources involved in case management and how they might be targeted to create tracks for offenders. Offenders low on the risk scale would receive much less in the way of targeted programs and less time and attention from staff.

Organizational Support for ICMS

Although case management is the strategic use of resources to accomplish specific outcomes at the case level, the efforts of entire organizations—and the entire system of agencies involved in the TPC collaboration—must be geared to support the work at the case level. As noted above, support at the organizational level is critical to implementing the ICMS model and to the TPC model overall. This following section discusses the kinds of support that leaders and policymakers need to provide in order to reshape their organizations to accomplish the goals of successful transition and reentry and enhanced public safety.

Tools

In order to carry out their responsibilities under ICMS, staff will need a set of tools, created and sanctioned by agency policy, that will enable them to complete their work with a high degree of quality.

Assessment Protocols

Empirically based assessments of risks and needs are absolutely essential to the implementation of the TPC model. Although many jurisdictions have such protocols in place, for those that do not, this will be an important change in practice. These tools must go beyond the typical classification tools used for housing and security assignments in correctional institutions. They must also go beyond static assessments of risk, to include identification of criminogenic needs, so that appropriate intervention strategies can be employed.

Case Plan

The TPC model calls the case plan, a key tool, the Transition Accountability Plan (TAP), and several of the TPC pilot states have adopted this name. However, the exact title of the case plan is not important if it has the characteristics essential to supporting good case management and supervision.

Exhibit 5-6. Example of Targeting Case Management and Supervision Resources

| Services | Highest Risk Offender | High- or Medium-Risk Offender | Low-Risk Offender | Low-Risk, High-Need Offender |
|---|-----------------------|-------------------------------|-------------------|------------------------------|
| Assessment of risk and needs | ✓ | ✓ | ✓ | ✓ |
| Collaborative case management and supervision team | | ✓ | | |
| Assessment of specific program needs | | ✓ | | |
| Designing and implementing case management and supervision plan with targeted interventions | | ✓ | | |
| Supervision/case management interactions that engage offender in process of change | | ✓ | | |
| Participation in EBP programs targeted by risk and need | | ✓ | | |
| Periodic reassessment moves to other tracks | ✓ | ✓ | | |
| Access to entitled benefits | ✓ | ✓ | ✓ | ✓ |
| Informal networks of support | ✓ | ✓ | ✓ | ✓ |
| Access to routine programming (institutional) or community resources (community) | ✓ | ✓ | ✓ | ✓ |
| Addressing survival needs | ✓ | ✓ | ✓ | ✓ |
| Maximum control and surveillance | ✓ | | | |
| Periodic reassessment moves to other tracks | ✓ | ✓ | | |
| Link to noncorrectional resources | | ✓ | | |
| Minimum supervision | | | ✓ | ✓ |
| Early discharge | | | ✓ | ✓ |
| Access to community services per needs | | | ✓ | ✓ |

EBP = evidence-based practice

The plan must be based on good, empirically based and validated assessments of risk and needs; indicate appropriate interventions to address the highest areas of criminogenic need; and be updated to reflect progress. It must be developed early in the period of incarceration, shared with members of the case management team, and follow the offender through his/her time in the institution and under postrelease supervision and beyond. Optimally, the case plan is automated so that the collaborative case management team

can update it and share it across organizational boundaries. Automation will also make tracking progress across all cases more manageable because data from the TAPs would be analyzable for outcomes.

At a minimum, a TAP should do the following:

- Identify the assessed risk level and criminogenic needs of the offender.
- Develop strategies to address obstacles and triggers.

- Outline the offender’s responsibilities clearly and concisely.
- Have specific goals that are directly related to the highest rated domains of criminogenic need. For each goal, it should specify strategies that are clearly stated, measurable, attainable, relevant, and have a timeline.
- Identify the offender’s strengths and build its strategies on these strengths. Assess an offender’s readiness for change, so that the case management team can consider the best ways to enhance motivation for change.

Perhaps most importantly, the same TAP must be used throughout the process, building on past experiences and information. It is first developed in the institution and then changes to reflect progress, difficulties, changing goals, and all else that follows. It must move with the offender through the three phases of the process and be the “game plan” that all members of the case management team use.

Offender Self-Assessment

Another tool that some agencies are adopting as a way of engaging offenders in the process of change is an offender self-assessment. This asks offenders to consider their own strengths and challenges, what their goals are, and what specific activities they will undertake to accomplish those goals. It also creates an opportunity for dialogue between offenders and staff that may lead to further engagement.

Memorandums of Understanding

Because offenders will probably need to access services and resources from partner agencies as well as from within the correctional system, line staff need their agencies to develop, negotiate, and maintain memorandums of understanding (MOUs) that spell out how those agencies will cooperate with other service providers at the case level.

In-Reach Protocols

One term that is emerging in the reentry field is “in-reach.” This term describes activities of individuals who work primarily outside of correctional institutions but who, in anticipation of the release of an offender, “reach in” to the institution by a personal visit, phone call, or other communication to make contact with the offender and institutional staff. For example, The Michigan Prisoner ReEntry Initiative has “transition teams” composed of community partners and correctional staff who conduct in-reach into prisons to meet with soon-to-be released prisoners. In-reach is part of creating a continuous TPC process from beginning to end, an opportunity for field staff, community service providers, family, and mentors to work with the offender to clarify the implications of assessment, case plans, and implementation strategies. This type of activity requires formal recognition through policy and procedure so that correctional staff will understand that it is expected and supported.

Skills

Because ICMS is a significant shift from the monitoring and surveillance approach to case management, staff will require skill sets not typically required or nurtured in the past. For example, motivational interviewing, cognitive reflective communication, and general interpersonal skills will be added to those that agencies have traditionally expected among institutional and parole staff in recent decades—skills in self-defense, firearms, and critical incident management.

Organizational Changes

Clear Articulation of Vision and Mission

Line staff will be able to alter their job responsibilities in significant and successful ways only if their organization reengineers itself to support that work. Leaders must clearly articulate the vision and mission for these case management changes. If an organization and its partners have gone through

the TPC implementation process, then this primary support should be in place. However, revisiting the vision and mission frequently, with energy and with authority, will extend this support to the changes occurring at the line level as the new approach to case management is implemented.

Workload Reductions

It is unrealistic to expect line staff to carry out a whole new set of responsibilities without removing some of their existing responsibilities. One way that some agencies are supporting change is to reanalyze workloads and generate specific proposals for workload reductions. When implemented, these workload reductions free staff time for the additional roles and responsibilities envisioned in ICMS.

Organizational Infrastructure

The changes introduced by the ICMS model must be reflected in the standard infrastructure of the organizations implementing the model. Position descriptions must reflect new expectations. Supervision and mentoring of staff must be retooled to support the model; first-line supervisors must be brought into the change process and expectations for their roles redefined. Quality control systems must be put into place. Performance appraisal systems must be revisited and retooled—field staff cannot continue to be evaluated solely on whether they have met their contact standards. Contact standards must necessarily address not only the quantity of contact but also the type of interaction that happens during those contacts. Organizations must review the full range of policies and procedures to identify the ways in which these do and do not support the ICMS approach and modify them as necessary.

Program Availability and Guidance in Targeting by Tracks

An important principle of evidence-based practice is that effective interventions can reduce the risk of recidivism. Line staff's case management approach

will be successful only if such interventions are available and accessible and directed to the right offenders for the right needs. For case management to be effective, agencies will need to ensure that programs are available and accessible and that line staff thoroughly understand the protocols for assignment to tracks.

Another key aspect of evidence-based practice is the importance of targeting interventions by risk and needs. In practice, this will likely require the definition of different "tracks" for offenders—or some approach that will enable line staff to channel offenders into the appropriate category. This should enable staff to make sure that low-risk and low-needs offenders are handled significantly differently than high-risk and high-needs offenders. Protocols for assignment to tracks should be clear and clearly understood by line staff.

Authorization for Interagency Teams

Within the TPC model and the ICMS approach to case management, case management will probably be the responsibility of teams drawn from different disciplines. Line staff will need specific direction, authorization, and support to engage in collaborative case planning, and also direction on how to target this resource-intensive approach to appropriate offenders.

Implementing the ICMS Model

The TPC implementation process encourages stakeholders in leadership positions to move to a new approach to case management for transition and reentry. As part of this process, the TPC model encourages the careful consideration of current practices and systems as a necessary step to planning changes and innovations. Exhibit 5-7 is a checklist designed to help practitioners begin the process of analyzing their current practices.

After an agency has analyzed its own practices, leaders may want to consider how the ICMS model could be tailored for implementation in their own

Exhibit 5-7. Integrated Case Management and Supervision Checklist

1. You might begin by having everyone on the team charged with reshaping case management in support of transition and reentry complete this checklist independently. This will allow each team member to consider the various features of ICMS, the degree to which your current operations are consistent with the model, and where they diverge from it. You will need to consider these questions from the point of view of institutional corrections, postrelease supervision, and other agencies that may be providing services to offenders.
2. After completing the checklist, review it together, discussing your answers and coming up with a single set of responses that best approximates the collective perspective of your team.
3. Next, discuss the extent to which current practice in your jurisdiction matches the concepts of ICMS as outlined above.
4. Finally, consider the implications of this discussion for your team's work plan. Are there areas of significant difference between the model and your operations? If so, what are they? What would you have to change to bring practice more in line with the model?

| Area | Yes | Planned | Not Clear | No |
|--|-----|---------|-----------|----|
| Definition/Goal of Offender Case Management | | | | |
| 1. Is offender success to enhance public safety a goal that has been articulated and embraced by: <ul style="list-style-type: none"> • TPC leadership? • Institutional correctional staff? • Postrelease supervision staff? • Service providers? • Community partners? • If you asked staff who work directly with offenders what the purpose or goal of their work is, would they say that their job is to assist offenders to successfully transition to the community? Or to successfully complete supervision? | | | | |
| 2. Are your TPC efforts focused on transition: <ul style="list-style-type: none"> • Beginning with admission to prison (or before)? • During incarceration? • In the months before release? • During the release decisionmaking process? • After release and throughout community supervision? • After discharge from supervision? | | | | |
| 3. Is it understood and accepted that interactions with offenders should: <ul style="list-style-type: none"> • Engage the offender in the process of change? • Work with the offender to develop and complete a case plan that, when implemented, will increase the likelihood of positive change? | | | | |

Exhibit 5-7. Integrated Case Management and Supervision Checklist (continued)

| Area | Yes | Planned | Not Clear | No |
|--|-----|---------|-----------|----|
| Tools | | | | |
| <p>4. Tools consistent with the ICMS model:</p> <ul style="list-style-type: none"> Does your jurisdiction use empirically based assessment tools to determine offenders' risks and needs? <ul style="list-style-type: none"> —At which decision point(s)? —Which instrument(s) are used? Do you develop a single, ongoing, dynamic case management plan? Does it specifically address offender's individual criminogenic needs? Are you adopting different strategies of case management depending on offenders' risk levels? Are conditions of supervision specifically tailored to address criminogenic needs? Do case management plans link offenders to programs that incorporate the principles of evidence-based practice? Do field staff and community partners routinely conduct "in-reach" into prisons to engage offenders before release? Are collaborative partnerships in place to provide services to offenders in institutions and in the community? Are there clear policies in place that guide responses to technical violations by risk and severity? | | | | |
| Case Plans | | | | |
| <p>5. Case plan as a key aspect of ICMS:</p> <ul style="list-style-type: none"> Does every offender have a case plan that is developed soon after admission to prison? Is that plan updated and shared with other staff as the offender moves through the period of incarceration? Does that plan move with the offender to the field after release from prison? Is the plan available to all members of a case team, including partners in the field, while the offender is incarcerated and planning reentry? Does the plan include partners from other agencies as the offender's criminogenic needs require those services? | | | | |

Exhibit 5-7. Integrated Case Management and Supervision Checklist (continued)

| Area | Yes | Planned | Not Clear | No |
|---|-----|---------|-----------|----|
| Typical Activities | | | | |
| <p>6. Activities typical to offender case management:</p> <ul style="list-style-type: none"> At each point in time, is it clear who is responsible for case planning and management for offenders? Do case management activities address the basic survival needs of transitioning offenders, such as securing personal identification, determining eligibility for benefits, obtaining suitable housing, and acquiring needed medications? Is the person or team responsible for case management or supervision charged with active coordination and linkages of offenders to programs/interventions that address their criminogenic needs? Do current offender management practices include monitoring progress in programs and in everyday life? Do you monitor conditions of supervision? Do you routinely use positive reinforcement and lessening of restrictions in response to positive performance? Do you use proportional sanctions based on risk and severity (including intermediate responses short of revocation) for noncompliance? Do you create linkages between the offender and natural systems of prosocial support in the family and community (e.g., family support groups, contacts with employers, faith community)? | | | | |
| Training and Skill Development | | | | |
| <p>7. Training and skill development:</p> <ul style="list-style-type: none"> Are staff routinely trained in the administration of appropriate, empirically based risk and needs assessments? Are staff routinely trained in motivational interviewing? Are staff trained in responsivity assessment protocols? Are booster sessions offered to keep staff skills current? Do your agencies invest in developing in-house experts to provide training to staff? | | | | |
| Responsibility for Offender Case Management | | | | |
| <p>8. Do you employ a team approach to case management?:</p> <ul style="list-style-type: none"> Do institutional staff and field corrections staff work together on management of specific cases? Are agencies other than corrections involved in case management? If you employ a team approach, does the team leader seek input and provide information to other teams' members in other agencies? Do first-line supervisors routinely reinforce expectations about offender case management with line staff? | | | | |

Exhibit 5-7. Integrated Case Management and Supervision Checklist (continued)

| Area | Yes | Planned | Not Clear | No |
|--|-----|---------|-----------|----|
| Individual Agency Infrastructure Supportive of Offender Case Management | | | | |
| <p>9. Do all aspects of the agency's policies, practices, and leadership support effective offender case management?</p> <ul style="list-style-type: none"> • Is successful transition and reentry clearly included as part of the agency's vision and mission? • Is agency leadership visibly supportive of offender case management? • Are staff resources identified to carry out the work of implementing, assessing, and improving case management? • Have agencies made the effort to develop formal and informal collaborative agreements with other stakeholders to work together on successful transition? • Do your management information systems support offender case management? • Do job descriptions, hiring practices, performance evaluations, hiring, and promotion policies support offender case management? • Are case audit procedures in place that routinely hold staff accountable for integrating the principles of evidence-based practice in their case management activities? | | | | |

jurisdiction. A correctional organization and its collaborative partners will need to agree on and articulate their own definition of case management and supervision for reentry and its goals, principles, key components, core activities, and other aspects. Exhibit 5-8 provides a format for recording the work of a team as it engages these issues. It highlights the various elements of the ICMS

model, providing space for a team to record its work to tailor the various aspects of the model for its own situation. As a record of discussion, choices/decisions, and tasks for implementing those decisions, the completed worksheet can serve as the outline for a workplan to implement the ICMS model.

Exhibit 5-8. Worksheet To Assist in Making Choices and Developing a Workplan To Implement the ICMS Model

To implement an approach to case management and supervision directly focused on reentry, an organization and its collaborative partners will have to choose and articulate their own definition of case management and its goals, principles, key components, core activities, and other aspects. The following worksheet highlights the various elements of the ICMS model and provides space for your team to record its work in tailoring these elements to your own situation. As a record of discussion, choices/decisions, and tasks for implementing those decisions, the completed worksheet can serve as the outline for a workplan to implement the ICMS model.

| ICMS Model | Jurisdiction's Approach |
|--|-------------------------|
| Definition | |
| <p>The Integrated Case Management and Supervision for Reentry (ICMS) model is the strategic use of resources at the case level to enhance community safety through the prevention of future victimization. It seeks to reduce recidivism and relapse, encouraging offenders to be successful in support of safer and healthier communities. It uses a common framework and language to monitor progress and to update outcomes during the phases of incarceration, release, and community supervision.</p> <p>While providing custody, control, and supervision, ICMS assesses, motivates, and provides targeted interventions to offenders while addressing their risks and needs during incarceration, during the release phase, and after release to the community.</p> | |
| Goal | |
| <p>The goal of the ICMS model for reentry is community safety and crime prevention through enhancing the ability of offenders to successfully reintegrate into the community without reoffending.</p> | |
| Core Principles | |
| <p>Engage this process from admission to prison (or before) through discharge in the community (and beyond) in a coherent and integrated process.</p> | |
| <p>Supervise and manage offenders to enhance successful transition and reentry for community safety.</p> | |
| <p>Use the principles of evidence-based practice.</p> | |
| <p>Use empirically based and validated assessments of risk and criminogenic need at key stages of the process.</p> | |
| <p>These assessments form the basis of the supervision and case management plan.</p> | |
| <p>Supervision and case management interactions engage the offender in the process of change.</p> | |
| <p>A multidisciplinary supervision and case management team works with the offender through assessment, case planning, and implementation.</p> | |

Exhibit 5-8. Worksheet To Assist in Making Choices and Developing a Workplan To Implement the ICMS Model (continued)

| ICMS Model | Jurisdiction's Approach |
|--|-------------------------|
| Core Principles (continued) | |
| Supervision and case management constitute a collaborative process that involves correctional staff (institutional and field/community), community service providers, and informal networks of support. Such collaboration requires specific strategies to work across traditional boundaries between institution and community. | |
| Key Components | |
| The ICMS model involves evidence-based assessment, case planning, and targeted interventions. | |
| The offender participates in the process and is accountable for both compliance and risk reduction. | |
| Correctional agencies collaborate with one another across traditional boundaries of institution/community, custody/control/supervision, and case management. | |
| Institutional and community corrections agencies focus on both custody/control/supervision and risk reduction. | |
| Correctional agencies collaborate with noncorrectional stakeholders. | |
| Organizational development strategy supports ICMS. | |
| Core Activities | |
| Conduct assessments of offenders' risk, needs, strengths, and environment. | |
| Form, participate in, and lead case management teams that work collaboratively. | |
| Enhance motivation. | |
| Develop and implement—along with the offender and other partners within both correctional agencies and other agencies—a transition accountability plan geared directly to the offender's level of risk and criminogenic needs, covering all phases and evolving over time. | |
| Provide (or provide access to) programmatic interventions to address highest risk and criminogenic need. | |
| Involve offenders in the case management process, making efforts to enhance motivation (e.g., by using incentives for positive performance). | |
| Review progress and adapt plans periodically over time, including monitoring conditions of supervision and responding appropriately to both technical and criminal violations. | |

Exhibit 5-8. Worksheet To Assist in Making Choices and Developing a Workplan To Implement the ICMS Model (continued)

| ICMS Model | Jurisdiction's Approach |
|---|-------------------------|
| Targeting Strategy | |
| Categories of offenders are defined to allow targeting by risks and needs. | |
| Lowest risk offenders receive the least control/supervision and the fewest risk reduction resources. | |
| Higher risk offenders receive greater control and greater levels of risk reduction resources. | |
| All offenders receive survival resources and supports. | |
| Phases | |
| Phase 1: Incarceration (from admission or presentence investigation up to 6–12 months before release). | |
| Phase 2: Release (6–12 months before release through 6–12 months after release). | |
| Phase 3: Community (from 6 months after release until discharge from criminal justice supervision, and beyond in some cases). | |

Notes

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2. Betsy A. Fulton, Amy Stichman, Lawrence Travis, and Edward Latessa, "Moderating Probation and Parole Officer Attitudes to Achieve Desired Outcomes," *The Prison Journal* 77(3):295–312.
3. D.A. Andrews, James L. Bonta, and J. Stephen Wormith, *Level of Service/Case Management Inventory: An Offender Assessment System, User's Manual* (Tonawanda, NY: MultiHealth Systems, Inc., 2004).
4. Peggy B. Burke, *Parole Violations Revisited: A Handbook for Strengthening Parole Practice and Successful Offender Reentry* (Washington, DC: National Institute of Corrections, 2004), NIC Accession Number 019833.
5. Sara Andrews and Linda S. Janes, "Ohio's Evidence-Based Approach to Community Sanctions and Supervision," *Topics in Community Corrections*, 2006, 17–20.
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8. Lore Joplin, Brad Bogue, Nancy Campbell, Mark Carey, Elyse Clawson, Dot Faust, Kate Florio, Billy Wasson, and William Woodward, "Using an Integrated Model to Implement Evidence-Based Practices in Corrections," www.nicic.org/Library/020175, accessed May 22, 2008.

CHAPTER 6

TPC Performance Measurement Framework

This chapter provides an overview of the measurement aspects of the Transition from Prison to the Community (TPC) Initiative and of tools for developing a measurement strategy tailored to a state's own efforts. It defines areas of measurement and provides illustrations, including examples from a number of TPC jurisdictions, and ends with an exercise that can be used to structure discussions of change teams involved in this work.

As described earlier in this handbook, the TPC model is designed to reduce recidivism and increase the successful reintegration of offenders returning from prison to the community, thereby enhancing public safety and reducing victimization. It seeks to accomplish this by mobilizing the principles of evidence-based practice and by creating collaborative partnerships between criminal justice and other agencies to assess and manage offenders from the time of admission to prison until discharge from postrelease supervision and beyond.

Three Dimensions

To measure the performance of the TPC Initiative, a jurisdiction must establish a measurement strategy that answers questions about three dimensions: system change, reentry indicators, and public safety.

System Change

The measurement strategy must answer a range of questions regarding system change: Has the model been implemented? Have system changes been made so that policies, procedures, resources, and tools consistent with the elements of the model and

with evidence-based practice are in place and operating? This measurement is akin to a process evaluation. The major system change areas include the following:

- Assessment.
- Case management.
- Targeted interventions.
- Collaboration.

Reentry Indicators

Here the measurement strategy must be designed for routine gathering of information about variables typically associated with successful transition: Is there evidence that the incidence of offender characteristics associated with reduced recidivism and prosocial behavior is increasing or has increased to acceptable levels? These measures may be desirable in and of themselves (e.g., stable employment). However, because they are not specific measures of reduced recidivism, they are identified as "reentry indicators." They are arguably associated with the ultimate goal of reduced recidivism, and even by themselves, they represent positive outcomes for the community at large. The major reentry indicator areas would include the following:

- Employment.
- Housing.
- Mental and physical health.
- Substance abuse and substance abuse treatment.

Public Safety

On this dimension, the performance measurement strategy should track measures associated with lower rates of recidivism and victimization: Are risk and recidivism decreasing among the reentering population? These “public safety outcomes” are differentiated from reentry indicators because, ultimately, even if an offender is employed and has housing, he/she is not a public safety success unless he/she remains crime free. The major public safety areas include the following:

- Rates of successful completion of supervision.
- Rates of rearrest, reconviction, and readmission to prison.
- Risk levels over time as measured by validated assessments.

Timeframe

Because the TPC approach is based on the understanding that reentry takes place from the time of admission to prison, or before, through discharge from postrelease supervision, or beyond, the measures described here reflect the model’s definition of the three phases of the reentry process:

- Incarceration (from admission until 12 months before release).
- Release (from 12 months before release through 12 months after release).
- Community (from 12 months after release through discharge from community supervision).

Feasibility

As a team designs its measurement strategy, it is important to consider whether using certain measures is feasible, given the information available and its reliability. In considering each measure, the following questions should be addressed:

- Can we develop an operational definition of the measure that all stakeholders agree on?

- Are the data elements needed for this measure available? If so, where? In what form (electronic, manual)?
- Are these data elements routinely collected (or could they be) in the course of normal operations?
- If the data exist in some system outside the direct control of correctional agencies, are agreements in place (or could they be) to access those data and exchange them in electronic form?

Developing Specific Measures in Each Dimension

System Change

System change measures should revolve around evidence that the changes required by the model are in place and should answer the following questions:

Have we changed our system so that we have and use appropriate assessments?

Answering this question requires a specific measure that indicates whether comprehensive assessments are being completed and whether they are being completed within a timeframe that allows them to be used as case management tools throughout the three phases of the reentry process. Assessments should be available for use in long-term institutional programming and programming as offenders are approaching release, being stabilized in the community, and completing their period of supervision. This measure should indicate the following:

- The percentage of offenders receiving comprehensive assessments that include valid, reliable evaluation of risk and criminogenic need within certain timeframes such as:
 - ☐ Within 30 days after admission.
 - ☐ Annually.
 - ☐ 12 months before release.

- ☐ Within 60 days after release.
- ☐ Before discharge.

Do we use assessment information to set priorities for the use of resources to have the most impact on reducing the risk of recidivism and increasing successful reentry (targeted interventions)?

Answering this question requires a measure that tracks how assessment information is made available and used to determine case management strategies. Evidence of the assessment information should be reflected in case management documentation, activities, and offenders' participation in activities identified in the case management process. A progression and evolution of these indicators should also be evident throughout the reentry process. These data could be gathered and reported for the entire system and also by institution, by case manager, by region/office, and/or by parole officer.

For offenders currently in the incarceration phase, this measure should indicate the following:

- The percentage in custody with a comprehensive case management plan that reflects, for the top four criminogenic need domains diagnosed for each offender:
 - ☐ Specific programming recommended.
 - ☐ Specific programming in progress.
 - ☐ Specific programming completed.
- The percentage of cases in which case management plans reflect ongoing review and updating, with periodic review being conducted at least annually and modifications reflecting progress and emerging challenges.

For offenders currently in the release phase, this measure should indicate the following:

- The percentage in custody with a case management plan that documents in-reach activities and indicates, for the top four criminogenic need domains and for critical survival domains identified for each offender:

- ☐ Specific prerelease activities to be completed.
- ☐ Progress on completion.

- The percentage in the community with a case management plan that indicates, for the top four criminogenic need domains:

- ☐ Specific programming planned.
- ☐ Specific programming completed.

For offenders currently in the community phase, this measure should indicate the percentage with case management plans who successfully complete plan components during the release phase.

Are policies and procedures in place to respond effectively to technical violations of parole? Are these policies and procedures guided by risk of the offender and the severity of the offense so that appropriate incentives, sanctions, and problem-solving responses are available and used?

For all offenders on postrelease supervision, this measure should indicate the following:

- The percentage with technical violations noted in the course of the year.
- Responses to those violations according to these categories:
 - ☐ Number and type of violations, with responses noted by type that are managed in the community.
 - ☐ Number and type of violations, with responses noted by type that are handled through an administrative hearing process.
 - ☐ Number and type of violations, with responses noted by type that are handled through a formal revocation proceeding.
 - ☐ Number and percentage of offenders revoked to prison, by type.

Do we, as a system, have practices, policies, and partnerships in place that foster collaboration and counteract the fragmentation and lack of coordination that have characterized reentry in the past?

Answering this question requires documentation of those partnerships, practices, and policies that facilitate cross-system collaboration. Regarding partnerships, this measure should indicate the following:

- Existence, membership, and charter of collaborative teams involved in the reentry effort.
- Existing memorandums of agreement regarding aspects of system change.
- Periodic completion of the “collaboration survey” to measure the level of and changes in the collaborative climate of the effort.

Regarding practices, this measure should indicate the following:

- Existence of in-reach activities.
- Evidence from case management strategies on collaborative case management.

Exhibit 6-1 provides examples of specific measures from Oregon and Michigan used to track system changes inherent in those states’ efforts at transition and reentry.

Exhibit 6-1. Examples of System Change Measures

From Oregon’s Scorecard:

- Percentage of high- and medium-risk inmates in which release plan was developed by counselor/PO/inmate participation.
- Percentage of high- and medium-risk inmates that enter programs prioritized on their Oregon Corrections Plan.
- Engagement rate for cognitive programs delivered to high- and medium-risk inmates.
- Engagement rate for alcohol and drug programs delivered to high- and medium-risk inmates.
- Percentage of inmates completing their education.
- Percentage of inmates completing cognitive programs.
- Percentage of inmates completing alcohol and drug programs.
- Percentage of high- and medium-risk inmates removed from a program by Department of Corrections administrative action.

From the Michigan Prisoner ReEntry Initiative (MPRI) Evaluation:

- When is the COMPAS (Correctional Offender Management Profiling for Alternative Sanctions) administered? What percentage of individuals have been administered the COMPAS at specific intervals (e.g., 2 months before release, 6 months before release)?
- What percentage of transition accountability plans are updated upon release?
- What is the degree of needs-based programming delivered in prison? In the community? (For example, is programming provided to address the three principal criminogenic needs?)
- Who is part of the transition (case management) team? Have we been successful at forging community partnerships?
- During incarceration, what is done to plan for employment, housing, substance abuse treatment, and other identified needs specific to the offender?
- Are these services linked with services outside of prison (continuity of care)?

Reentry Indicators

Reentry indicators should provide insight regarding the desirable outcomes associated with such things as prosocial life styles and stability in the community, but falling short of actual reductions in recidivism, although they may lead to them. These indicators should answer the following questions:

Are offenders reentering the community more likely to be employed?

This measure should indicate the following:

- The percentage of offenders who have some employment within 30 days, 6 months, and 1 year of release.
- The percentage of offenders who have had stable employment for 6 months or 1 year.

Are offenders identified as having continuing substance abuse needs participating in and completing treatment during the incarceration, release, and community phases?

This measure should indicate the following:

- The percentage of high- to medium-risk offenders who have been assessed as having substance abuse as a top criminogenic need and who are participating in and completing substance abuse treatment in prison and in aftercare in the community.
- The percentage of offenders whose tests show they are drug free.

Are offenders who have been identified as having serious mental illness receiving appropriate treatment during all phases of the reentry process?

This measure should indicate the percentage of mentally ill offenders receiving appropriate interventions in the institution and the community.

Does the case management strategy involve planning for, securing, and retaining stable living situations as offenders reenter the community?

This measure should indicate the following:

- The percentage of offenders who have a stable home as part of their release plan.
- The percentage of offenders on release who are homeless, in transitional housing, or in long-term housing.
- The average number of changes of address over the course of a year per offender on supervision.

Are offenders involved with formal and informal prosocial networks as they prepare for release, return to the community, and complete supervision?

This measure should indicate the following:

- The percentage of offenders in prison who have a record of visitation and contact with stable, prosocial associates.
- The percentage of offenders who have informal prosocial networks represented in their case management team.
- The percentage of offenders involved in in-reach activities before release.

Exhibit 6-2 provides examples of reentry indicators from Oregon, Missouri, and Michigan.

Public Safety Measures

Improvement in public safety should be evaluated by concrete measures: fewer returns to prison and fewer new arrests and convictions of those released from prison. These measures should answer the following questions:

Are increasing proportions of offenders returning from prison to the community successfully reintegrating into the community, and is public safety being enhanced?

This measure should indicate the following:

- The percentage of admissions to prison represented by individuals on parole supervision at the time of admission, accounting for the type of violation (criminal or technical) and the specific nature of the violation.

Exhibit 6-2. Examples of Reentry Indicators

From Oregon's Scorecard:

- Percentage of offenders with housing at release.
- Percentage of offenders with employment/education at release.
- Percentage of designated offenders that continue alcohol and drug treatment after release.
- Percentage of high- and medium-risk offenders receiving support from "Home for Good."
- Percentage of offenders participating in treatment under community supervision.
- Percentage of offenders employed while under community supervision.
- Percentage of restitution paid by offenders upon file closure.

From the Missouri Reentry Process (MRP) Scorecard:

- Analysis prior to the implementation of MRP indicated certain factors among the baseline population associated with recidivism after 3 years. These "correlates of return to prison in Missouri" are being tracked. They include:
 - Employment at first need score.
 - Vocational score on release.
 - Substance abuse at first need score.
 - Work score on release.
 - Mental health score on release.
 - Social at first need score.
 - Family at first need score.
 - Educational score.

From the Michigan Prisoner ReEntry Initiative (MPRI) Evaluation:

- Does parolee have housing upon release? What type of housing?
- Does parolee have employment upon release? Where? What wages? What type of employment?

- The percentage of individuals on parole supervision who are arrested, convicted, and returned to prison, at intervals of 6 months, 1 year, 2 years, and 3 years.
- The percentage of those released from prison who are arrested, convicted, and returned to prison, at intervals of 6 months, 1 year, 2 years, and 3 years.

Exhibit 6-3 provides examples of public safety measures from Oregon and Missouri.

Practice Exercises

Jurisdictions will establish performance measures that reflect their specific goals and objectives and the availability, reliability, and format of their data sources. Exhibit 6-4 illustrates how to structure a discussion for developing a measurement

Exhibit 6-3. Examples of Public Safety Measures

From Oregon's Scorecard:

- Percentage of offenders successful during the first 180 days after release from prison to the community (by county).
- Percentage of offenders who successfully complete supervision.
- Percentage of offenders under postprison supervision who are convicted of a felony within 3 years of release from prison.

From the Missouri Reentry Process (MRP) Scorecard:

- Percentage of offenders with technical violations during specific postrelease periods (6 months, 12 months, 2 years).

Georgia's Innovations in Performance Measurement

As part of Georgia's participation in the TPC Initiative, the 12 state agencies involved spent significant time studying existing transition practices and data and developing an action agenda of 28 items. Each recommendation included the requirement that data must be identified to track both process and outcome. In a 2007 issue of NIC's *Topics in Community Corrections*, participants in the Georgia TPC effort described the development of a unique strategy for measuring progress toward these TPC goals.* The strategy is consistent with the notion of "public safety, reentry indicators, and system change measures" outlined in this chapter, but builds on the extensive literature on managing success in business enterprises. In their own research, the Georgia team found that a number of indicators, including ratios of positive to negative drug screens, residential moves, number of days employed, and months attending programs, were associated with increased completion of parole without commission of a new offense, a key public safety measure.

These measures are available on a real-time basis through a Web-based system and are routinely examined statewide, regionally, and by parole offices and officers. Those parole offices with the best performance for parole completion are recognized at annual gatherings of the Georgia Board of Pardons and Paroles, and leaders focus directly on this performance measure in all their interactions with staff. Georgia's experience provides a good example of how measurement can be used not only to track progress, but to encourage it.

* Danny Hunter, George Braucht, and John Prevost, "Improving Parole Outcomes with Performance Leadership and Data: Doing What Works," in *Topics in Community Corrections: Promising Strategies in Transition from Prison* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 2007), pages 35–44.

framework. For each of the three dimensions discussed above—system change, reentry, and public safety—the exhibit illustrates the logic of establishing performance measures according to goals and objectives.

Exhibits 6-5 through 6-7 are exercises for practitioners to use in considering how to develop a

measurement strategy that is appropriate to transition and reentry efforts in their own jurisdictions. These exercises walk users through each of the dimensions, asking them to make choices about measures, definitions, and possible sources of data. A team working on developing a measurement strategy for a reentry initiative can use this exercise to begin its work.

Exhibit 6-4. Example of Establishing TPC Performance Measures

| Goals and Objectives | Measure(s) | Data Elements and Source |
|--|--|---|
| System Change | | |
| <i>What did we say we were going to do?</i> | | |
| Put into place a protocol for valid, empirically based assessments of offender risks and needs to be conducted at appropriate intervals from time of admission to prison until discharge from supervision in the community. | | |
| <i>Did we do it?</i> | | |
| <ul style="list-style-type: none"> Is the infrastructure in place? Has such a protocol been developed, validated, implemented, and codified in policy and procedure within institutions and within field services? | <ul style="list-style-type: none"> Documentation in policy and procedure Tools in place Supporting data system in place Training for staff completed | Descriptive analysis of current practices |
| <i>Performance</i> | | |
| Are all offenders being assessed within specified timeframes? | Number and percent of offenders routinely receiving these assessments: <ul style="list-style-type: none"> Within 30 days of admission Annually while incarcerated At release Annually in the field | Data from case files |
| Reentry Indicators | | |
| <i>What did we say we were going to do?</i> | | |
| Take steps to make sure that offenders are prepared to access employment immediately upon release from prison and that they do so. These steps will include building a partnership with workforce development agencies in the community and include employment issues in the case management strategy from the time of admission through release to the community. | | |
| <i>Did we do it?</i> | | |
| <ul style="list-style-type: none"> Is the infrastructure in place? Have agency agreements been established between the Department of Corrections and the workforce regarding joint interests, goals, and activities? Does the case management strategy documentation make accommodation for specific plans around job skills, job readiness, and job development? | <ul style="list-style-type: none"> Documented policy and procedures, tools, and supporting data system in place Training for staff completed | Descriptive analysis of current practices |

Exhibit 6-4. Example of Establishing TPC Performance Measures (continued)

| Goals and Objectives | Measure(s) | Data Elements and Source |
|---|--|---|
| <p><i>Performance</i></p> <p>Do all offenders for whom employment is a medium- or high-risk domain on their risk/needs assessment have an updated employment component of their case management strategy while incarcerated? Just before and after release? During the community phase?</p> | <ul style="list-style-type: none"> Number and percent of high- or medium-risk offenders with current employment domain included in their case management strategy Number and percent of high- or medium-risk offenders with current employment domain who are referred to workforce development agency (or other partner agency) Number and percent of these who receive services Number and percent of these who are placed | <ul style="list-style-type: none"> Case files Case management strategy documents |
| <p><i>Outcomes</i></p> <p>Are offenders more likely to be employed in reasonably paying jobs and to retain those jobs?</p> | <ul style="list-style-type: none"> Number and percent of offenders with employment at release and within 6 months of release Average wage levels | <ul style="list-style-type: none"> Case files Case management strategy documents |
| Public Safety | | |
| <p><i>What did we say we were going to do?</i></p> <ul style="list-style-type: none"> Reduce the likelihood of offender recidivism. | <ul style="list-style-type: none"> Number and percent of returning offenders who are rearrested within 6 months, 1 year, 3 years Number and percent of returning offenders who are reconvicted within 6 months, 1 year, 3 years Number and percent of returning offenders who are readmitted to prison within 6 months, 1 year, 3 years | <ul style="list-style-type: none"> National Crime Information Center Court records Department of Corrections admission records |
| <ul style="list-style-type: none"> Reduce the risk presented by offenders. | <ul style="list-style-type: none"> Average levels of risk over time among population in custody (for those originally scored as medium to high risk) and in the field | <p>Case management/assessment records</p> |

Exhibit 6-5. System Change Measures Worksheet

| Area of Measurement | Potential Definition(s) | Sources |
|--|-------------------------|---------|
| Assessment | | |
| Targeting appropriate interventions by risk and need | | |
| Collaboration and partnerships | | |
| Responses to violations | | |

Exhibit 6-6. Reentry Indicators Worksheet

| Area of Measurement | Potential Definition(s) | Sources |
|------------------------------------|-------------------------|---------|
| Employment | | |
| Housing | | |
| Drug/alcohol services | | |
| Mental health services | | |
| Connection with prosocial networks | | |

Exhibit 6-7. Public Safety Worksheet

| Measure and Period (check selection) | Possible source(s) |
|--|--------------------|
| Rearrest | |
| 180 days | |
| 6 months | |
| 1 year | |
| 2 years | |
| 3 years | |
| Reconviction (felony, misdemeanor, any) | |
| 180 days | |
| 6 months | |
| 1 year | |
| 2 years | |
| 3 years | |
| Recommitment | |
| 180 days | |
| 6 months | |
| 1 year | |
| 2 years | |
| 3 years | |
| Risk levels | |
| At admission | |
| At release | |
| At discharge | |

CHAPTER 7

Emerging Issues, Challenges, and Opportunities

The Importance of Leadership

Significant organizational, cultural, and systemic change is a challenge that requires strong and competent leadership. The TPC model stresses the importance of leadership from the start, and the formation and chairing of change teams by high-level state leaders has been a major part of TPC implementation. As the eight states involved in the effort have moved forward, key leaders or “champions” have emerged at all levels and have approached the leadership challenge in different and creative ways. In both Oregon and Missouri, for example, the Director of Corrections reached out informally to colleagues at the cabinet level, beginning a conversation to establish the rapport and partnerships required to lead change.

Each state has also assigned staff at varying levels of authority and responsibility to support and coordinate the effort. Regardless of level of authority, their influential leadership is evident in the progress underway. Their passion, commitment, and hard work are truly leadership in action.

TPC Implementation as a Work in Progress

Although the basic tenets and goals of the TPC model are simple, implementation is a challenging and complex undertaking. In essence, the effort seeks to put in place the very best practice, as judged by evidence. Doing so requires strong, enduring collaborations, continuity of effort, significant resources, and tenacity. Among the eight states participating in the TPC Initiative, even those involved the longest will acknowledge that they are not finished.

It is essential, in the development of statewide and executive-level support for reentry, to build relationships first before any formal action is taken. Don't start with building support at the Governor's office or you may find that your partners are not with you in the end. It is important to lay the groundwork for any initiative by investing time talking to the leaders that play a role in transition, whether they realize it right away or not. Talk to them about the role their agency plays in the success of inmates leaving prison and returning to community living. Talk to them about [how important it is], in terms of community safety, that this process of transition goes well. I have found these conversations to be invaluable in building true partners in the goal of improving prison reentry. Granted, it takes a little longer to build this interest and these relationships before taking a formal action such as an executive order issued by the Governor, as was the case in Oregon, but by the time we were at this point all of the member agencies wanted to participate in this important work.

—Max Williams, Director
Oregon Department of Corrections

On the one hand, this is understandable given the dimensions of the challenge. Work continues on changing offender management practices, securing and improving treatment resources, enhancing staff capabilities, and putting good performance measurement systems in place. On the other hand, it is important to recognize that these jurisdictions have come far, that they are realizing important gains, and that their experience can serve as an example for other jurisdictions beginning or continuing this work.

As these and other states move forward in implementation, they will undoubtedly develop new benchmarks to measure progress. The development of such benchmarks will continue to emerge from the experience of these states as they strengthen their measurement systems and gain enough experience with successive cohorts of released offenders to track changes even more clearly. Research and evaluation are needed particularly to translate the lessons from research into practical guidance for those seeking to implement encouraging practices. It is also important for operating agencies to understand that they will inevitably come upon research that is conflicting and that they need to develop methods for sorting out those differences with local stakeholders.¹

Finally, the TPC model must be brought up to scale. Of necessity, implementation in most states began with efforts in one or more institutions, in one or more regions of a state, involving some programs and not others. A future challenge will be to bring all practices, statewide and systemwide, into alignment with the model.

Transition from Jail to the Community

NIC is beginning a Transition from Jail to the Community (TJC) Initiative, building on the lessons of TPC but with the knowledge that there are as many differences as similarities between the two efforts. The experiences of these two perspectives on reentry can be expected to enrich one another in the future.

Understanding Organizational and Cultural Change

Perhaps the most important thing to maintain while going forward with implementation is a clear understanding that the TPC model is about organizational and cultural change. Lessons learned by the eight pilot states underscore this point. Missouri,

for example, learned early in its implementation process to build upon its mistakes and successes. As the Missouri Reentry Process (MRP) effort gained momentum and stakeholders developed core messages to solidify the support and understanding of those involved, they developed a list of “to do’s” and “not to do’s” to communicate what it would take to be successful (see exhibit 7-1). This list provides good advice to colleagues around the country who are undertaking similar efforts.

The organizational and cultural change important to the TPC model has two major dimensions. The first dimension speaks to the vision, mission, and goals of transition and reentry efforts. Accommodating the notion that the entire system is working toward something more than safe, secure institutions and more than surveillance and monitoring requires a major shift in culture. Engaging offenders in the process of change, enhancing their motivation, and seeking changed behavior to reduce future offending and victimization likewise requires a major cultural change.

The most significant change in my job and work duties is related to a change in my personal philosophy and understanding that public safety does not just simply include safe, secure, and constitutional confinement; public safety is also about risk reduction. I now emphasize to my staff the importance of identifying offender liabilities that could lead to the offender’s return to prison and the need to develop action plans to address these areas. Managing a case is no longer about just responding to problems. Case management is about identifying the problems that are linked to criminal behavior and addressing those areas with evidence-based practice interventions to reduce the risk of [offenders] committing new offenses and making new victims.

—Alan Earls, Associate Superintendent
TCC
Missouri Department of Corrections

Exhibit 7-1. Operating Norms for TPC Partners Developed by the Missouri Steering Team

After all is said and done, there is no such thing as managing change. You lead change or you follow it.

—Peter Drucker¹

| What To Do | What Not To Do |
|---|--|
| <ul style="list-style-type: none"> • Obtain full support and clear delegation of authority from the state agency director. • Keep other department heads informed and invested. • Know partners and their histories. • Educate partners on correctional issues and language. • Be data-driven. ("In God we trust. All others bring data.") • Accept only senior decisionmakers from partner agencies for membership on the steering team. • Choose a steering team leader who is a boundary spanner and has rank, common sense, personality, patience, persistence, thick skin, an open mind, and a sense of humor. • Use a professional facilitator. • Be clear and firm in assignment of responsibilities (shared responsibility is an illusion). • Not only fall in love with the TPC concept, but marry it! | <ul style="list-style-type: none"> • Tolerate mediocrity, indifference, inconsistent participation, or nonprofessional conflict among steering team members. (Replace them, if necessary.) • Rely exclusively or even primarily on national data. • Underestimate resistance. • Overestimate resistance. • Wait for the "right time" to get started. • Take on world hunger. • Promise what you cannot deliver. • Give up. |

¹ Drucker, P. (2004). As quoted in T. Clements and M. Stringer's *Good Government in Action: Missouri's Transition from Prison to the Community Initiative*. Presentation available online: www.dmh.missouri.gov/ada/provider/sti/04/051804%20TPCI%20Spring%20Institute%20Good%20Government%202004.pdf.

The second dimension of cultural change has to do with how corrections agencies interact with one another and with noncorrectional stakeholders. It is about collaboration. Collaboration flies in the face of the culture underlying large, bureaucratic organizations that are creatures of the industrial revolution—a culture that compartmentalizes work into component parts and does not naturally lend itself to cooperation across boundaries. As the eight states implementing the TPC model have moved forward with their work, they have found the need to enhance their understanding of, and skills in, collaboration. The level of effort these states have invested in honing collaboration skills demonstrates the degree of cultural change required of systems

implementing effective new strategies for transition and reentry. **Example 30 in appendix II** shows the goals of trainings held by North Dakota and New York to encourage the formation of collaborative teams both within corrections (North Dakota) and with local partners (New York).

State and Local Partnerships

As the TPC work began, it was clear that partnerships would be required across a range of state agencies. As the effort has evolved, it has become clear that partnerships at the local level as well as partnerships that involve both state- and community-level stakeholders must be established

Before Entry

As corrections grapples with the challenges of re-entry, there are those who are beginning to ask whether the lessons of this work may have relevance for the policies and practices that determine who is subject to “entry” into prison in the first place. Discussions under way in California are calling for giving judges greater flexibility to determine who is an appropriate candidate for a prison sentence and who might be managed as effectively through community-based supervision.

and strengthened. One example can be found in New York, which has developed partnerships with a number of County Reentry Task Forces (CRTFs) and has provided funding for their work in developing county-level strategic plans. (See **example 31 in appendix II**).

The Rewards of Addressing Reentry

The work of reshaping public policy and practice regarding offender transition and reentry is a decades-long undertaking. It poses clear new goals—public safety and reduced victimization through offender success. It poses new ways of doing business—collaboratively, based on research. Although not exhaustive, the bibliography of reentry resources included in this handbook lists some of the other documents and websites that offer helpful information on and tools for the important work of improving offender transition and reentry.

The TPC Initiative and parallel efforts (see “Bibliography of Resources on Offender Reentry”) have made a good beginning and significant progress, gathering accomplishments and new insights along the way. Hopefully this handbook will serve as one resource wherever efforts are being made to improve transition and reentry practices.

In reflecting on why noncorrectional stakeholders may be interested in coming to the table to work on reentry:

[N]obody really wants to take the time to learn enough about corrections or the justice system. Until you talk about money. We spend most of it, and so they can’t have it, but they need it. And the other agencies likely spend it more effectively than we do. So, that is the reward. Help us spend less so you can spend more on the root causes of crime: addiction, mental illness, child abuse. Our children are dying; let’s help make it stop. That is the real reward of working on reentry.

—Dennis Schrantz, Deputy Director
Policy and Strategic Planning Administration
Michigan Department of Corrections

Note

1. The federal Office of Management and Budget has published standards for evidence on effectiveness that can be found at www.excelgov.org/admin/FormManager/filesuploading/OMB_memo_on_strong_evidence.pdf. The University of Colorado’s Center for the Study and Prevention of Violence has also assembled information on effective programs and how they are assessed as to effectiveness; see www.colorado.edu/cspv/blueprints/index.html.

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APPENDIX I

Capsule Descriptions of TPC Implementation in Eight Pilot States

State of Georgia

Name of the Initiative in Georgia

In April of 2004, Georgia was accepted as a participant in the National Institute of Corrections (NIC) Transition from Prison to the Community (TPC) Initiative. Since that time, key leaders from numerous agencies have collaborated on what is called the **Georgia Reentry Impact Project (GRIP)**. They work together on a variety of teams that are focused on improving offender reentry activities throughout the state.

The vision of these leaders is “Promoting public safety through collaborative partnerships, which reflect a seamless system, to ensure that all returning offenders are law-abiding, contributing members of their community.”

Team Leadership Structure

The primary partners in this initiative are leaders from the Office of the Governor, the Council of Superior Court Judges, the Criminal Justice Coordinating Council, and the Departments of Corrections, Community Affairs, Education, Human Resources, Labor, and Technical and Adult Education. Other organizations that have had representatives participate in steering committee and policy team meetings include the Department of Juvenile Justice, the Georgia Bureau of Investigation, and the Workforce Investment Board.

Employees with these partner agencies are working together to study and resolve issues, develop new and innovative strategies, and encourage greater short- and long-term success for the approximately 20,000 offenders released annually from Georgia’s prisons.

The work of this initiative is overseen by a steering committee that is composed of the agency heads or top authorities for the partner entities. The steering committee is chaired by a representative from the Office of the Governor and meets twice a year to consider recommendations, make decisions concerning the direction of the effort, and assist the policy team in overcoming specific obstacles associated with this effort.

The policy team is the “engine” that drives all GRIP work activities. The policy team meets monthly and is composed of deputy directors, division directors, and other appropriate individuals from the primary partner agencies. The policy team is chaired by the Governor’s Policy Advisor on Public Safety and General Government.

Initially, the policy team was tasked with studying offender reentry in the state and making recommendations for improvement to the steering committee. The policy team formed workgroups that were tasked with gathering information and considering current and emerging practices in the following areas: sentencing, assessment and classification, release decisionmaking and transitional preparation, community supervision and resources, employment and education, housing, institutional and community-based treatment, and data and mapping.

As a result of the work of the policy team, 3 core recommendations and 27 specific recommendations were made to the steering committee in October of 2005. The steering committee approved all recommendations and tasked the policy team with implementing them. The policy team re-formed into an implementation oversight team and established six implementation workgroups for the

following areas: assessment and intake, institutional programming, transition planning and case management, release decisionmaking, community supervision and services, and evaluation. When the implementation groups had made sufficient progress on a variety of specific issues, they were re-formed to eliminate overlaps and maximize the efficiency of this undertaking. Currently, three workgroups are implementing the original recommendations: the Pre-Incarceration Workgroup, the Incarceration Workgroup, and the Post-Incarceration Workgroup. These workgroups meet frequently. Additionally, the evaluation workgroup has continued with its activities.

The implementation oversight team meets every other month to receive reports from workgroup chairs, to resolve issues, to coordinate activities, and to develop strategies for moving forward with the overall effort.

Early Targets of Change

Georgia identified one specific target of change very early in the project. Some offenders who were eligible for parole had no acceptable residence and so were remaining in prison for months, and sometimes years, beyond their release eligibility dates. Several key employees of the partner agencies worked together to resolve this problem. Their effort, called the Reentry Partnership Housing Project, resulted in the identification of grant funds and the linking of funds with certified housing providers. The project's innovative solutions made possible the discharge of approximately 240 offenders who would not otherwise have been released. As a direct result of this group's work, the state has realized an estimated cost avoidance benefit of nearly \$4 million.

Other early targets of change included the following:

- Developing enhanced offender assessment tools.

- Expanding institutional programming in cognitive skills, substance abuse resistance, and vocational education.
- Creating career centers within prerelease and transitional housing centers.
- Assisting offenders close to release with obtaining critical papers (e.g., driver's licenses, Social Security card, disability benefits, veterans' benefits).

All of these activities are continuing to receive attention.

Assessment and Case Management Strategy

Although Georgia had used a classification tool within institutional corrections for many years, this tool was not useful for identifying significant criminogenic risks and reentry needs or the corresponding institutional programming. As a result, the Georgia Department of Corrections (GDC) implemented the COMPAS instrument,¹ and this tool is now being used at intake to identify criminogenic risks and needs, form the basis of a reentry case plan, and inform institutional placement for programming purposes and reentry planning. This Web-based assessment instrument and associated case planning tool follows the offender from prison intake, informs release decisionmaking, and facilitates parole and/or probation supervision.

After considering the institutional intake setting in which assessments were conducted and the fact that offenders were waiting for some time in county jails before being admitted to prison, GDC determined that the COMPAS assessment would best be administered by probation staff while an offender was being held in the county jail before admission. GDC has tested this approach and is now expanding its use. Conducting the COMPAS assessment prior to admission will allow diagnostic counselors and parole staff at intake centers to have the benefit of this objective assessment information when they interview offenders. Intake facilities will continue to conduct other types of assessments

(e.g., medical, mental health, educational), and the results of these assessments will be merged with the COMPAS information by institutional counselors who will then, with input from parole staff, develop the reentry case plan.

The reentry case plan is entered into an automated system that can be accessed by institutional, parole, and probation staff. Developing the ability to share automated information across systems is a notable achievement. The automated reentry case plan can be updated by the various staff who will work with the offender over time. The creation of a single, unified case plan has been a longstanding objective of the primary partners in this effort. Work in this area is continuing.

Survival Needs

Work on offender housing issues was an early target of change. Helping inmates to gain necessary documents (e.g., Social Security cards, picture identification) or access to entitlement information has also been a key focus of this work. Cooperation among agencies has allowed for significant progress in these areas.

To promote more positive offender outcomes after release, several divisions within GDC developed a “Reentry Skills Building Handbook” in cooperation with the Division of Public Health, Department of Human Resources, Department of Driver Services, Department of Veterans Service, Department of Labor, and the Board of Pardons and Paroles. This handbook, which is given to offenders before their release, provides practical information concerning housing, employment, money management, relationships, probation and parole supervision, veteran’s benefits, and many other critical areas.

Increased institutional programming in cognitive skills, vocational education, and substance abuse should also assist offenders with their transition. Additionally, prison industry enhancement (PIE) programs are being developed that should aid offenders in learning job skills and building assets

that can be used during and after transition from prison.

Prerelease Planning

Studies in Georgia indicate that inmates who participated in “transition centers” were 11 percent less likely than general population releasees to return to prison within 3 years of release. GDC has significantly expanded its prerelease centers and transitional centers to allow more offender participation in prerelease programming. The 1,400 additional prerelease beds and 4 re-missioned in-house transition centers for offenders who are within a year of completing their sentences will allow many more inmates to experience important transitional programming before release and increase linkages established before release with community-based aftercare services.

One particular prerelease activity that has encouraged partnerships is the “Fatherhood Initiative,” a collaborative effort of the Department of Human Resources, the Department of Technical and Adult Education, the Department of Labor, and GDC. Offenders who owe child support learn job skills at certain prerelease centers, and partner agencies help them secure training, education, and employment so that they are able to make child support payments soon after release from prison.

Selected prerelease centers have been pilot sites for testing a variety of transitional services and programs. These centers have expanded programs, developed new approaches to existing programs, and made innovative use of staff and resources. They are also developing new protocols for prerelease planning and services.

Innovative Partnerships

Local reentry initiatives have been the focus of Serious and Violent Offender Reentry Initiative (SVORI) activities in Georgia. SVORI efforts in selected communities resulted in local partners joining teams to study and develop methods of facilitating offender reentry with local transition centers. Some

of these local efforts, particularly in Savannah, have yielded significant results. GDC probation staff serve as local coordinators for this effort.

Linking TPC Initiative and SVORI activities has been a matter of ongoing interest, and efforts to coordinate the state and local aspects of these initiatives will continue.

State of Indiana

Name of the Initiative in Indiana

Indiana has participated in the TPC Initiative since 2003. The effort was revitalized under the direction of Indiana Department of Correction (DOC) Commissioner J. David Donahue in 2005 under the title **Road to Reentry**. Commissioner Donahue has received leadership support from the Indiana governor and a wide range of state agencies. The mission set out by these leaders is “To enhance public safety through improving the successful transition of offenders to the community.”

Team Leadership Structure

Partners in this initiative are leaders from the Indiana Departments of Education, Health, Natural Resources, Transportation, Veterans’ Affairs, and Workforce Development; the Attorney General’s Office; the Family and Social Services Administration; the Indiana Council of Community Mental Health Centers, Inc.; the Indiana Criminal Justice Institute; the Indiana Housing and Community Development Authority; and the Bureau of Motor Vehicles.

The work of the initiative is guided by a steering committee consisting of representatives from the partnering organizations. The steering committee schedules meetings on a quarterly basis. Work teams are formed and meet as needed to carry out specific tasks necessary to accomplish the goals of the Road to Reentry initiative.

Early Targets of Change

One distinctive aspect of the effort in Indiana is found at the Plainfield Reentry Educational Facility (PREF). In addition to the expected reentry activities of case planning, assessment, and programming, the institution has developed innovative partnerships with local community stakeholders. For example, offenders at PREF receive education on money management and modern banking tools. While incarcerated, offenders are provided with an ATM card to make purchases at the canteen snack bar. This allows offenders to experience the changes in banking and money management that have occurred in recent years. A similar approach is planned for female offenders released from the Madison Correctional Facility.

Other early targets of the initiative included providing state identification cards for offenders leaving the prison system. ID cards are currently being issued at several DOC facilities with plans to expand this effort to ensure all offenders have the opportunity to leave institutions with valid identification. In addition, ensuring that veterans’ benefits are available to eligible offenders was an effort undertaken through the cooperation of Department of Veterans’ Affairs.

Assessment Strategy

The assessment instruments currently used were developed specifically for the Indiana DOC. They include risk/needs assessments as well as assessments for mental illness, substance abuse, and other areas. DOC is currently evaluating additional tools to be used throughout the process.

Survival Needs

The initiative has addressed identification needs as described above. Housing is being coordinated through the Reentry Accountability Plan and through contact with local communities. DOC has signed a memorandum of agreement with the Family and Social Services Administration to allow application for Medicaid, Temporary Assistance for

Needy Families, and food stamp benefits before release from prison. Family and other issues are particularly addressed at the Plainfield Reentry Educational Facility (see below).

Prerelease Planning

Prerelease planning is done at all DOC facilities. While reentry is a focus throughout the Indiana DOC, particular effort has focused on the Plainfield Reentry Educational Facility (www.in.gov/indcorrection/reentry/center/). This institution was created primarily to focus on reentry services to offenders returning to the greater Indianapolis area. It opened in 2006 and provides education and skill building during the last 6 to 24 months of incarceration.

Case Planning and Management

A single case management plan has been developed to move with offenders from arrival at a DOC facility, through their incarceration and supervision, and finally into their transition to the community. The case management plan is called the Reentry Accountability Plan (RAP).

Innovative Partnerships

Indiana's Road to Reentry initiative has nurtured innovative partnerships to further its mission. One example is the partnership between the DOC and the Department of Workforce Development. One benefit of this partnership is the permanent assignment of a job developer from the staff of the Department of Workforce Development to the Plainfield Reentry Educational Facility. Another important partnership—with local stakeholders—is the PREF Advisory Board. This board of more than two dozen members has been drawn from local business, media, law enforcement, prosecution, the faith community, and nonprofit service providers, as well as correctional leadership. The board provides a forum both for informing the community about PREF's mission and activities and for securing community input, involvement, and support. One example of this involvement and support was reported by the Hendricks County Flyer in October

of 2006: "Nearly two dozen Central Indiana businesses were recently represented at the first Plainfield Re-Entry Educational Facility Opportunity Fair, which was more than twice as many as had been expected."²

The Corporation for National and Community Service (CNCS) awarded the Indiana DOC a 1-year grant, effective April 29, 2007, for up to 20 AmeriCorps*VISTA members for the purpose of eliminating poverty through reentry efforts. Each member provides 1 year of full-time service supported by a small living stipend provided by CNCS. The Indiana DOC has six VISTA members and oversees the VISTA projects at Dismas of Michiana and the Family Justice Center for a total of nine VISTA members currently statewide. VISTA members do not provide direct services to the offender population but build an agency's capacity to carry out its mission by enhancing, strengthening, and furthering ongoing reentry efforts.

State of Michigan

Name of the Initiative in Michigan

Michigan's participation in the TPC Initiative began in 2003 and is known as the **Michigan Prisoner ReEntry Initiative (MPRI)**. In addition to the assistance provided by NIC through the TPC Initiative, Michigan received assistance from the National Governors Association (NGA) in developing its comprehensive, statewide transition and reentry model. MPRI integrates lessons learned from the state's experiences with SVORI and incorporates the policy statements and recommendations contained in the Council of State Governments' Reentry Policy Council Report. MPRI will be implemented statewide by October 2008.

The vision of MPRI is that every prisoner released from prison will have the tools needed to succeed in the community. The mission of MPRI is to reduce crime by implementing a seamless plan of services and supervision developed with each offender—delivered through state and local collaboration—

from the time of their entry to prison through their transition, reintegration, and aftercare in the community.

The goals of MPRI are to:

- Promote public safety by reducing the threat of harm to persons and their property by released offenders in the communities to which those offenders return.
- Increase success rates of offenders who transition from prison by fostering effective risk management and treatment programming, offender accountability, and community and victim participation.

Team Leadership Structure

With strong leadership from Michigan's Governor, the Michigan Department of Corrections (MDOC) provides the management staff for MPRI under its Office of Offender Reentry along with its Planning and Community Development, Field Operations, and Correctional Facilities Administrations. MPRI is overseen by the State Policy Team (SPT), which is composed of top-level leaders from five state departments. The Governor's criminal justice policy advisor chairs the team. The five member departments of the SPT and their focus areas are as follows:

- Department of Corrections: Prisoner custody, education, and training; parole decision process; and parolee supervision.
- Department of Community Health: Physical and mental health, alcohol and drug addiction services.
- Department of Labor and Economic Growth: Housing, adult education, vocational training, employment preparation, and employment services.
- Department of Human Services: Family and child welfare.
- Department of Education: Education for former prisoners and their children.

MDOC is supported in this work by both for-profit and nonprofit organizations, most notably Public Policy Associates, Inc., and the Michigan Council on Crime and Delinquency.

Early Targets of Change

MPRI is a statewide strategic approach to creating safer neighborhoods and better citizens. The result of MPRI will be reduced crime, fewer victims, safer neighborhoods, better citizens, fewer returns to prison, and reduced costs.

The lynchpin of the MPRI model is collaborative case management (CCM) and supervision. CCM is an effective strategy for reducing crime and engaging all partners in a collaborative process that holds offenders accountable for their behavior and increases the likelihood of their success. CCM links offender assessment information with evidence-based supervision and intervention strategies at each stage of the transition and reentry process.

A second critical component of MPRI is a strong and sustained local community capacity to support offender transition and reentry. Communities throughout Michigan are dedicated partners in MPRI and committed to improved prisoner reentry that results in less crime by preparing offenders during transition to the community.

Assessment Strategy

MPRI has focused on assessment and classification by incorporating approaches to fully respond to assessed risk, needs, and strengths through a Transition Accountability Plan (TAP). MPRI uses an assessment instrument (COMPAS) that integrates many elements of risk, needs, and strengths into a single assessment. Along with the TAP, effective assessment and classification are key components of the MPRI model. COMPAS addresses the variables and key principles for assessment that underlie the initiative and is based on research that shows what works to reduce recidivism. This evidence-based

approach is fundamental to the implementation of the full MPRI model.

Survival Needs

Highly specific reentry plans are developed for all returning prisoners to ensure the provision of critical services such as housing, employment, and treatment for mental illness.

Prerelease Planning

Local prison in-reach teams conduct case management meetings with key prison staff and offenders before the offenders are released. Weighing offender risks, needs, and strengths, staff provide a coordinated package of services, programs, and interventions to help improve offender success in transitioning back into and staying in society.

Case Planning and Management

The Transition Accountability Plan is the comprehensive case plan that summarizes all the information that is needed about the offender, including information obtained from COMPAS and other critical assessments, the actions that must occur prior to release, the terms and conditions of parole supervision, goals and expectations, noted progress toward those goals, and the array of interventions and services that the offender participates in. Under the MPRI model, the TAP process begins when the offender enters prison and continues through incarceration, release to the community, community supervision, and aftercare. The TAP is first prepared for all offenders during the prison intake process (Phase 1: Getting Ready). It is updated as part of the parole decision process when the prisoner is approaching his/her earliest release date (Phase 2: Going Home) and updated again while the prisoner is in the community (Phase 3: Staying Home). The TAP serves as a concise guide for prisoners, former prisoners, correctional and field staff, service providers, victims, faith-based organizations, and community members involved in case management and supervision.

Innovative Partnerships

When Governor Jennifer M. Granholm launched MPRI immediately after her election in 2002, the effort was assisted greatly by innovative partnerships inside and outside of state government. A for-profit think tank for policy development, Public Policy Associates, Inc., assisted in the macroplanning for the initiative and worked collaboratively to raise millions of dollars in foundation funds. This effort was made possible by the MPRI partnership with the Michigan Council on Crime and Delinquency, whose decades of successful work in community organizing were essential to moving the initiative from the pilot site stage to its current statewide capability, which will be fully up to scale by 2010.

During its first year of implementation in fiscal year 2006, the Michigan legislature funded eight pilot sites to establish an organizational structure to support local community transition and reentry efforts. In 2006, the JEHT Foundation provided additional funding to expand the number of pilot sites to 15. These initial funds supported the costs of establishing local community coordinators, advisory groups, prison in-reach teams and the organizational structure needed to sustain ongoing transition and reentry efforts at the local level. The initiative is a collaborative effort administered through a public and private partnership that includes the Departments of Corrections, Community Health, Education, Human Services and Labor and Economic Growth; Public Policy Associates, Inc., and the Michigan Council on Crime and Delinquency.

Local sites have a variety of teams and committees who plan, organize, and implement Comprehensive Prisoner ReEntry Plans for their jurisdictions. Steering teams guide the effort, and committees are responsible for prison in-reach and for coordinating prison facility and parole supervision. A unique local governance structure led by nonprofits and Michigan's federally funded employment "One Stop Shops" (Michigan Works!) carries out the role of fiscal agent and is responsible for open and

competitive contract bidding and comprehensive plan monitoring. Local MPRI community coordinators provide full-time administrative support for the effort. See appendix II for more information on Michigan's Local Governance Structure.

The goals of the local governance structure are to:

- Provide as much statewide consistency as possible in the implementation of the MPRI model while protecting local control by the MPRI steering team and other stakeholders.
- Provide protection from legal liability to local stakeholders involved in the MPRI process through their involvement in formal and established administrative structures.
- Ensure that key decisions about the design, implementation, and oversight of the local MPRI comprehensive plans are part of a formal, clear, and open process that involves community leaders, representatives from MDOC, local elected and appointed officials, and citizens who support the crime fighting goals of MPRI.
- Provide an effective forum to conduct public education about MPRI.

In 2008, local MPRI efforts will cover 100 percent of Michigan's 83 counties through 18 county and regional steering teams.

Performance Measurement

Key outcome measures to determine the success of MPRI include:

- Reducing recidivism (defined as a return to prison during the term of parole).
- Increasing the time between release and failure.
- Reducing the number of violations of supervision conditions by parolees.

One interim objective is to increase the parole approval rate by 2 percent each year as the parole board gains confidence in release outcomes.

Another objective is to increase the success rate of

MPRI participants as much as 10 percent statewide when the MPRI model is fully implemented.

As of May 2007, 7,614 offenders have been or are currently engaged in MPRI programming. Of these, 5,746 (75.5 percent) have been paroled or have completed their sentences. Of this group of 5,746, 848 (14.8 percent) have been returned to prison, as compared with 248 (19.1 percent) of the 1998 baseline cohort. To date, an initial 23-percent improvement in recidivism outcomes has been noted.

State of Missouri

Name of the Initiative in Missouri

Missouri has been engaged in the TPC Initiative since 2002. Known as the **Missouri Reentry Process (MRP)**, the state's initiative began under the leadership of former Director of Corrections Gary Kempker and is now supported by and continuing to move forward under the leadership of current Director of Corrections Larry Crawford.

Team Leadership Structure

A cabinet-level leadership group spearheads the effort. Eight state agencies—the Departments of Corrections, Economic Development, Elementary and Secondary Education, Health and Senior Services, Mental Health, Revenue, and Social Services and the Office of the State Courts Administrator—and representatives from the community have partnered to strengthen offender reentry practices.

Directly under the cabinet-level group is the MRP steering committee. The membership of this committee includes top-level staff from the aforementioned state agencies as well as representatives from private service providers and community members.

Finally, a leadership committee ensures that implementation plans are being successfully executed and provides additional guidance, direction, and assistance to the steering committee.

Early Targets of Change

Early targets of change in Missouri included the creation of transitional housing units (THUs), which are housing units or wings in correctional institutions. The Department of Corrections has established these units in 11 institutions. Within 180 days before an offender's release, the offender is moved to a THU and while there works on goals outlined in his/her Transition Accountability Plan and receives intensive case management focused on a seamless transition to home. Programming offered in the THU includes, but is not limited to, the following areas: employability skills/life skills, cognitive skills, parenting, substance abuse education, long-distance dads, and the impact of crime on victims. All offenders in the THU are registered in the "Great Hires" system and linkages are made to community resources to ensure continuity of care upon release.

Other changes include the following:

- Development of an employability screening and rehabilitation plan process for each offender.
- Revision of Department of Mental Health institutional substance abuse treatment certification standards to place emphasis on discharge planning, transition practices, and successful linkage to community providers for continuity of care.
- Provision of formal mental health discharge planning by institutional mental health services providers, allowing offenders to make direct linkage to community providers for continuity of care. In February 2005, the D5-8.12 Mental Health Discharge Planning policy was finalized. This policy established guidelines for preparing offenders with serious mental illness for discharge to the community.
- Implementation of evidence-based programs for enhancing offender motivation, problem solving ability, and thinking process. Contract services have been secured for provision of these services, and an implementation team will oversee the use of cognitive skills programming in correctional facilities, treatment centers, supervision districts, and community supervision centers statewide.
- Screening of all offenders before release for services offered at local One-Stop Career Centers such as Parents' Fair Share, the Career Assistance Program, and Veterans Services. Offenders are registered in Great Hires and have an appointment scheduled with a career center before release from prison.
- Provision of a monthly career center overview to offenders in THUs by Division of Workforce Development staff.
- Establishment of links with the Division of Workforce Development and local workforce investment boards for services to offenders before release.
- Development of a targeted educational effort for prospective employers that demonstrates the benefits of hiring offenders following release from prison along with a partnership with One-Stop Career Centers, where appointments are scheduled for offenders before release from prison.
- Provision of the Building Strong Families (BSF) program in all THUs. In January 2005, the University of Missouri Extension was awarded the contract to offer BSF, a strength-based program that it developed and tested over an 8-year period in Missouri. BSF helps families identify and build strengths, face their challenges, and make informed choices.
- Revision of Missouri DOC Procedure IS13-3.1, Offender Visitors, to include a paragraph directing that all staff assigned to work in a visiting room receive training focused on offender and family dynamics, family values, and the importance of family and prosocial relationships within 90 days of being assigned to the visiting room. The Central Training Academy developed a training program to coincide with the procedure requirement.

- Initiation of pilot testing of the Supportive Parent/Child Visitation (SPCV) model for incarcerated parents, their children, and other family members at Alcoa Correctional Center and the Western Reception, Diagnostic, and Correctional Center. SPCV centers on healing and building positive relationships, previsit preparation, structured visits, and postvisit debriefings. The Missouri DOC has a timetable for implementing SPCV throughout the state.

The Missouri DOC and Department of Social Services (DOSS) have entered into a memorandum of understanding (MOU) that allows for DOSS staff to enter institutions to provide onsite services and/or information to offenders in THUs. Services and information include how best to work with DOSS, food stamps, foster care, child support, and temporary assistance.

Assessment Strategy

The Missouri DOC uses three major assessment processes and tools: one for the institutions, one for parole decisionmaking, and one for supervision in the community. All three tools have been validated and revalidated on the Missouri offender population. However, the time has come for Missouri to move to a single, ongoing dynamic assessment process with a single assessment tool for the three aforementioned areas. Significant initial work on this project is under way.

Survival Needs

Ensuring that all offenders have a Social Security card, birth certificate, and state identification card when released from prison will directly affect an offender's ability to obtain employment within the first 60 days after release. To provide this help, all THUs have assisted offenders with obtaining replacement Social Security cards through an informal agreement with their local Social Security office.³ The Missouri DOC and DOSS have entered into an MOU to assist offenders in obtaining birth certificates before release. DOC and the Department of

Revenue are working together to provide state identification cards to offenders before release. To obtain a state identification card, offenders must have a Social Security card and birth certificate. All identification documentation will be scanned at the institution and electronically sent to the Department of Revenue along with an electronic application and picture. This process will be piloted at Alcoa Correctional Center and Women's Eastern Reception, Diagnostic and Correctional Center.

During fiscal year 2002, approximately 30 percent of the 6,650 parole violators returned to prison did not have a known stable address at the time of their reincarceration. To begin addressing this barrier to reentry, probation and parole staff are now members of regional housing boards across the state. They are working with these boards to identify additional housing resources for reentering offenders.

Prerelease Planning

The Transition Accountability Plan in Missouri is initiated when an offender is first placed under the purview of DOC. As the offender's assets and liabilities are determined, a detailed individualized plan is formulated and key mentors are identified and assigned to the offender's case management team. This plan lays the groundwork for success.

During incarceration, the offender, his/her family, staff, and community resources work together to address past issues and to ensure that the offender continues to work toward achieving his/her goals in preparation for release. As the offender successfully completes a goal, the plan is modified.

DOC has purchased and installed video-conferencing equipment in most of the institutions with THUs and in strategically placed probation and parole offices to enhance the reentry planning process by connecting the offender with the field officer, treatment provider, and other significant participants involved in the offender's case management plan. The equipment also allows the

family to participate in release planning without having to travel to the institution.

Case Planning and Management

The use of the Transition Accountability Plan strengthens DOC's ability to hold offenders accountable for their actions, provides offenders with the tools necessary to identify and address liabilities that contribute to criminality, and provides concerted department and community resources to support offenders' goals during incarceration, upon release, and during supervision within the community.

Innovative Partnerships

To offer individualized, community-based treatment programming that helps offenders succeed in both employment and substance abuse treatment without one interfering with the other, MRP has fostered a partnership with the Division of Alcohol and Drug Abuse. Initiated in 2004 and effective April 1, 2005, this partnership has resulted in a restructuring of all of the division's primary recovery treatment to include multiple levels of care and flexible vocational programming. This model incorporates employment as a treatment goal, offers employment interventions, and does not interfere with existing employment.

Much work has been done at the state level to ensure that MRP is implemented efficiently and effectively; however, it is critical that the same work be accomplished at the local level. To address local needs, more than 30 local steering teams have been established to lead, guide, direct, and manage MRP at the local level. These teams include representatives from the same entities that are on the state steering team plus additional key local stakeholders.

DOSS applied for and received a grant for 20 VISTA workers to work on reentry resource issues in 18 rural Missouri counties. Probation and parole officers working with offenders in the field rely on a variety of agencies and professionals to provide mental

health services for offenders. There currently is no standard of care for agencies or professionals working with offenders unless they are certified by the Department of Mental Health or contracted by DOC. Consequently, the quality of the mental health services provided varies, for example, with regard to the conditions under which information is shared, the level of involvement of field officer and family members, and the conduct of assessment, treatment planning, treatment evaluation, and discharge planning.

To address this, the Departments of Corrections and Mental Health collaborated to develop guidelines for mental health and substance abuse treatment professionals providing professional clinical services to offenders under probation or parole field supervision. The guidelines also delineate expectations of probation and parole officers in the referral and treatment process. These guidelines now accompany each probation and parole referral for mental health or substance abuse services.

Performance Measurement

The Missouri DOC Research Unit has completed an initial outcome study on offenders released through MRP. The initial results are encouraging. The study found that the 6-month postrelease rate of recidivism for offenders released from a THU was 6.8 percent lower than that of a comparable group of offenders released from institutions without THUs. The 12-month postrelease rate of recidivism for offenders released from a THU was 4.7 percent lower than that of the comparison group. If the reduction in recidivism continues both as the number of offenders who go through the reentry process increases and as the time from release increases, then the reentry process will significantly reduce the number of offenders returning to prison.

Outcome measures have been developed for key DOC reentry targets and initiatives, and partnering agencies have also developed outcome measures for their reentry targets and initiatives.

State of New York

Name of the Initiative in New York

New York began its reentry work in 2003 with the **New York State Interagency Reentry Task Force and Transition from Prison to Community Initiative**, and the state was selected to participate in NIC's TPC Initiative in early 2004. The vision of the Task Force is "a safer New York resulting from the successful transition of offenders from prison to living law-abiding and productive lives in their communities." To accomplish its vision, the Task Force is working to increase the number of offenders who successfully make the transition from prison to their communities through a coordinated statewide system that assesses and responds to offender risks and needs, supports offender accountability and reparation to victims and communities, promotes offender self-sufficiency, and encourages family and community involvement in offender success.

Team Leadership Structure

New York established a policy team consisting of commissioners and directors from state government agencies. The policy team is responsible for developing a shared vision, establishing agency commitment, and assigning core staff able to devote time and resources to developing a seamless reentry process to serve on a steering committee. The following agencies are participating:

- Division of Criminal Justice Services
- Department of Correctional Services
- Division of Parole
- Board of Parole
- Division of Probation and Correctional Alternatives
- Office of Mental Health
- Office of Alcoholism and Substance Abuse Services
- Department of Labor

- Division of Housing and Community Renewal
- Division of the Budget
- Department of Health
- Office of Temporary and Disability Assistance
- Office of Mental Retardation and Developmental Disability
- Office of Children and Family Services

Early Targets of Change

New York has created a Research and Information Support Team (RIST) composed of researchers from the 14 stakeholder agencies. RIST does the following:

- Designs and conducts original statistical analyses of existing data to answer questions pertaining to reentry issues.
- Summarizes findings from academic literature, government reports, and unpublished research previously conducted by participating agencies and relevant to questions posed by the Task Force.
- Establishes working arrangements among partner agencies regarding how to share needed information.
- Develops data infrastructure to facilitate an efficient response to the information needs of the Task Force.

Innovative Partnerships

In 2006, New York State dedicated funds from the federal Byrne Grant program to support the development of nine county reentry task forces (CRTFs) for Erie, Monroe, Nassau, Oneida, Orange, Rensselaer, Rockland, Suffolk, and, most recently, Westchester counties. These task forces seek to:

- Provide coordinated services across a wide spectrum of needs to high-risk offenders returning to the community.
- Collaborate with state criminal justice and human service agencies to develop transition

plans for high-risk offenders transitioning from prison back into the community.

- Enhance local capacity to develop strategies to provide services and manage risk.

The role of the CRTFs is to coordinate and strengthen the community response to high-risk offenders transitioning from prison back to the community, with the ultimate goal of reducing the number who return to prison for new convictions. In 2007, New York committed additional dollars to continue support to the original nine CRTFs and to develop new ones in at least another three counties.

Evidence-Based Principles

In an effort to incorporate evidence-based principles into policy and practice, New York has supported a number of training events for criminal justice and nonjustice partner agency staff involved in the state reentry initiative at all levels, from policymaker to field agent to case manager. Additionally, the original CRTFs participated in a 3-day training focused on strengthening collaborative partnerships among participating county agencies and adopting evidence-based practices to develop and implement case plans for returning offenders. A similar training will be developed for the new CRTFs.

The state Department of Correctional Services (DOCS) is developing cognitive-based programming and building evidence-based competencies among key program staff to provide effective services to offenders housed within its institutions. DOCS also recently opened a pilot unit for offenders transitioning to the community.

Survival Needs

The Interagency Reentry Task Force and Transition from Prison to Community Initiative has been reinvigorated through a change in administration resulting from the elections of 2006. Under the leadership of the Division of Criminal Justice and the Deputy Secretary for Public Safety's office, a

cross-agency committee has been formed and charged with ensuring that transitioning offenders have the identification documents and Medicaid eligibility required for accessing needed services immediately upon reentry to the community.

Case Planning and Management

Through CRTFs, local communities in New York have been funded to develop case management and planning capacity to assist offenders returning from prison to the community.

State of North Dakota

Name of the Initiative in North Dakota

In July of 2005, the newly appointed director of the North Dakota Department of Corrections and Rehabilitation (DOCR), Leann Bertsch, reaffirmed North Dakota's participation in the TPC Initiative. Since that time, DOCR has been leading the North Dakota reentry effort, with the support of the State Workforce Development Agency, North Dakota Job Services, the North Dakota Department of Human Services, and the North Dakota Housing Finance Agency.

Team Leadership Structure

The effort has been guided by the state-level policy team, including the agencies named above. The day-to-day work of the initiative has been guided by internal DOCR working groups, with participation of all divisions and levels of staff as well as staff from outside stakeholder agencies.

Early Targets of Change

Workgroups have been formed around the following topics:

- **Evidence-Based Practice:** This workgroup supports the overall vision of the effort, which is focused on recidivism reduction. Heavy emphasis has been given to case planning based on

assessed risk and criminogenic needs. Program audits are in progress to assure the quality of current practice.

- **Offender Behavior and Programming:** This workgroup has developed and implemented an integrated case plan that is currently in use in a paper version.
- **Education, Vocational Training, and Employment:** Testing and assessment for educational, vocational, and employment needs are conducted at intake into prison, and these assessments follow the offender through the period of incarceration and into the community.
- **Revocation Decisionmaking:** The workgroup has instituted the use of assessment tools to determine the level of risk, the nature of the violation, the original offense, and the offender's response to supervision when violation of parole occurs. The workgroup is also developing a revocation decisionmaking guideline, "Managing Non-compliant Behavior," that will provide a more consistent, systematic, and community safety-based approach to deciding whether revocation is appropriate.
- **Inmate Release Preparation, Discharge, and Aftercare:** Work is under way to develop a database and automate the case-planning process. At present the prison ITAG database is being developed with case plans. One hundred percent of offenders' assessments are now in the database, and information about the transition programming available for offenders is also accessible. A case plan manual has been developed. A continuing need in this area is for additional programming resources.
- **Release Decisionmaking:** Level of Service Inventory-Revised (LSI-R) assessment information and good time release dates are currently being used as a way to determine a projected release date for planning purposes.

- **Parole Supervision and Services:** Field Services now has access to the ITAG database, a first for DOCR. Case managers and treatment staff in the prisons are now making aftercare appointments before an inmate's release for a continuum of care to the community.
- **Female Offenders:** Work is under way on the development of gender-responsive programming for female offenders consistent with evidence-based practices.
- **Faith-Based Initiatives:** A mentorship pilot program has been developed in Bismarck. This workgroup is also identifying faith-based groups in Bismarck that are interested in working with offenders.

Assessment Strategy

DOCR has fully implemented the use of the LSI-R initial assessment as part of its approach to determining appropriate interventions and a case management plan. Validation of the LSI-R on a North Dakota population is currently in progress. An assessment of risk factors has been added to the field services database to enable this information to be used during postrelease supervision.

Sex offender assessments used in North Dakota include the Static-99, Stable-2000, Minnesota Sex Offender Screening Tool-Revised (MnSOST-R), and the Acute. These assessment tools, as well as the LSI-R, are being used to develop sex offender-specific case plans and help guide decisions regarding whether to refer sex offenders for civil commitment proceedings.

Survival Needs

The team is currently working with the North Dakota Department of Transportation to develop a method for acquiring driver's licenses or identity cards for all offenders when they are released. In addition, the Interagency Council on Homelessness is supporting DOCR efforts to identify housing for reentering offenders. The Department of Human Services is

working with the team to address the need for medication for offenders reentering the community and has formed a workgroup to examine potential legislative changes that might be necessary.

Prerelease Planning

Since beginning its work on transition and reentry, DOCR has been able to allocate 60 beds to transitional capacity, along with 54 beds for individuals being assessed for possible return to prison. In the biennium budget for 2007–09, DOCR planned to increase the number of transition beds by 60. In addition, 30 transitional beds are now available for women offenders, with another 45 proposed in the biennium budget. There are also now 50 halfway house beds in Fargo.

Case Planning and Management

Development of a single case plan is under way. This plan will be used from the time an individual enters prison, through the release phase and the period of postrelease supervision. Currently, the case plan is developed within ITAG and transferred manually to field supervision staff when the offender is released. Parole officers take risk/strategy information from the prison case plan, sentencing report, and a full reassessment of the LSI-R upon release to continue with the case plan in the field. They place special emphasis on identifying the three criminogenic need domains on which to concentrate in case planning.

North Dakota has developed specialized case loads to manage offender supervision. Sex offender specialists, reentry parole officers, and diversion caseloads allow officers to spend time on high-risk offenders. North Dakota has also developed a “top 50” highest risk offender report to identify those offenders who pose the highest risk for recidivism.

Innovative Partnerships

The state team is working with local reentry task forces in Bismarck and Fargo, originally funded through the SVORI Initiative.

State of Oregon

Name of the Initiative in Oregon

Oregon has participated in the TPC Initiative since 2002. The Oregon Department of Corrections has made a commitment to what it calls the **Oregon Accountability Model**, which provides a foundation for inmates to lead successful lives upon release. The model has six components: criminal risk factor assessment and case planning, staff-inmate interactions, work and programs, children and families, reentry, and community supervision.

Team Leadership Structure

Led by the Oregon DOC, the Transition Advisory Committee is the forum through which multiple agencies have collaborated since 1999 in working toward more successful transition of offenders from prison to the community. This committee includes representatives from all segments of DOC and from the Board of Parole and Post-Prison Supervision, county-level community corrections agencies, other state agencies that provide services to transitioning offenders and their families, and the community. In May 2007, the governor formally recognized this interagency collaboration by issuing an executive order that created a Reentry Policy Council. The council is responsible for planning, developing, implementing, and overseeing an improved and multiagency transition approach for Oregon.

Early Targets of Change

An early goal was the development of a model for transition that includes the following components:

- **Assessing criminal risk factors at intake and creating a corrections plan or intervention plan to address the highest risk factors during incarceration.** Assessing criminal risk factors and the risk to reoffend helps DOC first to identify those inmates most likely to fail upon reentry and then to provide them with programming to increase

their chances of being successful and crime-free when they return to the community.

- **Creating prisons that specialize in transition and release.** Historically, inmates have been assigned to institutions based only on available bed space and custody level. With the implementation of this new model, regional releasing facilities have been designated. Six months prior to release, inmates are transferred to a regional reentry institution located close to their home community. During this time, preparation for release is intensified, family contact is facilitated, and parole officers are more able to begin in-person contact before release.
- **Automated transition plans.** Release planning begins 4–6 months before release. A transition plan that forms the continuation of the corrections plan is created and available to the parole officer through the statewide information system. The institution counselor works with the community-based parole officer to create a plan that continues to address criminal risk factors while meeting community stability needs such as housing and employment.
- **Alternative incarceration programs.** The Oregon DOC offers intensive prison programs to selected inmates who are at risk of reoffending because of untreated addictions and criminal thinking. Alternative incarceration programs have three phases. Inmates who successfully complete the first phase (the residential phase) move into the community. Still considered inmates, they are supervised for 90 days while practicing the skills and discipline learned in prison. Those who complete this “transitional leave” phase are eligible to have their prison sentences reduced. After transitional leave, they are supervised by parole officers while completing their postprison supervision sentences.

Assessment Strategy

Validated assessments of risk and need are conducted at admission to prison and upon release to

the community to inform the planning for transition to the community. More frequent, periodic assessments are being planned.

Survival Needs

Two initiatives are currently under way to ensure that the urgent needs of all offenders are met as they transition to the community. The first focuses on precertification of federal benefits. The second focuses on the transition of mentally ill offenders, with the goal of ensuring continuity of care during the transition to the community.

DOC partners with the Family Planning Unit of the Oregon Health Division to provide each releasee with a “Smart Start” packet that includes health-related supplies and family-planning educational materials as well as information about public health services in the community.

Prerelease Planning

Approximately 6 months before release, most inmates are transferred to a regional reentry prison located closer to the community to which they will return. Programming prepares the inmate for release, and release plans are developed with the parole officer.

Case Planning and Management

A corrections plan is developed for each inmate based on an assessment of risks and needs. The plan seeks to reduce the risk of recidivism by addressing inmates’ dynamic risk factors correlated with future criminal behavior. This plan is available electronically at all DOC facilities and within all local community corrections agencies.

Innovative Partnerships

A recent partnership between the Oregon DOC and the Veterans Incarcerated Workgroup, the National Coalition for Homeless Veterans, and Vietnam Veterans of America has resulted in the publication of *A Guide for Incarcerated Veterans in Oregon* by the Department of Veterans Affairs

Medical Center in Portland. This handbook provides a wealth of information about such things as resources in the community, how to get started in planning for transition, and how to go about seeking federal benefits.

DOC is also partnering with the Department of Human Services to issue inmates a type of debit card that can be used to access state benefits such as food stamps and welfare payments. At release, inmate trust account dollars are transferred so they can be accessed through the card, replacing the old system of issuing a check that was often difficult to cash. This provides offenders instant access to their money to pay for food, transportation, and other immediate transition-related needs.

DOC has worked with the Department of Motor Vehicles (DMV) to develop a process to verify inmates' names while they are incarcerated. As a result, DMV now accepts DOC release identification cards as proof of identity for former inmates who have a verified name. This makes it easier for offenders to obtain a driver's license or state identification card.

Performance Measurement

Oregon has implemented a "balanced scorecard" approach to measuring its performance in offender transition and reentry. Following are some of the transition indicators the Oregon DOC and its partners are tracking:

- Percentage of inmates with housing at release.
- Percentage of inmates with employment/education at release.
- Percentage of high- and medium-risk inmates for whom a release plan was developed collaboratively by the institutional counselor, the parole officer, and the inmate.
- Percentage of high- and medium-risk inmates who enter programs prioritized in their corrections plans.

- Rate of participation in cognitive programs for high- and medium-risk inmates.
- Participation rate in alcohol and drug programs delivered to high- and medium-risk inmates.
- Percentage of inmates needing education who actually complete education.
- Percentage of inmates completing programs.
- Percentage of offenders who successfully complete supervision.

Improvements in these indicators are defined as benchmarks in DOC's strategic plan.

State of Rhode Island

Name of the Initiative in Rhode Island

The Rhode Island Governor's Steering Committee on Prisoner Reentry is responsible for Rhode Island's reentry efforts.

Team Leadership Structure

Rhode Island joined the TPC Initiative in 2002. Commitment to the effort was formally established in March 2003 by an Executive Order of the Governor that named the membership and charge of the Governor's Steering Committee on Prisoner Reentry. The initiative has been implemented in a three-tiered reentry governance structure. Tier I is chaired by the Governor's office and is composed largely of the Governor's cabinet. Representatives from the city of Providence are also members of Tier I. Tier II (the steering committee itself) represents the deputy directors or those with similar positions within each Tier I member agency. The following agencies are represented:

- The Departments of Corrections (including the parole board); Children, Youth and Families; Education; Health; Human Services; Labor and Training; and Mental Health, Retardation and Hospitals.

- Division of Information Technology.
- Parole Board.
- Public Transit Authority.
- Rhode Island Board of Governors for Higher Education.
- Rhode Island Housing.

Tier III represents local community service organizations actively involved in discharge planning for offenders and individuals with case management responsibility from institutional corrections, probation, and parole.

Early Targets of Change

As Rhode Island has worked toward a long-term strategic plan to enhance offender transition and reentry and defined five key work areas to meet this goal—employment, housing, probation and parole tracking, probation and parole staffing, and training—opportunities for immediate system improvement have presented themselves and allowed for “early wins.” Each of the following examples, which reflect a small representation of Rhode Island’s many accomplishments to date, represents the significant role the collaborating partners play in Rhode Island’s reentry work:

- The Department of Labor and Training has issued and awarded a contract to a local service provider to develop an industry-based transitional employment program for offenders, dedicated agency funds to hire a full-time staff member to conduct work readiness workshops and provide job search assistance to prisoners, co-located probation and parole staff in one of their local One-Stop Career Centers, and provided training for One-Stop Center staff on offender reentry and its special challenges.
- The Department of Education has realigned its comprehensive education strategy within DOC’s Education Unit and has implemented a series of changes to create more responsive and

supportive educational programs for incarcerated adults.

- The Department of Mental Health, Retardation, and Hospitals and DOC have jointly funded a position in a community mental health agency to work inside the prisons with inmates who are eligible for aftercare services and for funding in the community for treatment of their mental illness. The department has also collaborated on a technical assistance project to enhance Rhode Island’s ability to support the work of Assertive Community Treatment (ACT) teams managing clients who are involved in the criminal justice system.

Assessment Strategy

As a result of Rhode Island’s participation in the TPC project, DOC has adopted the LSI-R for risk/needs assessment. Institutional counselors are responsible for the administration of the LSI-R. The LSI-R was introduced in early 2006 in the adult women’s institutions and is administered to all women serving sentences of more than 6 months. The department is currently phasing in the assessment protocol in all of the male institutions. In addition, DOC will institute a gender-responsive assessment tool for women offenders.

Survival Needs

Two of the key issues for transitioning offenders in Rhode Island are identification and housing. DOC has worked with the Department of Motor Vehicles to facilitate obtaining state-recognized identification for offenders soon to be released to the community. The project allows DOC to provide state issued ID cards to inmates along with their release papers. The ID cards will be valid for the 6 months following release.

Housing is a significant concern for both men and women released from the state prison system. Several options are currently being considered by the Tier II reentry housing partners, including the

establishment of permanent supportive housing programs, shelter and care programs, and other community-based housing options. DOC has funded several community agencies to provide discharge planning. One agency is in the process of creating 19 permanent housing units for their clients.

Prerelease Planning

Rhode Island has been a forerunner in discharge planning. Discharge planning for inmates with HIV began in 1992. Since the 1990s, DOC has contracted with 12 community agencies to provide discharge planning services to all offenders 6 months (or more) before release to begin the transition process. Discharge plans address employment, education, housing, treatment, and other community needs and link offenders to services before discharge. In many cases, particularly with high-risk offenders (including sex offenders), discharge planners continue their work with the offender after he/she is released, coordinating services and activities with probation and parole staff and local police departments.

Case Planning and Management

A key principle of the TPC project is the need to unify the many agencies that work with offenders and their families. An emerging initiative is the establishment of a unified approach to case planning and management across and within government agencies. This aspect of Rhode Island's case planning and management efforts is in a preliminary stage.

However, Rhode Island has made much progress in establishing an Individual Program Plan (IPP) that will link offenders' risk/needs assessments, social history, institutional program plans, and discharge plans through a Web-based automated system. The automated system is currently in its testing phase.

On a broader scale, Rhode Island has made a statewide commitment to link and bridge all

government agencies' information systems. The Interagency Data Sharing Initiative is in a pilot phase, but plans are under way to use prisoner reentry as the second phase, ultimately enabling DOC and other agencies such as the Departments of Children, Youth, and Families; Education; and Human Services to share data and facilitate multiagency case management.

Innovative Partnerships

Key partnerships and initiatives are emerging in Rhode Island as a result of the TPC initiative:

- Providence, Newport, and Pawtucket have formed locally based multidisciplinary collaborative teams to examine offender transition and reentry from the community perspective. These teams are also working to strengthen and build community partnerships and services to enhance community safety through a more effective system of policies and services for returning offenders.
- DOC houses approximately 240 pretrial and sentenced women offenders (Rhode Island has a unified jail and prison system). A pilot initiative is under way to establish gender-responsive transition services for women. This initiative involves considering the adoption of gender-responsive risk/needs instruments, evaluating programs available to women to determine the extent to which they are both gender responsive and evidence based, examining institutional classification and discipline policies for women, and evaluating the training needs of uniformed and nonuniformed staff with respect to embracing reentry as an agency philosophy and mission and carrying out specialized approaches to working with women offenders. This pilot project also serves as the learning lab for Rhode Island's Tier II, the steering committee. As implementation strategies are developed by Tier II's workgroups, these strategies will first be pilot-tested in the women's facilities, where a smaller offender

population and fewer staff will permit a more controlled testing ground and opportunity for impact evaluation. Strategies demonstrated to be effective will be phased in at the male institutions.

Notes

1. COMPAS: Correctional Offender Management Profiling for Alternative Sanctions. See www.northpointeinc.com/compas.htm.

2. Jerry Battiste, "PREF Opportunity Fair links employers with employees," Hendricks County Flyer, Oct. 27, 2006, www.flyergroup.com/local/local_story_300133401.html.

3. The U.S. Social Security Administration has since terminated its agreements with individual states and is currently developing one MOU to be used nationally.

Appendix II

Examples From the Implementation Efforts of the Eight TPC States

Appendix II: Examples From the Implementation Efforts of the Eight TPC States

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Example 1. Indiana Policy Group and Steering Committee

INDIANA POLICY GROUP Indiana Offender Reintegration Project (A TPC Initiative) Fall 2004

Superintendent
Indiana State Police

Commissioner
Indiana Department of Correction

State Representative
Indiana General Assembly

Director
Indiana State Personnel Department

Commissioner
Indiana Department of Workforce Development

Director
Indiana State Budget Agency

Executive Director
Indiana Prosecuting Attorneys Council

Executive Director
Indiana Judicial Center

Commissioner
Indiana Commission for Higher Education

Chief Justice
Indiana Supreme Court

Chairperson
Indiana Parole Board

Secretary
Indiana Family and Social Services
Administration

Executive Director
Indiana Public Defender Council

Executive Director
Indiana Criminal Justice Institute

State Senator
Indiana General Assembly

Commissioner
Indiana State Department of Health

Policy Director for Public Safety
Office of the Governor

Executive Director
Indiana Housing Finance Authority

Vice Chairperson
Indiana Parole Board

INDIANA STEERING COMMITTEE

Indiana Offender Reintegration Project (IORP)

(A TPC Initiative)

Fall 2004

Director of Field Operations
Indiana Department of Workforce Development

Associate Professor of Public and Environmental Affairs
Indiana University Purdue University Indianapolis

Deputy Chief Probation Officer for Administration
Marion County Superior Court Probation Department

President and Chief Executive Officer
Mental Health Association in Indiana, Inc.

Staff Attorney
Indiana Judicial Center

Director of Primary Care
Indiana State Department of Health

Program Director for Co-Occurring Disorders, Criminal Justice
and TANF Relations, Division of Mental Health and Addiction
Indiana Family and Social Services Administration

Indiana Offender Reintegration Project Administrator
Indiana Department of Correction

Director of Community Corrections State Program
Indiana Department of Correction

Director of ACES
Choices

Deputy Director, Bureau of Family Resources, Division of
Family and Children
Indiana Family and Social Services Administration

Strategic Planner
Indiana Department of Correction

Adult Case Management Services
Indiana Department of Correction

Vice Chairperson
Indiana Parole Board

Director, Research & Planning
United Way of Central Indiana

Fiscal Analyst, Ways and Means Committee Office
Indiana General Assembly

Juvenile Justice Liaison, Office of Student Services
Indiana Department of Education

Director of Community Development
Indiana Housing Finance Authority

Commander, Training Division
Indiana State Police

Assistant Executive Director
Indiana Public Defender Council

Director, Employment Administration Division
Indiana State Personnel Department

Budget Analyst
Indiana State Budget Agency

Board Member
Indianapolis Neighbor Resource Board

Special Assistant to the Commissioner
Indiana Department of Correction

Senior Judge
Indiana Supreme Court

Director of Mental Health and Behavioral
Management
Indiana Department of Correction

Director
Allen County Community Corrections

Executive Director
Hamilton County Community Corrections

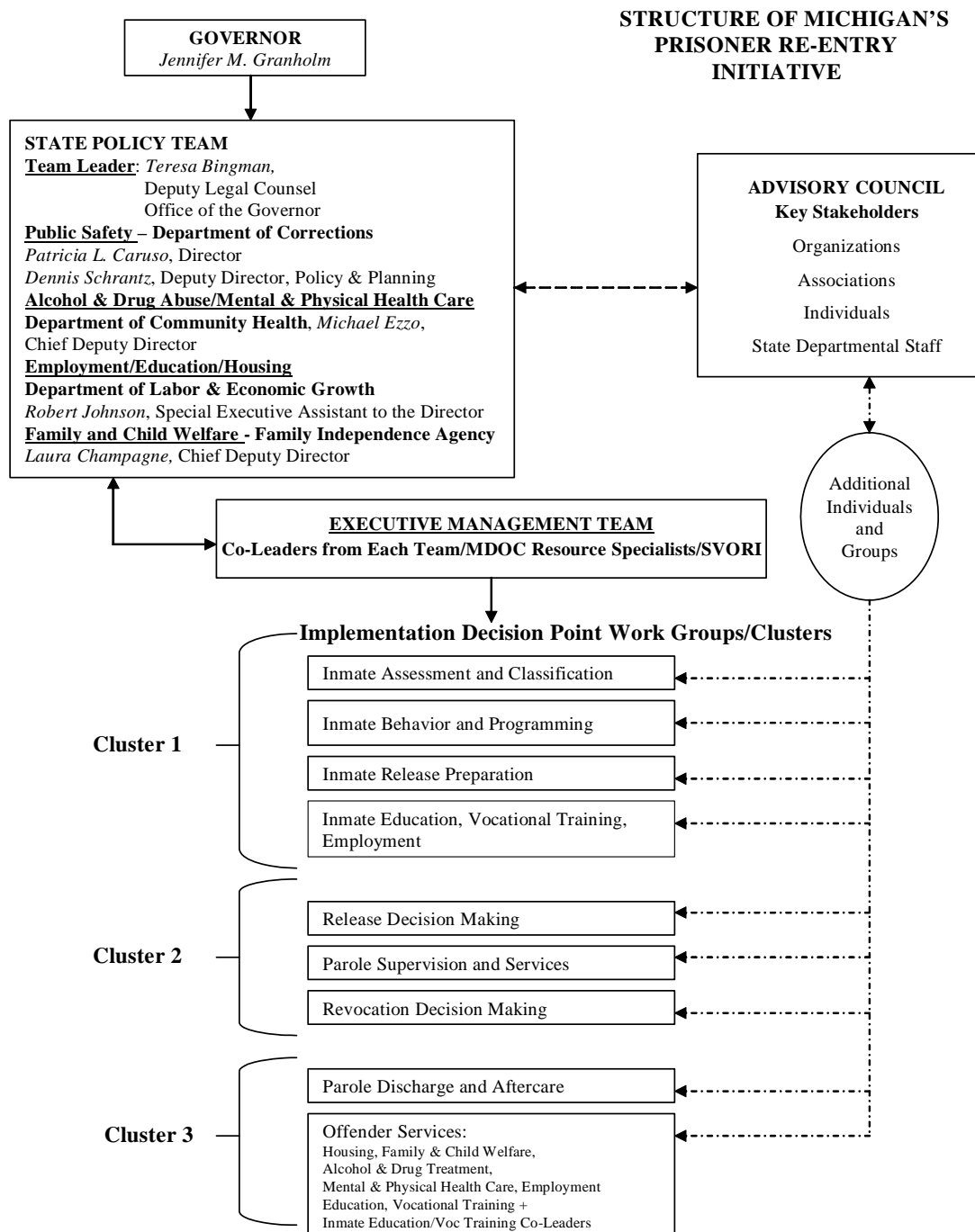
Senior Vice President, Workforce Services Development
Goodwill Industries of Central Indiana, Inc.

Community Reintegration Chaplain
Going Home Program, Choices

Executive Director
Indiana Prosecuting Attorneys Council

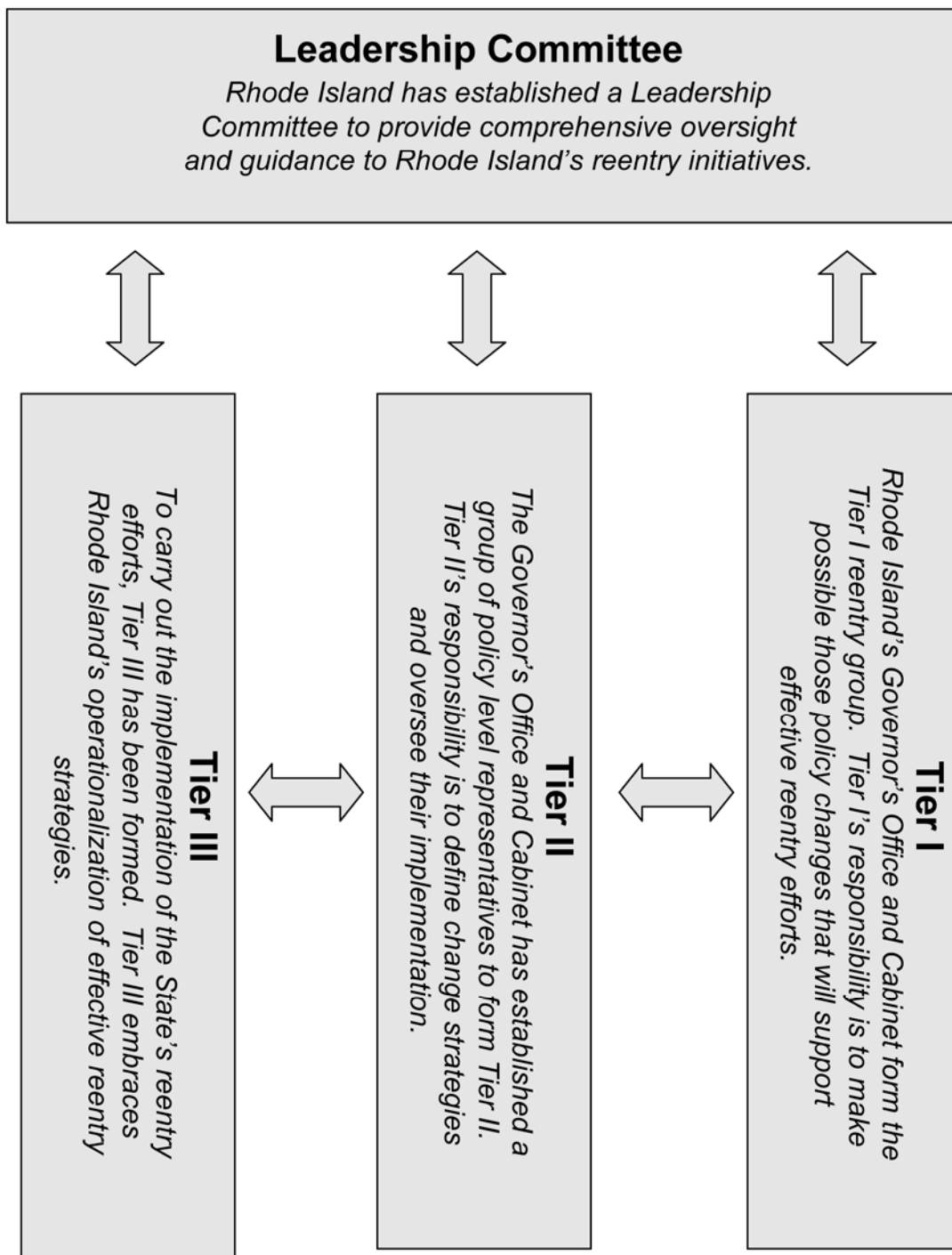
Deputy Director, Research and Planning
Indiana Criminal Justice Institute

Example 2. Structure of Michigan's Prisoner Reentry Initiative



Example 3. Rhode Island Team Structure

Making possible a vision of effective offender reentry in Rhode Island.



Example 4. North Dakota TPC Working Group Structure

Mirroring some key aspects of the TPC Model, the North Dakota TPC Initiative commissioned working groups organized around the following issue areas and focused on specific targets of change.

- 1. Evidence Based Practices:** Target—evidence-based practice program evaluation - both internal and external to DOCR
- 2. Education, Vocational Training and Employment:** Target—Develop additional support and funding to increase the number of vocational programs offered in the prison's division.
- 3. Offender Behavior and Programming:** Target—Develop, maintain and use a case management plan to insure that the dynamic risk factors identified on the LSI-R are addressed based on individual needs.
- 4. Offender Assessment and Classification:** Target—Develop a new PSI to incorporate assessment information
- 5. Faith Based Issues:** Target—Reduce recidivism through enhancing faith based community support for offenders.
- 6. Female Offender Issues:** Target—Provide gender responsive services and programs to female inmates to achieve recidivism reduction.
- 7. Revocation Decision Making:** Target—Develop and implement information form to be used prior to the revocation hearing and train staff statewide in its use.
- 8. Parole Supervision and Services:** Target—Determine how the ND State Prosecutors, Department of Human Services staff can better communicate prior to a parolee's release into the community.
- 9. Release Decision Making:** Target—Ensure that release decisions are founded upon sound paroling theory and match those decisions to research based correctional programming, re-entry planning, and community supervision strategies.
- 10. Revocation Decision Making:** Target—To establish guidelines to improve outcomes with offenders who require interventions, while addressing violations and relapse that may lead toward recidivism.

Example 5. Missouri Substance Abuse Ad-Hoc Team Charter

TEAM MISSION:

Identify effective substance abuse treatment approaches and opportunities for the Transition from Prison to Community (TPC) Initiative Team so they can recommend strategies to improve transition practices of offenders.

TEAM SPONSOR: Transition from Prison to Community (TPC) Initiative Team

BACKGROUND:

INTRODUCTION:

Each year approximately 1500 offenders return to Missouri communities following a period of confinement in a state correctional institution. In light of the significant number of offenders who re-enter society, we must ask an important public safety related question: How do we want them when they come back? The number of individuals returned to prison in Missouri for parole violations is growing. During FY 2002, 28% (4,417) of all prison intake consisted of parole violator returns. 97% of incarcerated offenders will at some point be released from prison and return to live in communities throughout the State. Public safety is enhanced when offenders transition successfully from prison to their community. There is an increasing need for the Department of Corrections to work collaboratively with departments of state government and other stakeholders to strengthen the likelihood that offenders will transition from their period of incarceration to become productive, law abiding citizens.

A Transition from Prison to Community (TPC) model, developed by the National Institute of Corrections is providing a philosophical framework in Missouri for stakeholder agencies to promote common interests, integrate services and improve the overall offender transition process. The Department of Corrections, Department of Mental Health, Department of Economic Development, Department of Social Services, Department of Health and Senior Services and Office of State Courts Administrator participated in an inter-departmental planning meeting concerning offender transition on September 10, 2002. At that time an inter-departmental TPC steering team was formed. The steering team was charged with “managing efforts for the collaborating organizations to improve transition practices for offenders in order to enhance public safety, reduce recidivism and maximize all available resources.”

The Steering Team has identified a number of key factors that impede successful offender transition and contribute to offender recidivism and re-incarceration. Systemic based strategies must be developed around each of the key factors to improve offender transition and enhance public safety. One of these key factors is returning offenders to the community with the skills and resources necessary to stay free of substances, both alcohol and drugs.

ISSUE

The mission of the substance abuse ad hoc team is to identify effective substance abuse treatment approaches and opportunities for offenders, starting with those in-prison, and continuing in the community after release. We should identify “what works,” and also explore how to make these programs available to every offender in need.

JUSTIFICATION

Baseline Data Questions gathered through the TPC Steering Committee show that:

- 1) a continuity of treatment that starts in the institution and continues in the community seamlessly promotes success (Question 15 G);
 - 2) institutional treatment has a small but positive impact (Question 15 C);
 - 3) of all those who return to prison, 31% are returned for a new drug conviction (Question 15);
 - 4) of those offenders admitted into prison from July through November of 2002, over 50% needed substance abuse treatment that the Department could not provide (Question 15);
 - 5) for offenders released from FY 98 to FY02, 49.2% of those leaving with a substance abuse problem were returned after 3 years compared with only a 37% return rate for those leaving without a problem (Question 15 A);
 - 6) during the period FY98-FY02, 65% of offenders with a known SA problem did not enter a treatment program before first release (Question 15 B);
 - 7) the supervision outcome for those who received institutional substance abuse treatment is better for offenders who received treatment than those who did not, especially in the first year after release (Question 15 C);
 - 8) offenders with a known SA problem on release are much more likely to have an active SA problem while under supervision compared to those who left prison with no SA problem (Question 15 D);
 - 9) for offenders released from FY 98 through FY 02, 63% with a known substance abuse problem did not receive treatment either in prison or in the field (Question 15 E);
 - 10) during this same time frame, of offenders with a known SA problem, 62% successfully completed community treatment (Question 15 F);
 - 11) for offenders with known SA problems who receive both institutional and community treatment (after 30 days), only 4.7% return to prison within the first year compared with 28.3% who do not receive treatment (Question 15 G).
- About 39% of all Missouri inmates were under the influence of alcohol or drugs at the time of the sentencing offense and alcohol and/or drugs were involved in nearly half of all offenses that led to incarceration.¹
 - In FY 2002, 40.2% of all Missouri inmate admissions were due to alcohol (8.8%) or drug offenses (31.4%).²

¹ Senator Harold Caskey report to Missouri Senate: “Arresting the Overflow, Alternatives to Prison Overcrowding and Expansion in Missouri, “ 1999.

- Nearly one third of all Missouri offenders under supervision by probation or parole have been convicted of a drug offense.³
- The Department of Corrections estimates that 75% of offenders in Missouri need substance abuse services.⁴
- Treatment for drug and alcohol addiction cuts drug use in half, reduces criminal activity up to 80%, increases employment, decreases homelessness, improves physical and mental health, and reduces domestic violence, child abuse, and lost worker productivity.⁵
- In-prison treatment that is followed by a period of community-based treatment enhances results. Arrest rates and drug usage are cut at least 50%.⁶

The I concept paper presented the “need principle.” *The Need Principal holds that when “dynamic” risk factors, or criminogenic needs are effectively treated, offenders’ probability of recidivism declines. Treatment decisions should be based on individual offender’s dynamic risk factors discerned through objective assessment processes. Offenders should be re-assessed periodically on dynamic risk factors to inform decisions about changes in custody, placement, service or supervision. Dynamic risk factors include:*

- Anti-social attitudes, values and beliefs,
- Anti-social peers and associations,
- **Substance abuse**
- Educational deficiencies,
- Vocational deficiencies,
- Mental health
- Life skills and social skill deficiencies, and
- Characterological defects (anger, aggression, egocentrism, impulsivity, etc.)⁷

Dr. Alexander Holsinger was contracted to conduct an analysis of information generated by focus groups consisting of offenders and parole officers. The following information pertaining to substance abuse was pulled from that report:

- Benefits of substance abuse treatment were evident throughout findings

² Missouri Department of Corrections, May 2001, Monthly Fact Sheet.

² Missouri Chamber of Commerce (2001), “2001 Study of Missouri State Government Spending.”

² Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment: Findings from the National Treatment Improvement Evaluation Study.”

² U.S. Department of Justice, Bureau of Justice Assistance, (Dec. 1997). “Improving the Nation’s Criminal Justice System: Findings and Results from State and Local Program Evaluations.”

² Dale Parent, Liz Barnett, Abt Associates Inc., “Transition from Prison to Community Initiative-Preliminary Draft.” Page 13, prepared for National Institute of Corrections, February 27, 2002.

- Need for additional substance abuse services present in focus group data, as well as Baseline data
- Specific need cited regarding substance abuse assessment processes (Validated? Normed?)
- Recommendation to closely examine programs
 - Compare their condition to Principles of Effective Intervention
 - Other components of “What Works”
- While importance of substance abuse treatment is irrefutable in the current literature base, Program Quality is a different, more in-depth issue in need of being addressed.

CONCLUDING STATEMENT

A large and growing body of evidence points to a direct relationship between substance use and criminal behavior among offenders. An equally large body of evidence shows that “treatment works” and is a cost effective way of reducing criminality as well as providing the best opportunity for offenders to be returned to the community as useful and productive citizens.

BOUNDARIES:

- The team is to make recommendations only.
- The team shall comprise a representative sampling of the stakeholders.
- The team shall consist of no more than eight (8) members.
- The meetings shall be held in Jefferson City, Missouri.
- The meetings will be held during a period of time where there is a minimal amount of cost associated with this proposal development.

DESIRED OUTCOME: A successful project will result in...

- Reduce the number of people being returned to prison due to substance abuse problems.
 - Areas to focus on:
 - ❑ Assessment
 - ❑ Integrated services delivery (within different agencies & stakeholders)
 - ❑ Continuity of Care (may start prior to incarceration)
 - ❑ Improved access and timeliness of various of types of treatment
 - ❑ Best practices
 - ❑ Offender families

UNDESIRED OUTCOME: A successful project will not result in...

- Negative impact on public safety
- Negative impact on public perception of substance abuse services for offenders
- Duplication of efforts by the various agencies involved in the offenders treatment

ESTIMATED DATE FOR COMPLETION:

MEETING FREQUENCY & DURATION:

Date: 04-24-03
 Time: 9:00 A.M. to 4:00 P.M.
 Location: DOC Training Academy, Room 3C
 1717 Industrial Drive
 Jefferson City, MO

Date: 05-15-03
 Time: 9:00 A.M. to 4:00 P.M.
 Location: Governor's Office Building, Room 470
 200 Madison Street
 Jefferson City, MO

Date: 06-03-03
 Time: 9:00 A.M. to 4:00 P.M.
 Location: Governor's Office Building, Room 460
 200 Madison Street
 Jefferson City, MO

MEMBERS:

- Department of Mental Health/Alcohol & Drug Abuse
 - Rosie Anderson-Harper
- Division of Offender Rehabilitative Services
 - Marta Nolin
- Substance abuse community providers
 - Gene Morgan
 - Barron Pratte, Ph.D., Executive Director, SE MO Community Treatment Center
- Probation & Parole Officer
 - Joyce Nilson
 - Terri Sharp-Roney
- Parole Board Member
 - Donna White
- Department of Corrections Institutional Caseworker
 - Deborah Hager, Unit Supervisor, Farmington Correctional Center
- National Council on Alcoholism
 - Jean Roth-Jacobs

- Office of State Court Administration (OSCA)/Drug Court
 - Marie Peoples
- Kansas Parole Board Chairman
 - Marilyn Scafe

TEAM CHAIRPERSON: Gene Morgan

FACILITATOR: Blake Shaw, 1st meeting
Colleen Dowd, 2nd & 3rd meeting

RECORD KEEPER: To be determined

LEGAL COUNSEL: To be determined on an as needed bases.

Example 6. Meeting Management Tool—Standardized Meeting Agenda

TRANSITION FROM PRISON TO COMMUNITY INITIATIVE (TPCI) TEAM MEETING

Date:

Time:

Location:

| AGENDA TOPICS: | TIME: | PERSON RESPONSIBLE: |
|----------------|-------|---------------------|
|----------------|-------|---------------------|

MEETING OUTCOME:

If this were a successful meeting it would result in

KEY POINTS:

MEMBERS NOT ATTENDING:

| ACTION ITEMS | RESPONSIBLE | DEADLINE |
|--------------|-------------|----------|
|--------------|-------------|----------|

Next Meeting

Date:

Time:

Location:

Example 7. New York’s Transition from Prison to the Community Initiative: Glossary of Criminal Justice Terms

| <i>Term</i> | <i>Definition</i> |
|------------------------------------|--|
| Arraignment ¹ | The hearing before a court having jurisdiction in a criminal case, in which the identity of the defendant is established, the defendant is informed of the charge and of his/her rights, and the defendant is required to enter a plea. |
| Arrest ⁴ | Taking a person into custody, in a case and in the manner authorized by law. An arrest may be made by a peace officer or by a private citizen. |
| Bail ² | Money or property promised or given to the court as security when an accused person is released before and during his trial with the agreement that the defendant will return to court when ordered to do so. Bail is forfeited if the defendant fails to return to the court. |
| Bench Warrant ⁹ | A process of a criminal court directing a police officer or a uniformed court officer to take into custody, a defendant who has previously been arraigned upon the accusatory instrument by which the action was commenced, and to bring him before such court. |
| Charge ⁴ | A formal allegation that a specific person has committed a specific offense. |
| Community Corrections ¹ | The use of a variety of officially ordered program-based sanctions that permit convicted offenders to remain in the community under conditional supervision as an alternative to an active prison sentence. |
| Conditional Discharge ⁸ | If the court sees fit, it can discharge the offender conditionally for a specified period of time. This means that the offender must not commit a further offense during that time period. If they do commit a further offense, they will be guilty of ‘breaching’ their conditional discharge and will be re-sentenced accordingly. |
| Conditional Release | Mandatory release of an offender from prison after completion of a portion of the term as prescribed by law to parole supervision for the remainder of the sentence. |
| Conviction ⁴ | A judgment, based either on the verdict of a jury or a judicial officer or on the guilty plea of the defendant, that the defendant is guilty. |
| Defer Sentencing | A judgment by the court that sentencing shall be postponed for a specified amount of time, during which the offender will be on probation. |
| Determinate Sentencing | Offender is given a fixed term of incarceration that may be reduced by good time and merit time. |
| Dismissal ² | A decision by a judicial officer to end a case for legal or other reasons |
| Disposition ² | The final judicial decision which ends a criminal proceeding by judgment of acquittal or dismissal or which sets the sentence if the defendant is convicted. |
| Failure to Appear | Criminal defendant fails to appear in court as required. |
| Felony | A serious crime that can be punished by up to one year or more in prison. |

| <i>Term</i> | <i>Definition</i> |
|---|---|
| Felony Drug Offender ¹⁰ | A defendant who stands convicted of the felony possession, sale or intent to sell marijuana or a controlled substance as defined in articles 220 and 221 of New York State Penal Law. |
| First Appearance ¹ | An appearance before a court officer during which the legality of the defendant's arrest is initially assessed and the defendant is informed of the charges on which s/he is being held. At this stage in the criminal justice process, bail may be set or pretrial release arranged. |
| Good Time ¹ | The amount of time deducted from the time to be served in prison on a given sentence as a consequence of good behavior. |
| Grand Jury Hearing ² | A legal process in which citizens selected by law and sworn to investigate criminal activity and the conduct of public officials and to hear the evidence against accused persons sit as a jury to decide if enough evidence exists to bring an accused to trial; grand jury hearings are generally closed to the public and their proceedings are kept secret by law. This hearing is held in lieu of a preliminary hearing. |
| Guilty Plea ² | A formal response by a person accused of committing a specific crime admitting that the charges are true. |
| Indeterminate Sentence | A sentence to prison with a minimum and maximum term. |
| Indictment ² | A formal written accusation, made by a grand jury and filed in court, alleging that a specific person has committed a specific crime. |
| Jails ^{1,3} | A confinement facility administered by an agency of local government, typically a law enforcement agency, intended for adults but sometimes also containing juveniles, which holds people detained pending adjudication or committed after adjudication, usually those committed on sentences of a year or less. Offenders sentenced to prison are also housed in county jails awaiting transfer. |
| Maximum Expiration | Completion of the full term of a sentence, including both incarceration and post-release supervision portions. |
| Misdemeanor | A crime that is less serious than a felony and for which the punishment can include imprisonment for up to one year in jail. |
| No True Bill | Grand jury voted against indictment of the accused. |
| Parole Revocation ¹ | The administrative action of a paroling authority removing a person from parole status in response to a violation of lawfully required conditions of parole, including commission of a new offense, and usually resulting in a return to prison. |
| Parole ² | The conditional release of a convicted offender from prison before the end of his sentence based upon requirements for the offender's behavior set and supervised by a parole agency. |
| Persistent Felony Offender ⁹ | A person, other than a persistent violent felony offender, who stands convicted of a felony after having previously been convicted of two or more felonies. |

| <i>Term</i> | <i>Definition</i> |
|---|---|
| Plea Bargain ² | An agreement between the prosecutor and the defense attorney that the defendant will plead guilty to a crime in exchange for some concession from the state, usually a lesser charge, the dismissal of other pending charges, or a recommendation by the prosecutor for a reduced sentence. |
| Plea ² | A defendant's formal answer in court to the charge that he committed a crime. |
| Predicate Felony Conviction ⁹ | Where an offender currently stands convicted of a felony, a prior felony conviction in which the following criteria apply: (1) the prior conviction was in New York State of a felony or in another jurisdiction of an offense for which a term of imprisonment in excess of one year or a sentence of death was authorized and is authorized in New York State, whether or not imposed; (2) the sentence was imposed before the commission of the present felony, and; (3) the sentence was imposed not more than ten years before the commission of the current felony excluding any time during which the defendant was incarcerated between the commission of the prior and current felonies. |
| Pre-plea Investigation ⁷ | The process by which probation officers investigate and produce a report pursuant to a Criminal Court order or request prior to conviction. |
| Preliminary Hearing ¹ | A proceeding before a judicial officer in which three matters must be decided: (1) whether a crime was committed, (2) whether the crime occurred within the territorial jurisdiction of the court, and (3) whether there are reasonable grounds to believe that the defendant committed the crime. |
| Pre-Sentence Investigation | The examination of a convicted offender's background including his/her past behavior, family circumstances and physical and mental health, prior to sentencing. Pre-sentence examinations are conducted by probation officers and are submitted to sentencing authorities. |
| Pre-Sentence Report ² | A document which details the past behavior, family circumstances, and personality of a convicted adult offender and gives information about the crime he or she committed. It is prepared by a probation agency in order to assist the court in determining the most appropriate sentence. |
| Pretrial Release ¹ | The release of an accused person from custody, for all or part of the time during prosecution, upon his/her promise to appear in court when required. |
| Probation Revocation ¹ | A court order taking away a convicted offender's probationary status and usually withdrawing the conditional freedom associated with the status in response to a violation of the conditions of probation. |
| Probation ² | Conditional freedom granted to an offender by the court after conviction or a guilty plea with requirements for the offender's behavior set and supervised by the court. |
| Released on Own Recognizance ¹ | The pretrial release of a criminal defendant on his/her written promise to appear in court as required. No cash or property bond is required. |
| Remand ⁶ | To order an accused person to be kept in custody pending further court appearance. |

| <i>Term</i> | <i>Definition</i> |
|---|--|
| Recidivism ¹ | The repetition of criminal behavior. In statistical practice, a recidivism rate may be any of a number of possible counts or instances of arrest, conviction, correctional commitment, or correctional status change related to repetitions of these events within a given period of time. |
| Second Felony Offender ⁹ | A person, other than a second violent felony offender, who stands convicted of a felony other than a class A-1 felony, after having previously been subjected to one or more predicate felony convictions. |
| Second Felony Drug Offender ¹⁰ | A second felony offender who stands convicted of the felony possession, sale or intent to sell marijuana or a controlled substance as defined in articles 220 and 221 of New York State Penal Law. |
| Sentencing Hearing ⁵ | A hearing before a judge to determine the appropriate sanction to be imposed upon a person convicted of a crime. Defense and prosecution speak, witnesses may be called. Defendant has the right of allocution. Judge imposes sentence |
| Sentencing ¹ | The imposition of a criminal sanction by a judicial authority. |
| Split Sentence ¹ | A sentence explicitly requiring the convicted offender to serve a period of confinement in a local, state, or federal facility, followed by a period of probation. |
| Superior Court Information ⁹ | A written accusation by a district attorney which charges one or more defendants with the commission of one or more offenses, at least one of which is a crime, and which serves as a basis for the prosecution thereof. |
| Trial ² | A proceeding, either civil or criminal, in court, where the law and evidence are reviewed, and the guilt, liability, or other issues are determined by jury or judge. |

1. Schmallegger, F. (2004). *Criminal justice: A brief introduction*. Upper Saddle River, NJ: Prentice Hall.
2. <http://www.azvictims.com/cjs/glossary.asp>
3. <http://www.cjpc.state.tx.us/glossary/glossaryadult.html>
4. http://www.sfgov.org/site/budanalyst_page.asp?id=5215
5. <http://www.co.dakota.mn.us/cc/Glossary.htm>
6. <http://www.courtservice.gov.uk/cms/2714.htm#R>
7. <http://dpca.state.ny.us/350.htm>
8. www.youth-justice-board.gov.uk/PractitionersPortal/CourtsAndOrders/Disposals/ConditionalDischarge
9. LexisNexis. (2005). *Graybook: New York criminal statutes and rules*. Newark, NJ: Matthew Bender & Company.
10. New York State Penal Law § 70.70.

Example 8. Missouri Invites Other Stakeholders to the Table

MISSOURI DEPARTMENT OF CORRECTIONS TRANSITION FROM PRISON TO COMMUNITY INITIATIVE (TPC)

August 21, 2002

THE CHALLENGE

One of the most pressing and multifaceted challenges facing state government in Missouri and across the nation is the reintegration of adult offenders who leave state prisons. In Missouri, we currently have approximately 30,000 offenders incarcerated in our correctional institutions. 97% of all Missouri prisoners will at some point be released to go home. It is in the best interest of all Missourians that when released, ex-felons reintegrate into the community safely. There is an increasing need for correctional agencies to work collaboratively with community-based organizations and service providers to strengthen the likelihood that returning offenders will not recidivate, but will become responsible parents, secure employment and contribute to their communities. How we plan for offender transition from incarceration to becoming a productive, law-abiding citizen is a strategic investment in public safety and the social and economic health of families and communities throughout Missouri.

Successful offender reintegration contributes to the achievement of Missouri Results:

- A safe, secure place to live and work
- Decreased rate of crime
- Decreased rate of unemployment
- Decreased reliance on public support
- Decreased incidence of family violence
- Increased percentage of students who achieve targeted skill levels
- Reduced deaths and injuries associated with substance abuse

Offenders come to prison with educational deficits, poor job skills and substance abuse problems that contribute to criminal behavior.

- During FY02, DOC received 15,872 admissions to prison.
- 28% (4,417) of all prison admissions were parole violator returns.
- During FY02, 14,884 offenders were released from Missouri prisons and returned home to live in communities across our state.
- **Multiple state agencies often provide services to offenders after their release, and/or to their families, e.g. 46% of high-risk parolees released in 1999 also received services from Department of Mental Health.**
- Children of incarcerated parents are five times more likely to go to prison as an adult than their peers.

75% of incarcerated offenders and 64% of community-supervised offenders have a significant history of substance abuse or dependence.

THE OPPORTUNITY

The National Institute of Corrections' (NIC) Transition from Prison to Community Initiative is designed to help states improve offenders' transition from prison to communities, thereby increasing public safety, reducing recidivism and new victimization, and making better use of scarce state and local resources.

The TPC promotes corrections, releasing, supervision, and human service agencies to form strategic and tactical partnerships to integrate and coordinate basic policies, and to sustain and nurture those partnerships and policies over time. It will lead many agencies to seek more effective and targeted ways to use their resources to achieve important goals and results.

TPC Goals:

For released offenders to remain arrest-free over the long haul and to become competent and self-sufficient members of their communities.

TPC Premises:

- Corrections, law enforcement and human service agencies are stakeholders in the transition process. These stakeholders need to articulate and promote common interests, integrate and coordinate policies, and develop mutual ownership of an improved transition process;
- Stakeholders should freely share information relating to transition within and among stakeholders' organizations;
- Transition should be built upon proven reforms and best practices;
- Transition reforms should be affordable, transferable, and adaptable;
- Basic transition reforms should apply to all imprisoned offenders, including those given discretionary release and those who leave at the end of their prison terms; and,
- The allocation of resources for programming, supervision and services should vary directly with the level of risk that those groups of offenders pose.

THE NEXT STEPS

1. Identify a person to serve as a primary TPC contact for your department. This person should be an individual who is authorized to represent your agency's interests and positions with this initiative. These individuals should attend a TPC briefing meeting on August 30, 2002 from 10:00 a.m. to 12:00 noon.
2. The primary TPC contact along with other appropriate individuals identified by each department should attend a one-day TPC workshop on September 10, 2002 in Jefferson City.

For further information, please contact the TPC Chairperson for the Department of Corrections listed below.....

Example 9. Georgia Reentry Impact Project Vision

**STATE OF GEORGIA
SONNY PERDUE, GOVERNOR**

The Georgia Reentry Impact Project (GRIP):

Policy Team Recommendations

GRIP Vision

Promoting public safety through collaborative partnerships which reflect a seamless system that ensures all returning offenders are law-abiding, productive community citizens.

GRIP Mission

Establish effective methods that permeate all levels of affected agencies and organizations to reduce recidivism through collaborative partnerships that support offender transition to the community.

October 3, 2003

Example 10. Vision Statements from Three TPC Sites

Vision of the Michigan Prisoner ReEntry Initiative

“The Vision of the Michigan Prisoner ReEntry Initiative is to reduce crime by implementing a seamless plan of services and supervision developed with each offender, delivered through state and local collaboration, from the time of their entry to prison through their transition, reintegration and aftercare in the community.”

Vision of the New York Reentry Task Force

“The vision of the Reentry Task Force is to build a safer New York resulting from the successful transition of offenders from prison to living law-abiding and productive lives in their communities.”

A Vision for Effective Offender Reentry in Rhode Island

“Our vision of offender reentry in Rhode Island is of an integrated statewide system that fosters the preparation and gradual transition of incarcerated individuals to productive, healthy, and crime-free lives.”

Example 11. Rhode Island's Strategic Use of TPC Subcommittees

Rhode Island Reentry Steering Committee Meeting--Tier II Workplan

Work Activities: Each subcommittee is tasked with developing a detailed understanding of one or more specific substantive topic areas. To assure continuity in the type of information collected in order to achieve this depth of understanding, each subcommittee is expected to gather the same type of information. Although the work products and outcomes should and will be similar, the methods and timetable for gathering this information will be decided by each individual subcommittee. Subcommittees are expected to:

1. *Establish the structure of the subcommittee.* Select those who will serve as chair, facilitator, recorder and reporter. Agree on a regular meeting schedule and location.
2. *Discuss specifically the goal of the subcommittee.* It is important for all members to be clear about the purpose of their work; this will make it easier to determine the path for achieving it and reduce the likelihood that the team will be anything less than fully successful. Articulate a goal—one that each member understands with absolute clarity—that describes the importance of a clear understanding of this area in order to assure that the essential components are in place to achieve successful offender reentry.
 - a. *For example:* The goal of the Supervision, Violation, and Revocation Subcommittee of the Rhode Island Reentry Steering Committee is to gather and analyze information that is key to understanding this area of offender management in service of assessing the effectiveness of our current efforts to manage the reentry and post-release supervision of prisoners returning to the community.
3. *Discuss the composition of the subcommittee team.* Determine whether additional expertise is needed to accomplish your task and if so, enlist the participation of others who are well positioned to help.
4. *Develop a strategy to undertake the analysis phase of your work.* To develop a comprehensive understanding of your area of responsibility, it will be necessary for the subcommittee to collect the following:
 - **Offender Population Data:** Identify the data that would be helpful in understanding this issue area in a more specific way. Spend a full work session asking yourselves, “If we had data to tell us everything we needed to know about this issue as it relates to transitioning offenders, what would that report include?” Make a list of your responses (For example, “What is the marketable skill level of the incarcerated population?” “Of the offenders in need of housing upon release, how many have no contact provisions and what are the relevant restrictions?”).
 - *Supports to this phase of the work:* The national TPC project staff will be available to assist subcommittees in terms of reviewing the research questions identified, assisting the subcommittee in refining them as needed, identifying sources for the collection of these data, designing a data collection effort, and potentially, the analysis of the data collected.
 - **System Mapping:** Develop a system map reflecting processes and decision points in this area. System maps detail the specific steps that are taken in moving an individual through a system of activities. They reflect the professionals involved at key decision points and the time elapse between each step of the process. Before beginning the development of a system map from ‘scratch,’ be sure that one has not already been developed.
 - *Supports to this phase of the work:* Samples of system maps are available for review as are more detailed instructions for developing them.
 - **Resource Inventory:** Develop a resource inventory that documents the program and services currently available in your area. Resources include specialized expertise by certain individuals, services available to support staff in the accomplishment of their work, services available to support offenders, etc. Document the services and capacity available, the extent to which these services

are utilized, etc. (Some examples of 'resources' include: individuals who provide offender assessment services or those who have the capacity to serve as trainers on assessment or classification instruments; the number of supervision officers and particular areas of expertise or specialization some might possess; the vocational training services available, inside the institutions and in the community; or the types of treatment services available to support transitioning/released offenders.

- **Policy and Practice Analysis.** Determine as a group the additional information you need to collect in order to understand your area.
 - a. Consider collecting agency policies that reflect the philosophies and procedures used to make decisions or deliver services.
 - b. Consider interviewing key staff (either individually or in a focus group) to develop a deeper understanding of 'the way things really work.'
 - c. Consider observing key practices (a revocation hearing, a treatment group, or a release planning session) to enhance your knowledge and understanding further.
- **Best Practices Analysis.** Understanding one's own system of offender management and service delivery is best assessed against the backdrop of national best practices. In this last stage of information gathering, look outside the state to understand the what has been learned through empirical research, and the best practices approaches that have been adopted in other jurisdictions.
 - *Supports to this phase of the work:* National project staff can assist subcommittees in identifying resources from around the country, including Web sites, documents, relevant research, models from specific jurisdictions, and individuals to contact for further information.
- **Gaps Analysis.** Once the information noted above is collected, the subcommittee's task will be to organize and synthesize it in such a way that Steering Committee members can: (1) understand the current state of practice in this area, and (2) the strengths and weaknesses of the current state of practice in Rhode Island. While the subcommittee's role is not to make decisions regarding actions that might be taken to address the gaps identified in current practice, it will be valuable for the subcommittee to be prepared to share their thinking about this with the Steering Committee.

Work Products: Subcommittees should work toward the preparation of a final report—verbal and written—to the Steering Committee that synthesizes the way in which the work was conducted; that provides, in essence, a detailed review of the findings from the information collection and analysis phase; and the subcommittees' recommendations for advancing this particular area of work. The subcommittees' written products should include reports detailing the above, with attachments representing meeting records, information collected, etc. In the interim period before subcommittees are prepared to make their final report, progress reports will be expected and will serve as 'check in' points to elicit feedback from the Steering Committee on the progress and direction of each subcommittee.

Timeline: While each subcommittee will have the ability to develop its own work plan and accompanying time line, subcommittees are expected to complete their work no later than March 15, 2005.

First Check In Opportunity: For the next Steering Committee meeting, each subcommittee should be prepared to report out on the following:

1. The goal of the subcommittee;
2. The composition of the team;
3. The individuals who have assumed the roles of chair, facilitator, reporter, and recorder;
4. The first three tasks the team has agreed to undertake, and their timeline for each task (to provide a flavor for the work the subcommittee is planning); and
5. Questions, concerns, or issues the subcommittee wishes to bring to the Steering Committee for discussion and resolution.

Example 12. A Primer on System Mapping

Rhode Island Transition from Prison to Community (TPC) Initiative A Primer for Mapping Current Transition/Reentry Process

The system mapping exercise will produce an accurate and detailed flow chart that describes how inmates move through a state's correction system, onto community supervision, and how they are eventually discharged from corrections supervision and moved into aftercare. System mapping will give corrections and human service officials a common understanding of the process, and help them assess problems, identify solutions, set priorities, and plan implementation of reforms.

The system map should display in graphic terms how offenders flow through your correctional system. It should display the important decision points through which offenders move in order to enter, pass through, and exit your system. Each decision point will have (a) inputs, (b) decisions and (c) outputs.

Inputs may consist of the individuals about whom decisions are made. They also may consist of information transmitted from one part of the organization to another that is used to make decisions about those individuals. A decision point may have single or multiple input channels.

Decisions are made by identifiable persons who make choices about individual offenders by applying particular criteria or decision rules to information about the individual offenders.

Outputs from decision points may consist of individuals and information. A decision point may have multiple output channels. Each output channel becomes an input to a subsequent decision point.

For the initial mapping exercise, we suggest you focus on individual offenders as inputs to and outputs from decision points. Later, you may want to do a similar mapping of information flow to identify strengths and weaknesses of your system.

The system map should encompass decision points that support the following functions that are essential elements of the TPC Model:

- Assessment and Classification
- Inmate Behavior and Programming
- Release Preparation
- Release Decision-making
- Supervision and Services
- Violations and Revocation
- Discharge, and
- Aftercare.

These elements may not (probably will not) translate cleanly into the decision points in your system. Indeed, one of the TCPI elements (e.g., Violations and Revocation) may consist of a cluster of decision points and their related inputs and output flows.

Your system map should display enough detail to accurately show how particular flows occur within your system. For example, the TPC model has an element termed "Release Decision-Making". Each state will have a different set of processes by which release decisions are made, and your flow chart should reflect them. Some states will have more, and some less, complex flow charts around release decision making, and around other elements of the TPC model.

Your system map should display aspects of the offender flow that are specific or unique to your correctional system. For example, a substantial portion of Indiana's prison inmates are released not to parole, but to probation, and are supervised by court-based local probation officers after their release from prison rather than by state parole officers. That practice should show up as an additional flow in Indiana's system map. Similarly, Indiana has a release channel called "community corrections" that would need to be displayed within its system map.

You may want to begin by drawing a rough system map (one that covers the entire system, but that contains less detailed information than you eventually will develop). You could divide this rough map into "zones". For example, one "zone" might be labeled "Intake" or "Reception", or "Front-End". This zone might cover processes by which sentenced offenders are:

- received into the custody of your correctional agency,
- assigned to initial intake housing (e.g., sent to a central reception center);
- assessed (e.g. information to determine offenders' risks and needs are gathered from other sources, from diagnostic tests, or from interviews.);
- classified (decisions about offenders' custody levels and housing assignments);
- Initial case plans are developed based on assessment and classification results.

You might want assign a different group of staff members to develop a sub-map for each zone. These staff members should be well acquainted with the processes and flows included within their particular zone of the overall system map. The individual sub-maps they produce could be assembled to form a more detailed overall system map.

Each decision point in the system map should be clearly labeled, and distinguished from all others. Each input to a decision point and each output from a decision point also should be clearly and unambiguously labeled.

The next step is to **document** the system map by assembling available information about the:

- Flow of offenders into and out of the decision point;
 - number,
 - characteristics,
 - source,
 - destination,
 - problems
 - It is particularly important to note—to the extent possible—the proportion of offenders who have problems for which an agency other than corrections has formal jurisdiction (e.g., substance abuse, mental illness, housing, employment, etc.).
- Decision criteria or practices
 - what are they?
 - who established them?
 - how do they work?
 - who makes the decisions?
 - how long does it take?
 - what does it costs?

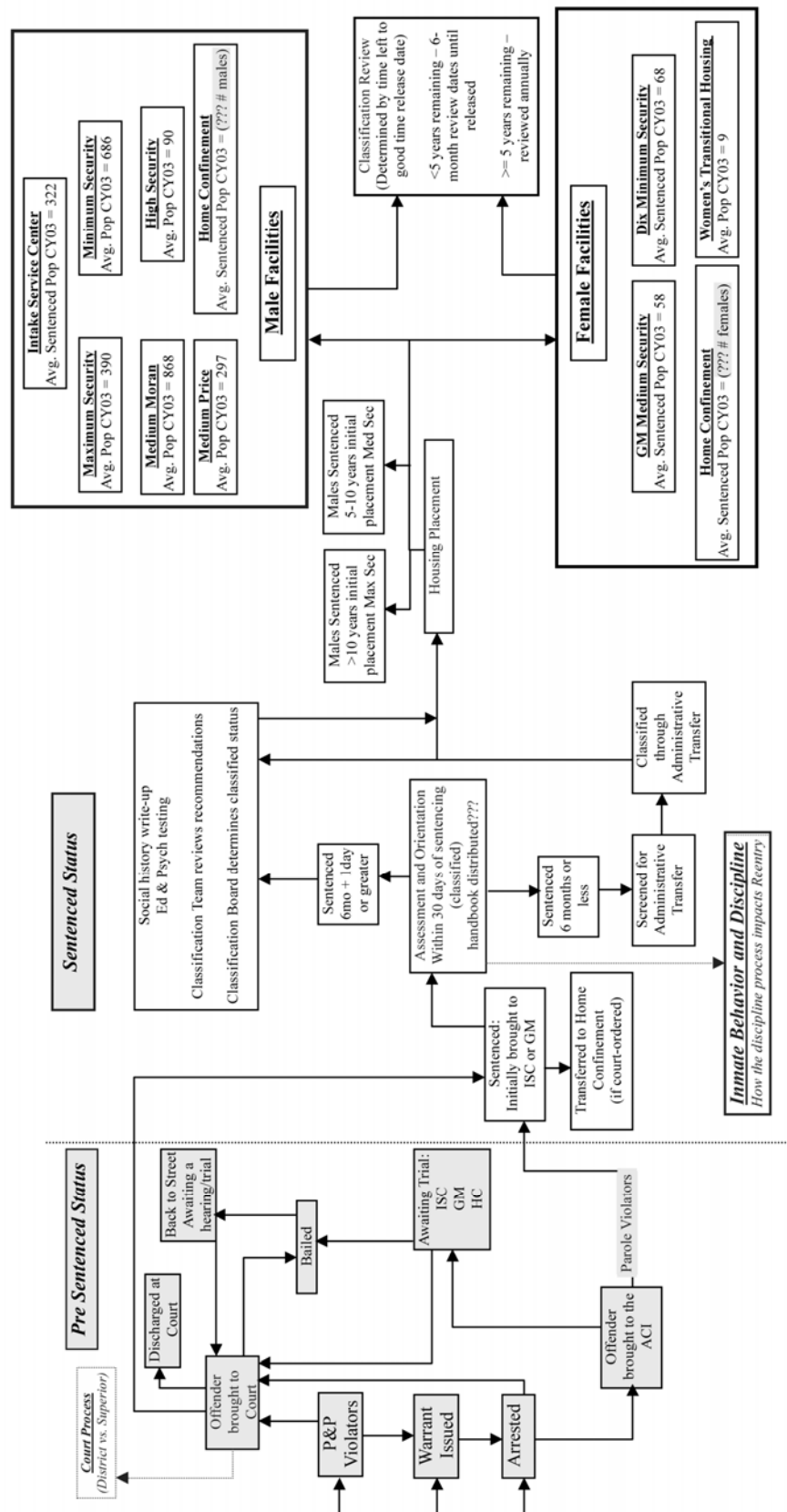
It is important to document what you know **AS WELL AS WHAT YOU DO NOT KNOW** about decision points and inputs and outputs in the system map. For example, to fully document a flow or decision point you may need information that another agency possesses or controls. If you know where that information is, but cannot quickly access it, note that in the documentation. If you don't know whether the information is available, or, if it is available, whether you can get access to it, indicate that. As more agencies become engaged as partners in the Transition planning process, these information gaps can be filled.

If also is important include information in the documentation about problems with the flow of offenders in and out of decision points, or about the decision making process. For example, note if some information that decision makers need to process cases in a timely was is often missing, arrives late, or is highly unreliable, and thus, results in delays in decision making. This is a preliminary notation of problems, barriers, and obstacles, and will be supplemented by additional inquiry, dialog, and scrutiny as planning moves forward. The objective is to capture well-known, chronic, or especially significant problems as a starting point.

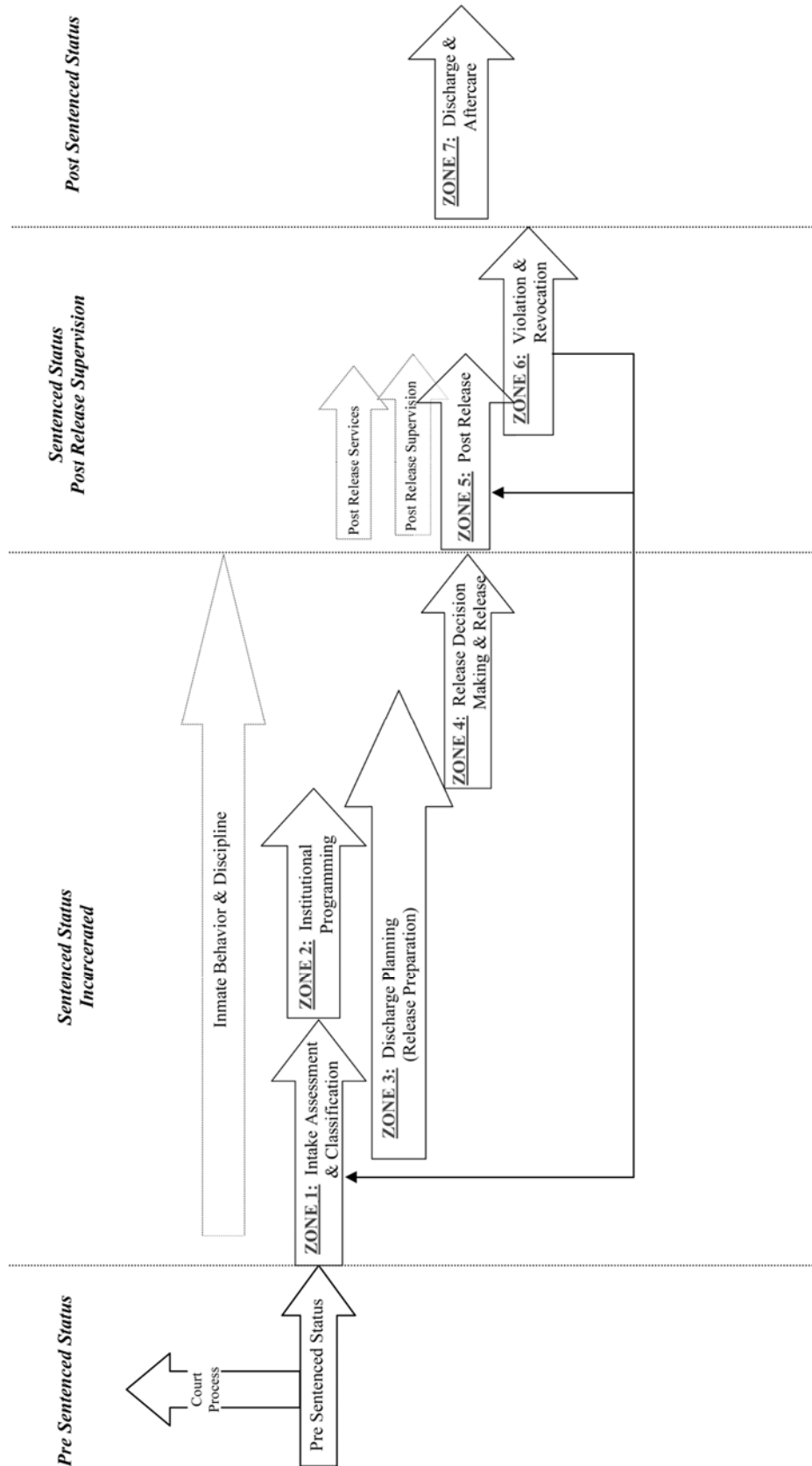
Finally, you should compare the system map with the elements of the TCPI model. For each TCPI element you should note the extent to which your existing practices conform or do not conform to the expectations of the TPC model. For example, the TPC model expects that assessments will be done very soon after inmates enter your prisons, and will be done using empirically validated risk instruments that measure both static and dynamic risk factors. How soon after admission are inmates assessed? Is your risk assessment instrument validated for your population? When was it validated (if it was 20 years ago, it probably needs to be done again)? Does your risk instrument include on both static (ones that do not change, like prior criminal record) and dynamic (ones that can change with interventions, like substance abuse) risk predictors?

Similarly, the TPC model expects that Transition Accountability Plans will be formulated for each inmate soon after they complete their assessments. These plans should address the dynamic risk factors identified in the assessments, and guide provision of programs and services as inmates pass through prison, into community supervision, and on to discharge. Do you have a case planning process that structures inmates' access to and participation in programs while confined? How soon after assessment does that case planning process start? Does it address inmates' identified dynamic risk factors? What proportion of case plans are actually implemented during confinement? What factors limit implementation of those plans? Does your case planning process guide programming after inmates are released from prison?

Example 13. Rhode Island TPC “Mapping the System—Zone 1”



Example 14. Rhode Island's Seven-Zone Timeline Illustration



Example 15.

Missouri Reentry Process (MRP) Offender Populations Analysis

What Factors Correlate With Returns to Prison?

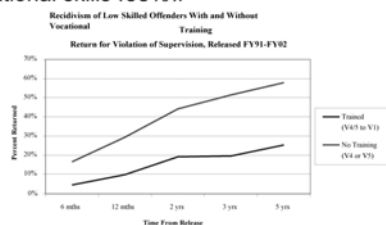
| Ranking | Classification Score on Release | Correlation (r ²) | Range % | Correlation | Range |
|---------|-------------------------------------|-------------------------------|---------|-------------|-------|
| 1 | Employment at First Need Score | 0.9987 | 43.6% | 1 | 1 |
| 2 | Vocational score on release | 0.9740 | 22.0% | 3 | 4 |
| 2 | Substance Abuse at First Need Score | 0.9586 | 25.1% | 4 | 3 |
| 2 | Work score on release | 0.9342 | 28.7% | 5 | 2 |
| 3 | Mental Health score on release | 0.5075 | 16.8% | 6 | 5 |
| 4 | Social at First Need Score | 0.9944 | 9.4% | 2 | 9 |
| 5 | Family at First Need Score | 0.8909 | 12.0% | 7 | 7 |
| 6 | Finance at First Need Score | 0.5940 | 12.2% | 9 | 6 |
| 7 | Educational Score on Release | 0.5981 | 9.5% | 8 | 8 |

Recidivism Rate by Maximized Employment Status

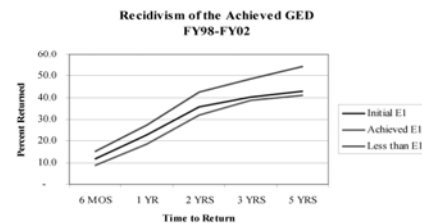


Employment/Vocational Training

Offenders who raise their vocational skill level while in prison through vocational training show a much lower return to prison rate (25%) than those with no vocational skills (58%).



Education



Family

Focus Group Findings

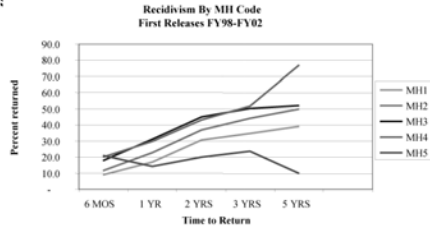
- Huge, and often neglected criminogenic target.
- Clear relationship between "family" importance (both positive and negative) in the national literature base as well as the focus-group data (e.g. bring family in, educate family, prepare family)
- Family offers – pro-social network; physical and emotional support; various resources.
- Very difficult to target – in or out of the institution.

Number of Dependent Children Reported by Offenders

- 35,468 – dependent children with a parent in prison
- 60,400 – dependent children with a parent under probation supervision
- 16,378 – dependent children with a parent under parole supervision
- 112,246 – TOTAL dependent children with a parent under DOC supervision
- 10% of the 18,000 children participating in Head Start programs in Missouri have a parent in prison.

Mental Health

The re-incarceration rate is higher for offenders with mental health problems (MH Score 3 or higher)



Mental Health

Focus Group Findings

- Cited as major issue by Probation and Parole Officers
 - Access to medication
 - Need for additional psychological assessment
 - Need for training in recognition of signs
 - Access to treatment – counseling & medications
- According to offender focus groups, much more prevalent need within female offender population
- Obtain additional training for line officers regarding the recognition of signs of psychological difficulty, and interpretation of history

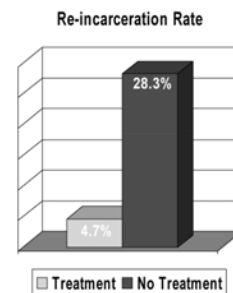
Substance Abuse

- Of those who return to prison for a new conviction, 31% are returned for a new drug conviction and 16% are returned for a new DWI conviction-- 47% total.

SUBSTANCE ABUSE

8,468 offenders with known (classified) substance abuse problems were released during the five-year period from FY 1998-2002:

- Of those that received both institutional and community treatment, 4.7% returned to prison within the first year
- Of those that did not receive substance abuse treatment, 28.3% returned within the first year



Transportation

Focus Group Findings

- Transportation was more of an issue in rural Missouri
- The lack of public transportation or the ability to drive is a common barrier to success
- An offender's inability to obtain transportation to comply with the conditions of supervision can lead to violations, especially when the transportation need is not fully communicated to the supervising officer.
- Through the focus group process, the elimination of transportation barriers was seen as being important to an offender's success.

Information Sharing

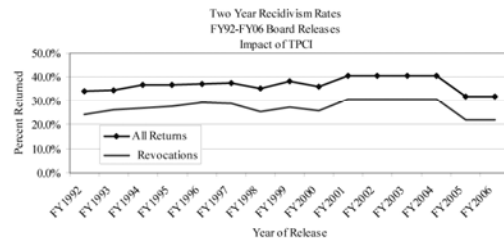
Focus Group Findings

- Need for enhanced information sharing between institutional officers and community officers.
- Need for enhanced information sharing between social service agencies and line officers (institution and community).
- Increasing information shared will enhance excuseless environment on the part of the offender.
- Greatly enhance offender assessment, case planning, and monitoring of progress.

How Can We Improve?

- Collaborating departments chartered eight ad-hoc teams which met during May-June, 2003.
- Comprised of subject matter experts from within and outside the stakeholder organizations.
- Ad-hoc teams developed recommendations.
- Steering team assessed each of the recommendations based upon impact and feasibility
- 38 recommendations approved for implementation

TPC Projected Impact on Recidivism



Example 16.

New York's Transition from Prison to the Community Initiative

Population Analysis

New York's Transition from Prison to the Community Initiative

Population Analysis July 28, 2005

"...a safer New York resulting from the successful transition of offenders from prison to living law-abiding lives in their communities."

Overview of Offender Characteristics and Circumstances Related to Post-Release Recidivism (According to Prior Literature)

- Purpose of Review
 - Identify population characteristics and circumstances relevant to strategic planning
 - Prepare to obtain information needed for development of Transition Accountability Plans
 - (Literature review is only one source of information)
- 3 Sources of Information from the Literature
 - Prediction studies
 - Contents of validated instruments
 - Impact studies

Static Factors

- Criminal History
- "Demographics"
- Family of Origin

Stable Dynamic Factors

- Current Family Support
- Social Achievement
- Criminogenic "needs"
 - Personality, attitudes, habits

Stable Dynamic Factors (cont)

- Criminogenic Neighborhood
- Criminal Opportunity
- Mental Disorder

Acute Dynamic Factors

- Typically not stable predictors, but important episodic factors relevant for case monitoring.
 - Dysphoric emotional states (anxiety, depression)
 - Anger/hostility
 - Time to beginning to violate
 - Drug/alcohol relapse
 - Collapse of social support
 - Loss of employment
- Recommend *The Criminal Recidivism Process*, by Zamble and Quinsey

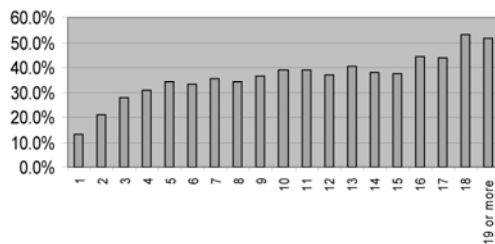
Balancing Literature, Data Analysis, and Professional Experience

- Prior literature alone is not a definitive source of information about factors that or which need to be considered in NYS TPCI planning, but it's an important source of "candidates"
- **Need to balance prior literature, direct analyses of NYS data, and professional experience**
 - Sometimes there is convergence, and sometimes must choose among conflicting indications
 - Not all factors highlighted in literature will apply to NYS reentry
 - Some factors NOT highlighted in literature will apply to NYS reentry
 - Some factors that predict recidivism are NOT viable targets for direct intervention
 - Some factors that do not predict recidivism ARE relevant for TPCI planning
- Thus, no single analysis is controlling.

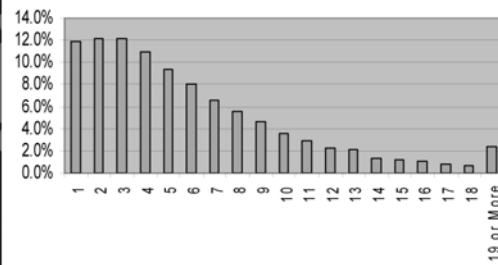
Likelihood of Felony Arrests w/in 2 Years of Release

| | NYC Males | Non-NYC Males |
|--------------------------|-----------|-------------------|
| <u>Prior History</u> | | |
| # felony arrests | positive | positive |
| # prison terms | positive | positive |
| # jail terms | positive | positive |
| # probation terms | no effect | positive |
| <u>Last release type</u> | | |
| Parole vs. | | |
| Conditional Release | no effect | no effect |
| Maximum Expiration | positive | marginal positive |

Percent Rearrested for Felony within Two Years by Number of Prior Felony Arrests - 2002 Male First Releases from DOCS



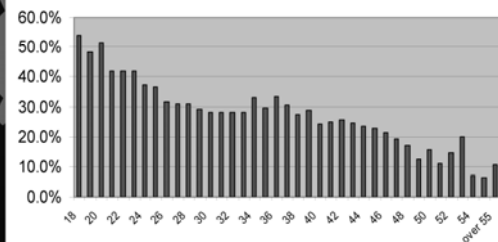
Distribution of Prior Felony Arrests Among 2002 Male First Releases from DOCS

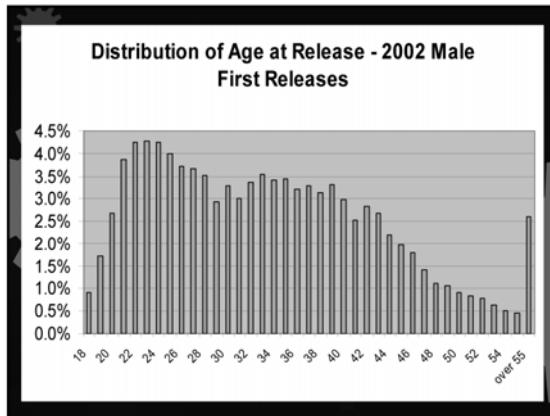


Likelihood of Felony Arrests w/in 2 Years of Release

| | NYC Males | Non-NYC Males |
|------------------------------|-----------|-------------------|
| <u>Demographics</u> | | |
| Age | negative | negative |
| Race | | |
| White vs. Black | no effect | positive |
| Hispanic | no effect | no effect |
| Other | no effect | positive |
| Married | | |
| Never vs. Married/Common Law | no effect | marginal negative |
| Div./sep./widowed | no effect | no effect |
| Children | no effect | no effect |

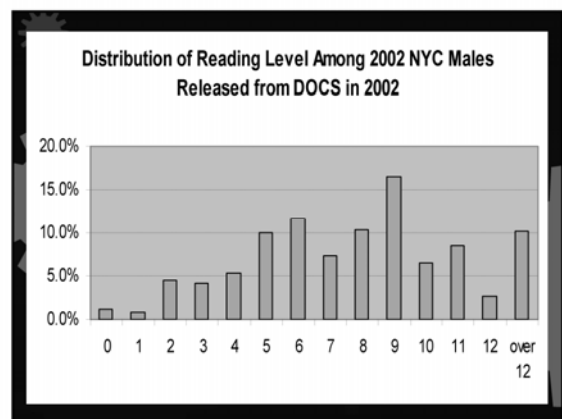
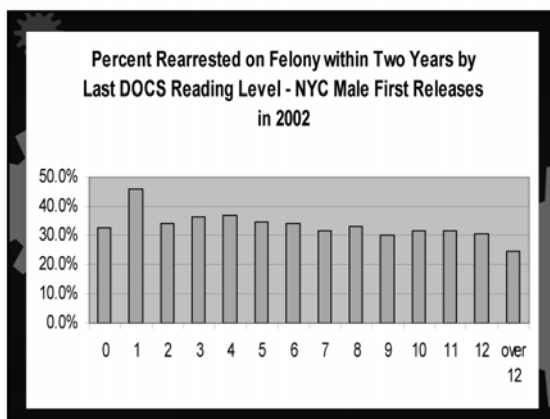
Felony Rearrest within Two Years of Release by Age at Release - Male "First Releases" in 2002





Likelihood of Felony Arrests w/in 2 Years of Release

| | <u>NYC Males</u> | <u>Non-NYC Males</u> |
|--------------------------------------|--------------------------|----------------------|
| <u>Scholastic Achievement</u> | | |
| Math grade level | <i>no effect</i> | <i>negative</i> |
| Reading grade level | <i>negative</i> | <i>no effect</i> |
| <u>Prior Employment at Admission</u> | | |
| NYC Males | | <u>Non-NYC Males</u> |
| No employment vs. Professional | <i>marginal negative</i> | <i>negative</i> |
| Labor, Blue Collar | <i>marginal negative</i> | <i>negative</i> |
| Not reported | <i>no effect</i> | <i>negative</i> |

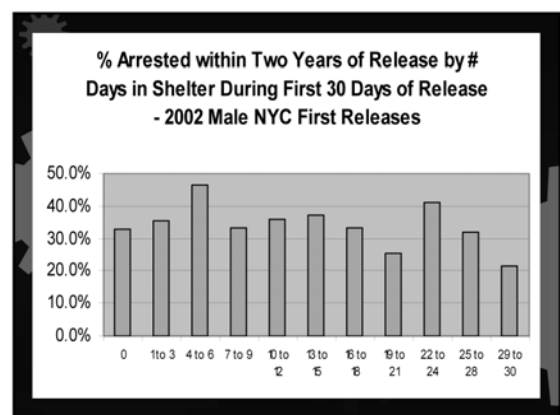
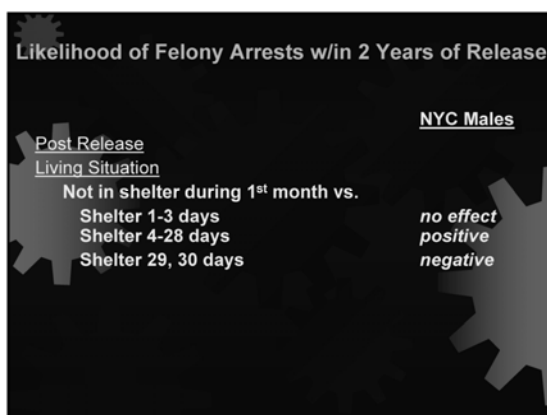
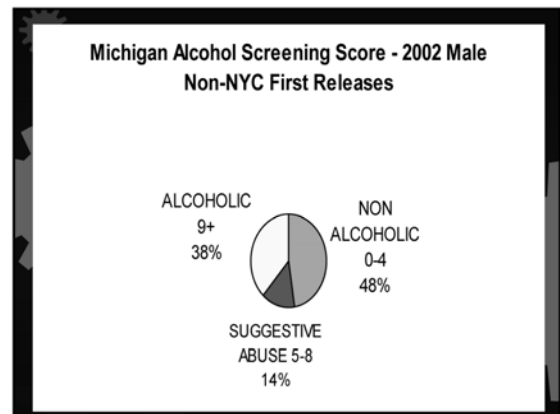
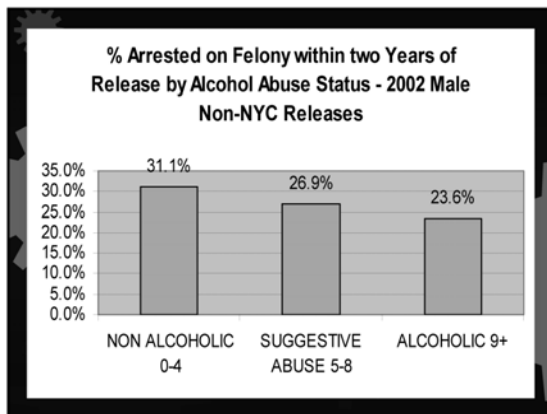
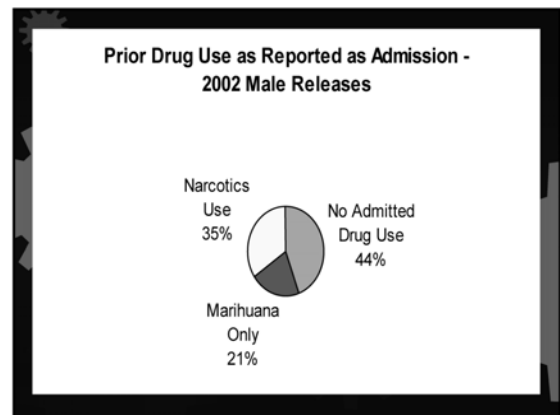
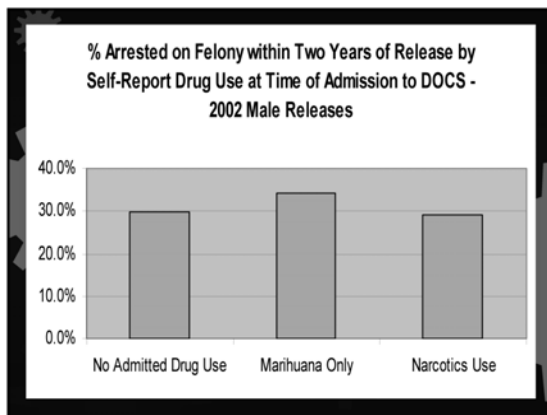


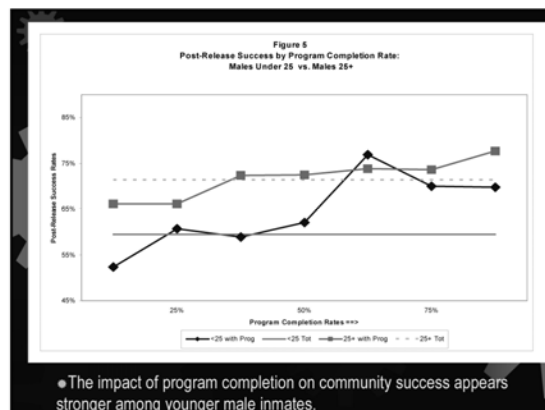
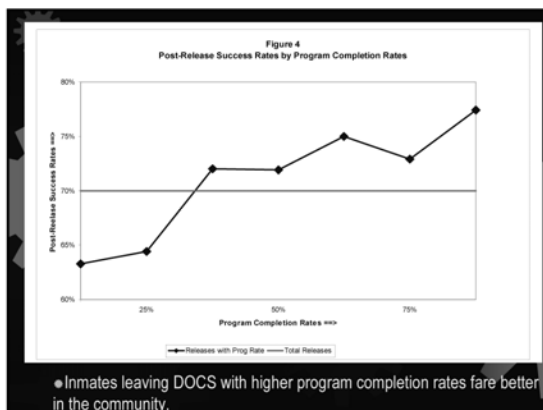
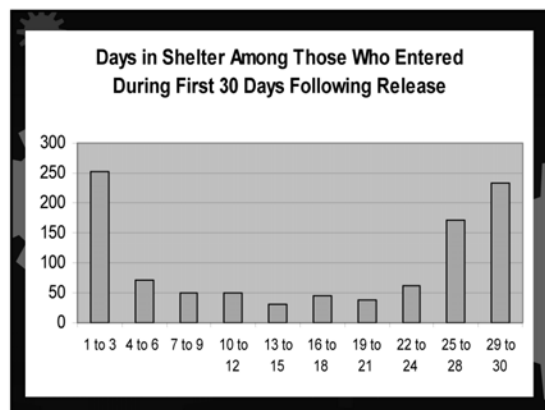
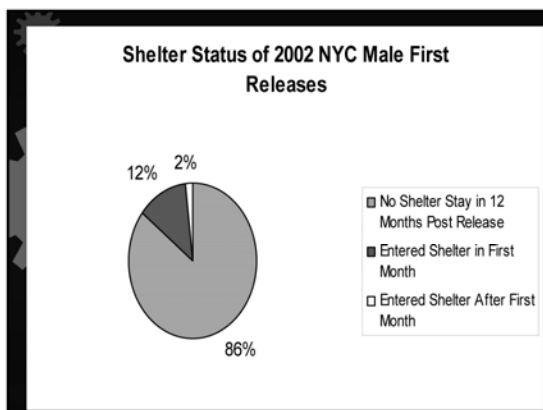
Likelihood of Felony Arrests w/in 2 Years of Release

| | <u>NYC Males</u> | <u>Non-NYC Males</u> |
|---------------------------------|--------------------------|----------------------|
| <u>Mental Health</u> | | |
| Level 5-7 at admission vs. | | |
| Level 1 | <i>marginal negative</i> | <i>no effect</i> |
| Level 2 | <i>no effect</i> | <i>no effect</i> |
| Level 3 | <i>no effect</i> | <i>no effect</i> |
| Level 4 | <i>negative</i> | <i>no effect</i> |
| <u>Level 5-7 at release vs.</u> | | |
| Level 1 | <i>no effect</i> | <i>no effect</i> |
| Level 2 | <i>no effect</i> | <i>no effect</i> |
| Level 3 | <i>no effect</i> | <i>no effect</i> |
| Level 4 | <i>no effect</i> | <i>no effect</i> |

Likelihood of Felony Arrests w/in 2 Years of Release

| | <u>NYC Males</u> | <u>Non-NYC Males</u> |
|---|------------------|--------------------------|
| <u>Substance Abuse at Admission</u> | | |
| No drug use vs. | | |
| Marijuana use only | <i>no effect</i> | <i>no effect</i> |
| Narcotic use | <i>no effect</i> | <i>no effect</i> |
| <u>Non-alcoholic vs. Suggestive abuse Alcoholic</u> | | |
| Suggestive abuse | <i>no effect</i> | <i>marginal negative</i> |
| Alcoholic | <i>no effect</i> | <i>marginal negative</i> |





The Power and (Limited but Consequential) Utility of Static Predictors

- Static factor composites and dynamic factor composites are about equally predictive
- Combinations of static and dynamic factors do not predict dramatically better than static factors alone
- Dynamic factors "explain" both prior history and recidivism, and they provide guidance for selecting or developing appropriate interventions
- However, static factors suffice when risk per se is at issue:
 - At the individual level—classification for supervision level
 - For strategic planning—allocation of resources
- The following illustrates the surprising power of a simple risk model based only on gender, age, and criminal record.

Proportion Arrested Within 2 Years of First Release (2002 Releases by Gender and Age Group)

| Age Group | Female | | | | Male | | | |
|-----------|--------|-----|-----|-----|-------|-----|-----|-----|
| | N | ANY | FEL | VFO | N | ANY | FEL | VFO |
| 50+ | 63 | .10 | .02 | .00 | 756 | .24 | .12 | .02 |
| 46-50 | 94 | .24 | .10 | .00 | 824 | .35 | .16 | .04 |
| 41-45 | 178 | .31 | .10 | .03 | 1666 | .43 | .24 | .06 |
| 36-40 | 257 | .37 | .19 | .05 | 2222 | .48 | .28 | .09 |
| 31-35 | 256 | .40 | .18 | .04 | 2403 | .50 | .30 | .10 |
| 26-30 | 159 | .36 | .16 | .06 | 2382 | .49 | .30 | .11 |
| 21-25 | 132 | .24 | .09 | .03 | 2915 | .59 | .39 | .16 |
| 16-20 | 48 | .19 | .06 | .00 | 998 | .69 | .49 | .22 |
| All Ages | 1187 | .32 | .14 | .04 | 14166 | .50 | .30 | .11 |

A 5-level Criminal Record Measure

- A scale was developed from counts of pre-admission arrests and convictions (including the commitment offense) for each of the following 11 categories:
 - YO adjudications (felony, misdemeanor)
 - Felony convictions (VFO, drug, other)
 - Misdemeanor convictions (non-drug)
 - Felony arrests (VFO, drug, other)
 - Misdemeanor arrests (drug, other)
- The count for each category was capped at a value beyond which additional events made no difference (typically 3, 4 or 5). These truncated counts were merely summed and the total was divided into 5 levels.
- The result is a 5-level classification that reflects both length and diversity of criminal record.

Proportion with Felony Arrest Within 2 Years of First Release

(Males by Age Group and Criminal Record Score)

| Age at Release (Grouped) | Arrest and Conviction Score (Grouped) | | | | | Total |
|--------------------------|---------------------------------------|-----|-----|-----|---------|-------|
| | 1 | 2 | 3 | 4 | 5 | |
| 50+ | .01 | .09 | .08 | .17 | .25 | .12 |
| 46-50 | .01 | .08 | .12 | .22 | .25 | .16 |
| 41-45 | .07 | .09 | .17 | .25 | .40 | .24 |
| 36-40 | .06 | .13 | .21 | .33 | .43 | .28 |
| 31-35 | .07 | .17 | .25 | .39 | .53 | .30 |
| 26-30 | .09 | .19 | .32 | .44 | .60 | .30 |
| 21-25 | .17 | .35 | .45 | .56 | .79 | .39 |
| 16-20 | .39 | .50 | .53 | .75 | (N = 1) | .49 |
| Total | .14 | .27 | .31 | .35 | .42 | .30 |

A Simple Static Risk Scale

- 3 variables
 - Gender
 - Age at release
 - The 5-level criminal record measure
 - (Plus the interaction between age and criminal record)
- Score range divided into 10 levels with roughly equal numbers of offenders
- Validated against independent samples

Proportion Arrested Within 2 Years of First Release

(by Gender and Simple Risk Score)

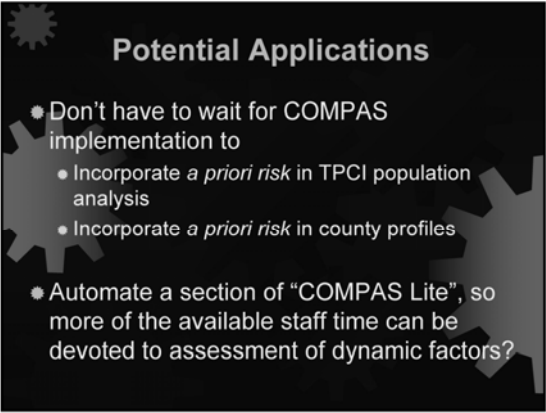
| Risk Score | Female | | | | Male | | | |
|------------|--------|-----|-----|-----|-------|-----|-----|-----|
| | N | ANY | FEL | VFO | N | ANY | FEL | VFO |
| 1 | 326 | .16 | .06 | .01 | 1436 | .16 | .08 | .02 |
| 2 | 155 | .23 | .08 | .00 | 1320 | .27 | .14 | .04 |
| 3 | 177 | .29 | .15 | .03 | 1103 | .36 | .18 | .05 |
| 4 | 184 | .35 | .17 | .05 | 1936 | .46 | .29 | .11 |
| 5 | 78 | .40 | .10 | .03 | 1377 | .45 | .25 | .07 |
| 6 | 65 | .52 | .25 | .09 | 1227 | .53 | .31 | .11 |
| 7 | 119 | .51 | .18 | .04 | 1201 | .60 | .37 | .13 |
| 8 | 9 | .22 | .00 | .00 | 1434 | .66 | .45 | .18 |
| 9 | 66 | .64 | .36 | .17 | 1874 | .67 | .43 | .16 |
| 10 | 8 | .75 | .75 | .13 | 1252 | .77 | .51 | .19 |
| Total | 1187 | .32 | .14 | .04 | 14166 | .50 | .30 | .11 |

Comparison of DCJS Draft Scale With Established Instruments

| Scale | Correlation with Total Recidivism | Correlation with Violent Recidivism |
|--|-----------------------------------|-------------------------------------|
| LSI-R | | |
| Average of 28 studies | .35 | |
| Canadian prison release study | .34 | .19 |
| Psychopathy Checklist | | |
| Average of 9 studies | .28 | |
| Canadian prison release study | .24 | .12 |
| DCJS Draft Scale (upon cross-validation) | | |
| All first releases | .36 | .18 |
| Split 1 | .37 | .17 |
| Split 2 | .34 | .19 |
| All releases | .34 | .18 |

Further Refinements

- Separate record length and diversity measures
- Age at 1st arrest
- Prior prison
- Prior jail
- NOT prior probation
- Interaction of age and gender



Potential Applications

- Don't have to wait for COMPAS implementation to
 - Incorporate *a priori risk* in TPCI population analysis
 - Incorporate *a priori risk* in county profiles
- Automate a section of "COMPAS Lite", so more of the available staff time can be devoted to assessment of dynamic factors?

Example 17. Georgia Risk Reduction Programming Available Through DOC

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|----------------------|--------------------|---------------------------------|-----------------------|--------------------------|--|--------------------------------------|--|
| STATE PRISONS | | | | | | | |
| Arrendale SP | | | | | | | |
| 508 | Adult Basic Ed | Family Violence | Motivation for Change | NGTC | Auto Mechanics | Parenting | Firefighter |
| F&CBD | ESOL | Moral Reconation Therapy | Prime for Life | Auto Body Repair | Barber | AA | Firefighter - Module I |
| ITC | GED Prep | Thinking for a Change | RSAT | Auto Mechanics | Bldg. Maintenance | NA | |
| RSAT | GED Testing | | SAAS | Data Processing | Career Clerk | | |
| | Literacy | | | Electric Wiring | Carpentry | | |
| | Special Ed | | | Firefighting - Rescue | Cook Apprentice (AP) | | |
| | Spec. Ed Assess | | | Food Prep/Culinary Arts | Cosmetology | | Firefighter I |
| | | | | Masonry/Brick/Stone | Custodial Maintenance | | Module I |
| | | | | Office Technology | Farm Equipment Operator | | |
| | | | | Service Station Mechanic | Farm Worker | | |
| | | | | Small Engine Repair | Food Prep./Culinary Arts | | |
| | | | | Woodworking | Groundskeeper | | |
| Augusta SMP | | | | | | | |
| 532 | Adult Basic Ed | Family Violence | Motivation for Change | Hospital Service Tech | Barber | AA | |
| | ESOL | | SAAS | | Food Prep./Culinary Arts | NA | |
| | GED Prep | | | | General Office Clerk | | |
| | GED Testing | | | | | | |
| | Literacy | | | | | | |
| Autry SP | | | | | | | |
| 543 | Adult Basic Ed | Family Violence | Motivation for Change | | Barber | | Firefighter |
| ITC | GED Prep | Thinking for a Change | Prime for Life | | Bldg. Maintenance | | Firefighter - Module I |
| | GED Testing | | | | Career Clerk | | |
| | Literacy | | | | Commercial Painter | | |
| | | | | | Custodial Maintenance | | |
| Baldwin SP | | | | | | | |
| 553 | Adult Basic Ed | Family Violence | Motivation for Change | MGTC | Food Prep./Culinary Arts | | |
| | GED Prep | | | Nursing Assistant | Horticulture | | |
| | Literacy | | | | | | |
| | Spec. Ed Assess | | | | | | |
| Bostick SP | | | | | | | |
| 536 | Adult Basic Ed | Family Violence | Motivation for Change | | Barbering | | Screen Printing |
| | GED Prep | | | | Custodial Maintenance | | Warehouse Distribution |
| | Literacy | | | | Food Prep./Culinary Arts | | |
| Burruss CTC | | | | | | | |
| 534 | Adult Basic Ed | Family Violence | Motivation for Change | Firefighting - Rescue | Building Maintenance | | Shoes & Boots |
| | GED Prep | | | Customer Service | Cook Apprentice | | |
| | Literacy | | | Horticulture | Custodial Maintenance | | |
| | Special Ed | | | | Food Prep./Culinary Arts | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|---|--|--|---|---|---|--------------------------------------|--|
| Calhoun SP 547 F&CBD | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a Change | Motivation for Change Prime for Life | MGTC Customer Service | Barber Bldg. Maintenance Career Clerk Custodial Maintenance Food Prep./Culinary Arts | AA NA | Firefighter I Module I |
| Central SP 0531 F&CBD ITC | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence | Motivation for Change Prime for Life SAAS | CGTC Carpentry Industrial Maintenance Plumbing | Custodial Maintenance Career Clerk Food Prep./Culinary Arts Groundskeeper | | Garment & Textiles |
| STATE PRISONS | | | | | | | |
| Coastal SP 523 | Adult Basic Ed GED Prep Literacy Special Ed Spec. Ed. Assess. | Family Violence | Motivation for Change | | Barber Building Maintenance Cook Apprentice Custodial Maintenance Food Prep./Culinary Arts | AA NA | Firefighter I Module I |
| Dodge SP 503 | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy | Motivation for Change Prime for Life | | Barber Cook Apprentice Custodial Maintenance Food Prep./Culinary Arts | AA NA | Firefighter I Module I |
| Dooly SP 548 | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy | Motivation for Change Prime for Life | Firefighting - Rescue | Auto Mechanics Barber Commercial Painter Custodial Maintenance Food Prep./Culinary Arts | AA NA | Firefighter I Module I |
| GDCP 521 | Adult Basic Ed GED Prep GED Testing Literacy Special Ed Spec. Ed. Assess. | Family Violence | Motivation for Change | | Gen. Clerical Skills Groundskeeping Food Prep./Culinary Arts Laundry | AA NA | Firefighter I Module I |
| GSP 517 | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a change | Motivation for Change Prime for Life | Firefighting - Rescue | Barber Building Maintenance Commercial Painter Custodial Maintenance Food Prep./Culinary Arts | COMPAS | Firefighter I Module I Modular Panel Systems Sign Reclamation Warehouse Distribution |
| Hancock SP 541 ITC | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a change | Motivation for Change Prime for Life | | Barber Career Clerk Food Prep./Culinary Arts Groundskeeper | AA NA | Firefighter I Module I Garment & Textiles |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|---|---|--|---|--|--|--|--|
| Hays SP 540 F&CBD SOPP | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Thinking for a Change | Motivation for Change Prime for Life | Firefighting - Rescue | Auto Mechanics Barber Commercial Painter Food Prep/Culinary Arts Forklift Operator Gen. Clerical Skills | Groundskeeper Horticulture Laundry Shoe Repair Store/Warehouse Clerk | Firefighter I Module I EMT Mattresses & Pillows Optics |
| Homerville SP 551 RSAT | Adult Basic Ed GED Prep Literacy | Family Violence Thinking for a Change | Motivation for Change RSAT SAAS | | Barber Custodial Maintenance Food Prep/Culinary Arts Gen. Clerical Skills | Groundskeeper Horticulture Laundry Store/Warehouse Clerk | AA NA |
| Johnson SP 545 F&CBD RSAT | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a change | Motivation for Change Prime for Life RSAT SAAS | MGTC Customer Service (RSAT & SAAS) | Barber Career Clerk Commercial Painter Cook Apprentice Custodial Maintenance | Food Preparation Gen. Clerical Skills Groundskeeper Laundry | Firefighter I Module I |
| STATE PRISONS | | | | | | | |
| Lee SP 510 F&CBD | Adult Basic Ed GED Prep GED Testing Literacy Special Ed | Family Violence | Motivation for Change | MGTC Auto Mechanics Carpentry Electrical Wiring Firefighting - rescue Small Engine Repair | Barber Career Clerk Commercial Painter Food Prep/Culinary Arts Gen. Clerical Skills Horticulture | Laundry | Firefighter I Module I |
| Lowndes SP 502 | Adult Basic Ed GED Prep Literacy | Family Violence Thinking for a Change | Motivation for Change Prime for Life SAAS | | Barber Custodial Maintenance Food Prep/Culinary Arts Groundskeeper | Laundry School Aide Store/Warehouse Clerk | Chemicals |
| Macon SP 549 F&CBD | Adult Basic Ed ESOL GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Reasoning & Rehabilitation Thinking for a Change | Motivation for Change Prime for Life | MGTC Customer Service Horticulture | Barber Career Clerk Building Maintenance Custodial Maintenance Food Prep/Culinary Arts | Forklift Operator Gen. Clerical Skills Groundskeeper Laundry Store/Warehouse Clerk | Firefighter I Module I |
| Mens SP 519 | Adult Basic Ed GED Prep Literacy Special Ed | Family Violence Thinking for a Change | Motivation for Change | MGTC Braille Transcription | Barber Braille Transcription Building Maintenance Custodial Maintenance | Food Prep/Culinary Arts Laundry | AA NA |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|---|---|--|--|--|---|--------------------------------------|---|
| Metro SP 554 | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy | Motivation for Change Primer for Life | MGTC Cosmetology Customer Service Veterinary Helper | Animal Caretaker Commercial Painter Custodial Maintenance Laundry | AA | |
| Milan SP 561 | Adult Basic Ed GED Prep Literacy | Family Violence | Motivation for Change | | Barber Cook Apprentice Custodial Maintenance Food Prep./Culinary Arts Gen. Clerical Skills (Lib) Store/Warehouse Clerk | | Firefighter I Module I |
| Montgomery SP 509 | Adult Basic Ed GED Prep Literacy | Family Violence | Motivation for Change | | | AA NA | Firefighter I Module I |
| Phillips SP 505 F&CBD SOPP | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a change | Motivation for Change Primer for Life | MGTC Auto Body Repair Carpentry | Graphic Arts/Printing | AA NA | |
| Pulaski SP 557 F&CBD RSAT | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a change | Motivation for Change Primer for Life RSAT SAAS | MGTC Cosmetology Customer Service Food Prep./Culinary Arts Graphic Arts/Printing Nursing Assistant Office Technology Plumbing | Building Maintenance Career Clerk Custodial Maintenance Food Prep./Culinary Arts Gen. Clerical Skills Laundry | AA NA Parenting | Garment & Textiles |
| STATE PRISONS | | | | | | | |
| Rivers SP 529 | Adult Basic Ed GED Prep Literacy | Family Violence | Motivation for Change | | Laundry | AA NA | Warehouse Distribution |
| Rogers SP 533 ITC | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Moral Reconciliation Therapy Thinking for a change | Motivation for Change Primer for Life | | Auto Mechanics Auto Body Repair Barber Cannery Operations Career Clerk Cook Apprentice Custodial Maintenance Diesel Mechanics Farm Worker Food Prep./Culinary Arts Forklift Operator Gen. Clerical Skills Groundskeeper Meat Cutting Recycling Store/Warehouse Clerk | AA NA | Modular Panel Systems Sign Reclamation Warehouse Distribution |
| Rutledge SP 530 | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence Reasoning & Rehabilitation | Motivation for Change Primer for Life | | Barber Commercial Painter Custodial Maintenance Food Prep./Culinary Arts Gen. Clerical Skills | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|--|---------------------------------------|---|---|--|---|--------------------------------------|--|
| Scott SP 525 F&CBD RSAT SOPP | Adult Basic Ed GED Prep | Family Violence Reasoning & Rehabilitation | Motivation for Change Prime for Life | GCTC A+ Certification (repair Computer) Auto Mechanics Braille Transcriber Carpentry Customer Service (RSAT) Drafting Electrical Wiring Electronics/Computer Graphic Arts/Printing Masonry | Building Maintenance Career Clerk Custodial Maintenance Heating & Air Conditioning Laundry | | |
| | GED Testing Literacy Special Ed | Thinking for a Change | RSAT SAAS | | | | |
| | | | | | | | |
| Smith SP 550 ITC | Adult Basic Ed GED Prep | Family Violence Moral Reconciliation Therapy | Motivation for Change Prime for Life | SETC A+ Certification (repair Computer) Auto Body Repair Auto Mechanics Carpentry Construction Trades Cluster Customer Care Drafting Electrical Wiring Graphic Arts/Printing Heating and Air Condition Masonry, Brick, Stone Service Station Mechanic Small Engine Repair Woodworking | Barber Career Clerk Commercial Painter Custodial Maintenance Food Prep/Culinary Arts Forklift Operator | AA NA | Signs & Decals |
| | GED Testing Literacy | Thinking for a change | | | | | |
| | | | | | | | |
| STATE PRISONS | | | | | | | |
| Telfair SP 542 ITC | Adult Basic Ed GED Prep | Family Violence Thinking for a Change | Motivation for Change Prime for Life | MGTC Diesel Mechanics | Barber Building Maintenance Career Clerk Custodial Maintenance Food Prep/Culinary Arts | | |
| | GED Testing Literacy Special Ed | | | | | | |
| | | | | | | | |
| Valdosta SP 537 B&CBD | Adult Basic Ed GED Prep | Family Violence Moral Reconciliation Therapy | Motivation for Change Prime for Life | | Career Clerk Commercial Painter Custodial Maintenance Food Prep/Culinary Arts | | |
| | GED Testing Literacy | Thinking for a change | | | | | |
| | | | | | | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|-----------------------|---|--|---|--|--|--------------------------------------|---|
| Walker SP 506 | Adult Basic Ed GED Prep GED Testing Literacy | Family Violence | Motivation for Change | | Automotive Mechanics Barber Building Maintenance Career Clerk Commercial Painter Custodial Maintenance Food Prep/Culinary Arts Groundskeeper General Clerical Skills Laundry Store/Warehouse Clerk | | Firefighter I Module I EMT Hsnet Technician Metal Fabrication |
| Ware SP 501 | Adult Basic Ed GED Prep GED Testing Literacy Special Ed | Family Violence | Motivation for Change | MGTC Building Maintenance CADD Custodial Maintenance Food Prep/Culinary Arts Electronics/Computer Upholstery Welding Woodworking | Commercial Painter Food Prep/Culinary Arts Forklift Operator Gen. Clerical Skills Groundskeeping Horticulture Laundry | | |
| Washington SP 552 ITC | Adult Basic Ed GED Prep Literacy | Family Violence Moral Reconation Therapy Thinking for a change | Motivation for Change Prime for Life | MGTC Cosmetology Customer Service | Barbering Building Maintenance Career Clerk Custodial Maintenance Gen. Clerical Skills Food Prep/Culinary Arts Groundskeeping Laundry Store/Warehouse Clerk | | Garment & Textiles |
| Wayne SP 507 | Adult Basic Ed GED Prep Literacy | Family Violence | Motivation for Change | | Barber Commercial Painter Custodial Maintenance Laundry | | Firefighter I Module I |
| Wilcox SP 546 | Adult Basic Ed ESOL GED Prep GED Testing Literacy | Family Violence | Motivation for Change SAAS | | Barber Gen. Clerical Skills Laundry | | Firefighter I Module I |
| PRE-RELEASE CTRS | | | | | | | |
| Appling PRC 7507 | Adult Basic Ed. GED Prep | Moral Reconation Therapy | Motivation for Change Prime for Life | Customer Service | | | |
| Lamar PRC 7521 | | Moral Reconation Therapy | Motivation for Change Prime for Life | Customer Service | | | |
| Long PRC 7550 | GED Prep | Moral Reconation Therapy | Motivation for Change Prime for Life | Customer Service | | | |
| Pelham PRC 7543 | GED Prep | Moral Reconation Therapy | Motivation for Change Prime for Life | Customer Service | | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|----------------------------------|---|---|---|----------------------|---|---|--|
| Turner PRC 7546 | GED Prep | Family Violence Moral Reconciliation Therapy | Motivation for Change Prime for Life | Customer Service | Career Clerk Food Prep/Culinary Arts | | |
| Western PRC 556 | GED Prep | Moral Reconciliation Therapy | Motivation for Change Prime for Life | Customer Service | Custodial Maintenance Groundskeeper Laundry | | |
| Wilkes PRC 7572 | GED Prep | Moral Reconciliation Therapy | Motivation for Change Prime for Life | Customer Service | Food Prep/Culinary Arts | | |
| PROBATION DETENTION CTRS | | | | | | | |
| Bacon PDC 41B | GED Prep GED Testing | Moral Reconciliation Therapy Reasoning & Rehabilitation | Motivation for Change | | Auto Body Repair Barber Building Maintenance Commercial Painter Custodial Maintenance | Food Prep/Culinary Arts Groundskeeper Laundry Small Engine Repair Wastewater Treatment | |
| Bleckley PDC 29E | GED Prep GED Testing | Family Violence | Motivation for Change | | | Family Violence | |
| Central PDC 16A | GED Prep | | Motivation for Change | | | | |
| Colwell PDC 46A | GED Prep GED Testing | | Motivation for Change | | | | |
| Davisboro PDC 24B | Adult Basic Ed GED Prep | | Motivation for Change | | | | |
| Emmanuel PDC 24A | Adult Basic Ed GED Prep | Family Violence Moral Reconciliation Therapy Reasoning & Rehabilitation | Motivation for Change Prime for Life SAAS | | Barber Cook Apprentice Custodial Maintenance | Food Prep/Culinary Arts Groundskeeper Laundry | |
| Emmanuel PDC Swainsboro Unit 24C | Adult Basic Ed GED Prep | | Motivation for Change Prime for Life SAAS | | Barber Cook Apprentice Custodial Maintenance | Food Prep/Culinary Arts Groundskeeper Laundry | |
| IW Davis PDC 32A | Adult Basic Ed GED Prep GED Testing | | Motivation for Change | | Custodial Maintenance | Groundskeeper | |
| McEver PDC 21A | GED Prep | Moral Reconciliation Therapy | Motivation for Change | | | | |
| Northwest PDC 38A | GED Prep GED Testing | | Motivation for Change | | Building Maintenance Custodial Maintenance Food Prep/Culinary Arts | Greenskeeper Laundry | |
| Patten PDC 01A | Adult Basic Ed GED Prep GED Testing | | Motivation for Change SAAS | | Barber Cook Apprentice Food Prep/Culinary Arts | Groundskeeping Laundry | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|---------------------------------|----------------------------|--|-------------------------------|----------------------|--|---|--|
| PROBATION DETENTION CTNS | | | | | | | |
| Paulding PDC | Adult Basic Ed GED Prep | | Motivation for Change | | Custodial Maintenance Food Prep./Culinary Arts | Groundskeeper Laundry | |
| Rockdale Dekalb PDC | Adult Basic Ed GED Prep | Moral Reconciliation Therapy | Motivation for Change | | Bldg. Maintenance Custodial Maintenance | Groundskeeper Laundry | Anger Mgt. |
| 37B | GED Testing | | | | Food Prep./Culinary Arts | | |
| Smith PDC | Adult Basic Ed GED Prep | | Motivation for Change | | Barber Custodial Maintenance | Groundskeeping Laundry | |
| 04D | GED Testing Literacy | | | | Food Prep./Culinary Arts | | |
| Southeast PDC | GED Prep | | Motivation for Change | | Custodial Maintenance Food Prep./Culinary Arts | Groundskeeper Laundry | |
| 04A | GED Prep | | Motivation for Change | | Commercial Painter Custodial Maintenance | Food Prep./Culinary Arts Laundry | |
| Southwest PDC | GED Prep GED Testing | | Motivation for Change | | | | |
| 04B | GED Prep | | Motivation for Change | | Barber Building Maintenance Commercial Painter | Gen. Clerical Skills Groundskeeping Laundry | |
| Terrell PDC | GED Prep | Moral Reconciliation Therapy | Motivation for Change | | Food Prep./Culinary Arts | | |
| 31A | | | | | | | |
| Treutlen PDC | Adult Basic Ed GED Prep | | Motivation for Change | | Barber Commercial Painter Custodial Maintenance | Food Prep./Culinary Arts Groundskeeping Laundry | |
| 16C | Literacy | | | | | | |
| West Central PDC | GED Prep GED Testing | Moral Reconciliation Therapy Thinking for a Change | Motivation for Change SAAS | | Building Maintenance Custodial Maintenance Food Prep./Culinary Arts | Groundskeeping Laundry | |
| 19B | | | | | | | |
| Western PDC | Adult Basic Ed GED Prep | Moral Reconciliation Therapy Reasoning & Rehabilitation | Motivation for Change SAAS | Tile Setting | Custodial Maintenance Food Prep./Culinary Arts | Laundry | |
| 08B | GED Testing | | | | Groundskeeper | | |
| Women's PDC | Adult Basic Ed GED Prep | Reasoning & Rehabilitation | Motivation for Change SAAS | | Building Maintenance Custodial Maintenance | Horticulture Laundry | |
| 04B | GED Testing | | | | Food Prep./Culinary Arts | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|---|--|---------------------------------|---|----------------------|--|---|--|
| TRANSITIONAL CTRS | | | | | | | |
| Albany TC 220 LIFE SKILLS | GED Prep | Moral Reconciliation Therapy | Motivation for Change SAAS | | Building Maintenance Cook Apprentice | | |
| Atlanta TC 223 LIFE SKILLS | GED Prep | Moral Reconciliation Therapy | Motivation for Change SAAS | | Barber | | |
| Augusta TC 246 LIFE SKILLS | Adult Basic Ed ESOL GED Prep | Moral Reconciliation Therapy | Motivation for Change Prime for Life SAAS | | Barber Cook Apprentice Custodial Maintenance | Food Prep /Culinary Arts Laundry | |
| Clayton TC 249 LIFE SKILLS | GED Prep | Moral Reconciliation Therapy | | | Cook Apprentice Food Preparation | | |
| Coastal TC 247 LIFE SKILLS | Adult Basic Ed GED Prep Literacy | Moral Reconciliation Therapy | Motivation for Change Prime for Life | | Barber Building Maintenance Cook Apprentice | Gen. Office Clerk Groundskeeper | |
| Columbus TC 225 LIFE SKILLS | ABE GED Prep GED Testing | Moral Reconciliation Therapy | Motivation for Change | | Job Readiness | Family Violence AA NA | |
| Helms TC 250 LIFE SKILLS | GED Prep GED Testing | Moral Reconciliation Therapy | Motivation for Change | | | | |
| LaGrange TC 248 LIFE SKILLS | Adult Basic Ed GED Prep | Moral Reconciliation Therapy | Motivation for Change Prime for Life | | Custodial Maintenance Food Prep /Culinary Arts | | |
| Macon TC 231 LIFE SKILLS | GED Prep | Moral Reconciliation Therapy | Motivation for Change Prime for Life | | Barber Basic World of Work Building Maintenance Groundskeeper | Custodial Maintenance Food Prep /Culinary Arts | |
| Metro TC 235 LIFE SKILLS | GED Prep | Moral Reconciliation Therapy | Motivation for Change | | Cook Apprentice | | |
| Savannah Men's TC 242 LIFE SKILLS | GED Prep | Moral Reconciliation Therapy | Motivation for Change | | Barber Building Maintenance Commercial Painter Cook Apprentice | Custodial Maintenance Food Prep /Culinary Arts Groundskeeper Store/Warehouse Clerk | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|--------------------------------------|-------------------------|---------------------------------|-----------------------|----------------------|--|--|--|
| SPECIALIZED CTRS | | | | | | | |
| Arrendale FPSATC 25A | | | RSAT | Customer Service | Career Clerk | | |
| Atlanta Specialized Unit (ASSU) 35 | | Moral Reconation Therapy | | | | | |
| Bainbridge PSATC 34A RSAT | Adult Basic Ed GED Prep | Thinking for a Change | | | Barber Custodial Maintenance | Food Prep /Culinary Arts Laundry | |
| Clayton DRC 10B | | Moral Reconation Therapy | Prime for Life SAAS | | | | |
| Griffin DRC 19C | GED Prep | Moral Reconation Therapy | Prime for Life SAAS | | | | |
| Macon DRC 23B | | Moral Reconation Therapy | Prime for Life SAAS | | | | |
| Rome DRC 33B | | Thinking for a Change | Prime for Life SAAS | | | | |
| Savannah Impact Program (SIP) | GED Prep | Thinking for a Change | Prime for Life SAAS | | | | |
| Tifton DRC 39A | | Moral Reconation Therapy | Prime for Life SAAS | | Job Readiness | | |
| Whitworth Parole Revocation Ctr. 572 | GED Prep | Moral Reconation Therapy | | | Barber Bldg. Maintenance Commercial Painter Custodial Maintenance | Groundskeeping Laundry Store/Warehouse Clerk | |
| COUNTY PRISONS | | | | | | | |
| All Counties | | | Motivation for Change | | | | |
| Effingham County 413 | | | | | | | |
| Jackson County 426 | | | Motivation for Change | | | | Module I Firefighter I Hasmet Technician |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|-------------------------|--|---------------------------------|-----------------------|----------------------|--|--------------------------------------|--|
| Jefferson County 428 | | | Motivation for Change | | Auto Body Repair Auto Mechanics Barber Building Maintenance Custodial Maintenance Diesel Mechanics Food Prep/Culinary Arts Groundskeeping Heavy Equipment Operations Laundry Meat Cutting Store/Warehouse Clerk Welding Wastewater Treatment | | |
| Muscogee County 435 | Adult Basic Ed. GED Prep GED Testing Literacy | | Motivation for Change | | Auto Body Repair Auto Mechanics Barber Building Maintenance Carpentry Construction Trades Commercial Painter Custodial Maintenance Diesel Mechanics Electrical Wiring Food Prep/Culinary Arts Forklift Operator Gen. Clerical Skills Groundskeeping Heavy Equipment Oper. Recycling | AA NA | |
| COUNTY PRISONS | | | | | | | |
| Stewart County 442 | | | Motivation for Change | | | | Module I Firefighter I |
| Terrell County 444 | | | Motivation for Change | | | | Module I Firefighter I |
| Thomas County 445 | | | Motivation for Change | | | | Module I Firefighter I |
| DIVERSION CTRS | | | | | | | |
| Albany DC 15A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Alcovy DC 02A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | Food Prep/Culinary Arts | | |
| Athens DC 42A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Augusta DC 05A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Clayton DC 10A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Cobb DC 11A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Columbus DC 08A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Gainesville DC 26A | GED Prep GED Testing | Moral Reconation Therapy | Motivation for Change | | | | |
| Gateway DC | GED Prep | Moral Reconation Therapy | Motivation for Change | | | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|----------------------|--------------------|---------------------------------|-----------------------|----------------------|--|--------------------------------------|--|
| 03B | GED Testing | | | | | | |
| Griffin DC | GED Prep | Moral Reconation Therapy | Motivation for Change | | | | |
| 19A | GED Testing | | | | | | |
| Macon DC | GED Prep | Moral Reconation Therapy | Motivation for Change | | | | |
| 23A | GED Testing | | | | | | |
| Rome DC | GED Prep | Moral Reconation Therapy | Motivation for Change | | | | |
| 33A | GED Testing | | | | | | |
| Thomasville DC | GED Prep | Moral Reconation Therapy | Motivation for Change | | | | |
| 35A | GED Testing | | | | | | |
| Rouse DC | GED Prep | Moral Reconation Therapy | Motivation for Change | | | | |
| 41A | GED Testing | | | | | | |
| PROBATION BOOT CAMPS | | | | | | | |
| Dodge Boot Camp | | | | | | | Wood Casegoods |
| 9503 | | | | | | | |
| Treutlen BC | GED Prep | | Motivation for Change | | | | |
| 16B | | | | | | | |
| West Georgia BC | GED Prep | | Motivation for Change | | | | |
| 38B | | | | | | | |
| PROBATION OFFICES | | | | | | | |
| Albany PO | | Moral Reconation Therapy | SAAS | | | | |
| 151 | | Thinking for a Change | | | | | |
| Athens PO | | | | | | | |
| 421/422 | | | | | | | |
| Augusta PO | | Moral Reconation Therapy | Motivation for Change | | | | |
| 051/052/053 | | Prime for Life | | | | | |
| Bainbridge PO | | | | | | | |
| 342 | | | | | | | |
| Blakely PO | | | SAAS | | | | |
| 312 | | | | | | | |
| Brunswick PO | | Moral Reconation Therapy | SAAS | | | | |
| 071 | | Thinking for a Change | | | | | |
| Cairo PO | | Moral Reconation Therapy | | | | | |
| 343 | | | | | | | |
| Calhoun PO | | Moral Reconation Therapy | | | | | |
| 093 | | Reasoning & Rehabilitation | | | | | |
| Camilla PO | | Moral Reconation Therapy | | | | | |
| 341 | | | | | | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|----------------------|--------------------|--|------------------------|----------------------|--|--------------------------------------|--|
| C. Dekalb PO 372 | | Moral Reconation Therapy Thinking for a Change | | | | | |
| Columbus PO 081 | | Moral Reconation Therapy Thinking for a Change | | | | | |
| Covington PO 022 | | Reasoning & Rehabilitation | | | | | |
| Dahlonega PO 461 | | Moral Reconation Therapy | Prime for Life SAAS | | | | |
| Douglas PO 412 | | Moral Reconation Therapy | SAAS | | | | |
| Douglasville PO 441 | | Moral Reconation Therapy Thinking for a Change | Prime for Life | | | | |
| Elberton PO 271 | | Moral Reconation Therapy Thinking for a Change | | | | | |
| Eastman PO 292 | | | SAAS | | | | |
| Gainesville PO 261 | | Moral Reconation Therapy | | | | | |
| Griffin PO 192 | | Moral Reconation Therapy | | | | | |
| Hartwell PO 272 | | Moral Reconation Therapy | | | | | |
| Hinesville PO 041 | | Moral Reconation Therapy | | | | | |
| Jackson PO 481 | | Moral Reconation Therapy | | | | | |
| Jesup PO 073 | | Moral Reconation Therapy | | | | | |
| PROBATION OFFICES | | | | | | | |
| Lawrenceville PO 201 | | Moral Reconation Therapy | Prime for Life | | | | |
| Lyons PO 242 | | Thinking for a Change | | | | | |
| Macon PO 231 | | Moral Reconation Therapy | Prime for Life | | | | |
| Marietta/Cobb PO 111 | | Thinking for a Change | | | | | |

| Sites | Academic Education | Cognitive Behavioral/Counseling | Substance Abuse | Vocational Education | On the Job Training (All OJT certificates are issued by Middle Georgia Tech) | Other Programs (not tracked in OTIS) | Fire Services OR Correctional Industries |
|-------------------------|-------------------------|---|---|----------------------|--|--------------------------------------|--|
| McCrae PO 291 | | | Motivation for Change Prime for Life | | | | |
| McDonough PO 181 | | Moral Reconciliation Therapy | Prime for Life | | | | |
| Milledgeville PO 281 | | Moral Reconciliation Therapy | Prime for Life | | | | |
| Monroe PO 021 | | Moral Reconciliation Therapy | Prime for Life | | | | |
| Morgan PO 344 | | Moral Reconciliation Therapy | | | | | |
| Moultrie PO 352 | | Reasoning & Rehabilitation | | | | | |
| Newnan PO 141 | | Moral Reconciliation Therapy | | | | | |
| Rome PO 331 | GED Prep GED Testing | Moral Reconciliation Therapy | | | | | |
| Sandersville PO 243 | | Moral Reconciliation Therapy | | | | | |
| Savannah PO 171 | | Moral Reconciliation Therapy Thinking for a Change | Prime for Life | | | | |
| Slyvester PO 392 | | Moral Reconciliation Therapy | | | | | |
| Statesboro PO 301 | | Moral Reconciliation Therapy | | | | | |
| Thomson PO 401 | | Moral Reconciliation Therapy | Motivation for Change Prime for Life | | | | |
| Tifton PO 391 | | Moral Reconciliation Therapy | SAAS | | | | |
| Valdosta PO 351 | | Thinking for a Change | | | | | |
| Warner Robins PO 211 | | Moral Reconciliation Therapy Thinking for a Change | Prime for Life | | | | |
| Waycross PO 411 | | Moral Reconciliation Therapy Thinking for a Change | Prime for Life SAAS | | | | |
| Winder PO 321 | | Moral Reconciliation Therapy | | | | | |
| Woodbine PO 75 | | | SAAS | | | | |

Example 18. New York TPC Strategy on Data Sharing

Summary of Proposed MOU for Facilitating Data Sharing Among Agencies Participating in New York State's TPC Initiative

The Problem

Many of the analyses likely to be needed by the Steering Committee and its workgroups will require sharing case-level data among two or more participating agencies.¹ Unfortunately, under participating agencies' existing procedures for sharing data for research purposes, it often takes months to arrange and complete such analyses. If the normal processes have to be repeated separately for each analysis, the work of the Steering Committee and its workgroups will be repeatedly and substantially delayed.

Requested analyses often can be completed quickly, once the relevant data have been compiled and prepared for analysis. Typically, the sources of greatest delay in projects that require sharing data among agencies are

- the process of preparing, reviewing, and approving requests for access to data, and
- the process of matching records from two or more sources.

The Solution

The TPC Research and Information Support Team (RIST) recommends establishing a single, over-arching MOU to govern data sharing for the purpose of supporting TPC analyses. To that end, the Team has

- reviewed the data sharing policies of each participating agency,
- reviewed a sample of existing MOUs that have been adopted by participating agencies for similar purposes,² and
- prepared a draft MOU that the Team believes is consistent with participating agencies' existing policies.

The proposed MOU would establish policies and procedures that would expedite the approval and matching processes by

- creating a “TPC Core Database,” which would incorporate individual-level data from DOCS, DOP, DCJS, and perhaps DPCA;
- establishing a “certification” process, whereby the construction of additional, special purpose, interagency data sets could be authorized as needed on the basis of documentation confirming that a proposed data project conforms to the requirements of the TPC MOU (without a need to develop a separate MOU for each instance); and
- “pre-matching” personal identifiers available in the Core Database with the internal database identifiers used in participating agencies' data systems.

¹ Dozens of such analyses are anticipated.

² The existing MOUs varied substantially in format, from brief and general, to long, detailed, precise, and legalistic. The Team chose to adopt a very detailed format, reasoning that agencies that prefer the briefer format would still find the more detailed approach acceptable (but not necessarily vice-versa).

- The Core Database will permit nearly immediate turn-around for a substantial proportion of analyses needed for TPC purposes.
- On those occasions when analyses require additional data not included in the Core Database,
 - the certification process will expedite authorization to access the relevant data, and
 - extracting the necessary records from the appropriate systems will be greatly expedited (in most cases) by having already completed the “pre-match.”
- The proposed MOU takes into account the fact that some of the relevant, individual-level data cannot be shared in identifiable form for TPC purposes (e.g., Medicaid data or data relating to participation in treatment for chemical dependence), and it allows for the possibility that the agency hosting such data might have to be the last in line to add data to a composite file and might then have to be the agency that conducts the requested analyses.

Provisions of the MOU

The following briefly outlines the contents of each of the major sections of the MOU, as drafted by the RIST members.

Intent

The participating agencies agree that they intend, whenever possible and as appropriate, to

- Share data to support TPC analyses
- Conduct and contribute to TPC analyses
- Develop and maintain an adult core database
- Explore the desirability and feasibility of a juvenile core data base
- Construct and analyze special data sets as needed
- Match person or case identifiers in advance
- Limit release of data and findings to the TPC Steering Committee, its work groups, and the agencies that contributed data (except with the explicit approval for wider distribution by the Steering Committee and the agencies that contributed data).

Participating agencies also agree that an agency may decline to supply requested data or conduct requested analyses, provided the party explains in writing why supplying the data or conducting the analyses is either illegal or not feasible.

Definitions

Definitions are provided for the following key terms: *TPC analysis, data project, data project description, certification, data provider, data recipient, lead agency, aggregated data set, de-*

identified data set, limited data set, identifiable data set, adult core data base, and special data set.

Confidentiality Safeguards Applicable to All Participating Agencies

Paragraphs 22 – 30 specify actions and limitations on use of data designed to protect confidentiality of individuals who are the subjects of the data, to which all participating agencies must agree.

Agency-Specific Provisions

Paragraphs 31 – 37 specify exceptions and additional limitations that apply to certain types of data or data held by certain participating agencies.

Request and Certification Procedures

Each instance of a need to prepare and analyze a “special data set” requires a separate data project description and data project certification. This section

- explains identification and role of the lead agency
- specifies the required elements of a data project description, and
- explains the forms and procedures required to “certify” that a proposed data project complies with the provisions of the MOU.

Disclosure of Findings

Specifies that, prior to release to the Steering Committee or its workgroups, the findings of TPC analyses

- will be reviewed by data providers to correct factual errors, misinterpretations of data elements, or misinterpretation of agency policies, and
- will not be disclosed to anyone who is not a party to the MOU, without the explicit approval of the TPC Steering Committee and the agencies that contribute data to the analyses.

Attachment A: Certification Form

Attachment A of the MOU is the form that is to be completed, signed, and attached to the “data project description” for each proposed “data project.” It “certifies” that a proposed data project complies in all respects with the provisions of the TPC MOU.

According to the current draft of the MOU, the person authorized to sign the certification for each agency involved in a data project would be the agency’s representative on the Research and Information Support Team (RIST). An agency is, of course, free to establish internal procedures not documented in the MOU that might be prerequisite to authorizing its RIST representative to “sign off” on individual projects. However, since the purpose of establishing the certification process is to expedite the approvals, any additional layers of review should be kept to a minimum.

MEMORANDUM OF UNDERSTANDING
CONCERNING SHARING OF DATA AND OTHER DATA ANALYSIS RESOURCES
AMONG AGENCIES PARTICIPATING IN
THE NEW YORK STATE TRANSITION FROM PRISON TO COMMUNITY INITIATIVE
(*hereinafter “TPC”*),
WHICH AGENCIES (*hereinafter “the parties”*) INCLUDE

The New York State Division of Criminal Justice Services (hereinafter “DCJS”)
having its principal offices at 4 Tower Place, Albany, NY 12203, and

The New York State Department of Correctional Services (hereinafter “DOCS”)
having its principal offices at Building 2, State Campus, Albany, NY 12226, and

The New York State Division of Parole (hereinafter “DOP”)
having its principal offices at 97 Central Avenue, Albany, NY 12206, and

The New York State Department of Health (hereinafter “DOH”)
having its principal offices at Corning Tower, Empire State Plaza, Albany, NY 12237, and

The New York State Department of Labor (hereinafter “DOL”)
having its principal offices at the State Campus, Building 12, Albany, NY 12240, and

The New York State Division of Housing and Community Renewal (hereinafter “DHCR”)
having its principal offices at Hampton Plaza, 38-40 State Street, Albany, NY 12207, and

The New York State Division of Probation and Correctional Alternatives (hereinafter “DPCA”) having its principal offices at 80 Wolf Road, Albany, NY 12205, and

The New York State Office of Alcoholism and Substance Abuse Services (hereinafter “OASAS”) having its principal offices at 1450 Western Avenue, Albany NY 12203, and

The New York State Office of Children and Family Services (hereinafter “OCFS”)
having its principal offices at 52 Washington Street, Rensselaer, NY 12144, and

The New York State Office of Mental Health (hereinafter “OMH”)
having its principal offices at 44 Holland Avenue, Albany, NY 12229, and

The New York State Office of Mental Retardation and Developmental Disabilities (hereinafter “OMRDD”) having its principal offices at 44 Holland Avenue, Albany, NY 12229, and

The New York State Office of Temporary and Disability Assistance (hereinafter “OTDA”)
having its principal offices at 40 North Pearl Street, Albany, NY 12243.

WHEREAS, in order to identify potential targets for improvements in the management of offenders transitioning from prison to community and to support development of a multidisciplinary Transition Accountability Planning process, the parties have a mutual interest in compiling and sharing information about the characteristics and circumstances of offenders transitioning from prison to community, as well as information about case processing decisions, services, and other interventions for offenders transitioning from prison to community; and

WHEREAS, many analyses needed by the TPC Steering Committee and its workgroups for the above-mentioned purposes will require preparing data sets that include data maintained by two or more of the parties to this agreement; and

WHEREAS, it is recognized by the parties that, if the data sharing request and approval process and the data matching process must be undertaken separately for each TPC-related analysis, the work of the TPC Steering Committee and its workgroups will be repeatedly and substantially delayed;

NOW, THEREFORE, in order to promote efficiency in responding to the information needs of the TPC Initiative, the parties agree as follows:

1. The MOU will be deemed executed for the purpose of referencing the MOU as of the date it has been signed by authorized representatives of at least two of the parties. The MOU will become effective for each individual party as of the date it is signed by an authorized representative of the respective party.

Intent

2. Share data to support TPC analyses. The parties intend to share data needed to support TPC analyses for the TPC Steering Committee and its workgroups, to the extent that such data
 - a. are under the control of a party to this agreement; and
 - b. are readily available or obtainable given a reasonable commitment of resources; and
 - c. are, in the judgment of the party in control of the data, not prohibited by applicable statutes and regulations to be shared for the purposes to be served by TPC analyses; and
 - d. can be shared using data management procedures that comply with applicable statutes and regulations and the provisions of this MOU.
3. Conduct and contribute to TPC analyses. The parties intend to conduct analyses, or assist in the conduct of analyses, or otherwise contribute knowledge and expertise, as such contributions are requested by the TPC Steering Committee and its workgroups, or as individual parties independently determine that sharing information in their possession will facilitate the work of the TPC Steering Committee and its workgroups, to the extent that the individual parties determine that such contributions are feasible and that the necessary resources can be committed.

4. Develop and maintain an adult core data base. To support rapid completion of as many as possible of the analyses needed by the TPC Steering Committee and its workgroups, DOCS, DOP, and DCJS intend to develop and maintain an adult core data base that combines information from existing DOCS, DOP, and DCJS data bases, and which is made available to DOCS, DOP, and DCJS analysts to support TPC analyses. The adult core data base will include information for offenders in selected annual prison release cohorts. It will be developed and maintained pursuant to a data project description and data project certification prepared and executed by DCJS, DOCS, and DOP, according to procedures detailed in paragraphs 30 through 38 of this agreement.
5. Explore the desirability and feasibility of a juvenile core data base. The parties intend to assist OCFS in determining whether it is desirable and feasible to construct a juvenile core data base, analogous to the adult core data base referenced above. If judged by the TPC Steering Committee to be desirable and feasible, the juvenile core data base will be developed and maintained pursuant to a data project description and data project certification prepared by OCFS and executed by parties that agree to join in the resulting certified data project, according to procedures detailed in paragraphs 30 through 38 of this agreement.
6. Construct and analyze special data sets as needed. The parties intend to construct special data sets as needed to support TPC analyses that cannot be accomplished using either the adult core data base alone, or, if it is developed and implemented, the juvenile core data base alone. Individuals to be included in special data sets may be identified via analyses of a core data base, but a special data set will also incorporate information which is not included in a core data base and may include information from parties who do not contribute data to a core data base. Special data sets will be developed and analyzed pursuant to data project descriptions and data project certifications, according to procedures detailed in paragraphs 30 through 38 of this agreement.
7. Match person or case identifiers in advance. In order to expedite the eventual construction and analysis of special data sets when the need arises, the parties intend to undertake advance matching of person or case identifiers for individuals in the release cohorts represented in the adult core data base to the person or case identifiers that serve as links to case-level data in the parties' respective data systems.
8. Limit release of data and findings. Data sets and analytic findings produced pursuant to this agreement are intended to be used for TPC purposes only. No individual level information will be disclosed to anyone except those specified as data recipients in an applicable data project certification that conforms to the confidentiality protections specified in paragraphs 21 through 38 of this agreement. Aggregate findings will not be released to any person or organization other than the TPC Steering Committee, its workgroups, and the agencies that contributed data, without the approval of the Steering Committee and the agencies that contributed data.
9. Decline under exceptional circumstances. A party may decline to supply data or conduct analyses requested by the TPC Steering Committee or its workgroups, provided the party explains to the Steering Committee in writing why supplying the requested data or conducting the requested analyses is either illegal or not feasible.

Definitions

10. *TPC analysis* means a qualitative or quantitative analysis of offender characteristics and circumstances, case processing decisions, case plans and planning processes, or services and other interventions for offenders transitioning from prison to community, conducted at the request of the TPC Steering Committee or its workgroups, or proposed by the TPC Research and Information Support Team and endorsed by the Steering Committee.
11. *Data project* means a set of activities undertaken to combine data provided by more than one of the parties to this agreement, or to provide data maintained by one agency to analysts in another agency, and to conduct one or more TPC analyses using the shared data set. The data to be incorporated in a data project could come from existing electronic data bases, or a data project could include conducting original interviews, conducting original surveys, or conducting original data collection from paper case files.
12. *Data Project Description (DPD)* means a document describing the purposes and methods of a proposed data project. A DPD is required as part of the process of certifying that a proposed data project complies with the provisions of this MOU.
13. *Certification* means a document, signed by the parties serving as data providers and data recipients for a data project detailed in an accompanying data project description, which attests to the fact that the data project complies with the provisions of this MOU.
14. For any given data project, an agency that is a party to this agreement may serve as a data provider, a data recipient, or the lead agency, or may serve any combination of these functions:
 - a. *Data provider* means a party to this agreement that provides data to another party to this agreement pursuant to a certified data project, in a manner consistent with applicable rules, regulations, statutes, and the provisions of this MOU.
 - b. *Data recipient* means a party to this agreement that receives data from another party to this agreement pursuant to a certified data project, in a manner consistent with applicable rules, regulations, statutes, and the provisions of this MOU. A data recipient may also be a data provider, when a data recipient combines data from two or more data providers, then forwards the combined data set to another data recipient or returns the combined data set to the original data provider.
 - c. *Lead agency* means a party to this agreement that accepts responsibility for preparing the data project description for a given data project and for coordinating data preparation and TPC analyses for that project. The lead agency usually will also be the party taking responsibility for conducting the TPC analyses for a given data project, but there will be exceptions due to limitations on sharing data held by certain agencies.
15. *Aggregated data set* means a data set providing information on some number of variables (P), provided as counts of the numbers of cases with each unique combination of values for the P variables. Combinations with fewer than 5 cases are excluded, so that it is not possible to identify individual persons either directly or indirectly. An aggregate data set may be provided in one of the following equivalent formats:
 - a. a P-way table, in which each cell corresponds to a unique combination of values for the P variables, each cell contains a count of the number of cases having the

corresponding combination of values, and the count in each cell is either zero or at least five; or

- b. a data file containing one record for each case, in which each record contains the values for the P variables in the corresponding case, and there are either zero records (no cases) or at least five records (≥ 5 cases) having each unique combination of values for the P variables that occurs in the data set; or
- c. a data file containing one record for each unique combination of values for the P variables that occurs in the data set, in which is recorded the P values that define a unique combination and the number of cases (at least five) having the corresponding combination of values.

16. *De-identified data set* is defined in this agreement according to the stringent criteria adopted in the OMH privacy policy. A data set is considered *de-identified* if either condition (a) or condition (b) is satisfied:

- a. all of the following identifiers of the individual (and relatives, employers, or household members) are removed:
 - i. Names;
 - ii. All geographic subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes (except that including the initial 3 digits of a zip code is permissible if the corresponding geographic area contains more than 20,000 people);
 - iii. Elements of dates (except year) directly related to the individual, and all ages and elements of dates that indicate age for individuals over 89, unless aggregated into a single category of age 90 and older;
 - iv. Telephone numbers; fax numbers; email addresses; social security numbers; medical record numbers; health plan beneficiary numbers; account numbers; certificate or license numbers; vehicle identifiers and serial numbers, including license plate numbers; device identifiers and serial numbers;
 - v. Web Universal Resource Locators (URLs);
 - vi. Internet Protocol (IP) address numbers;
 - vii. Biometric identifiers;
 - viii. Full face photographic images; and
 - ix. Any other personally unique identifying number, characteristic, or code (e.g., indictment numbers or docket numbers); OR
- b. A person who is employed by the data provider, who has appropriate knowledge and experience with generally acceptable statistical and scientific principles and methods, determines that the risk is very small that the information could be used, alone or with other reasonably available information, to identify the individual who is the subject of the information.

17. *Limited data set* means a data set that excludes the following direct identifiers of the individual or of relatives, employers, or household members of the individual:

- a. Names;
- b. Postal address information, other than town or city, State, and zip code; (County may be included because it is not considered postal address information for this purpose);

- c. Telephone numbers; fax numbers; email addresses; social security numbers; medical record numbers; health plan beneficiary numbers; account numbers; certificate or license numbers; vehicle identifiers and serial numbers, including license plate numbers; device identifiers and serial numbers;
 - d. Web Universal Resource Locators (URLs);
 - e. Internet Protocol (IP) address numbers;
 - f. Biometric identifiers; and
 - g. Full face photographic images;
18. *Identifiable data set* means a data set that does not qualify as an aggregate data set, a de-identified data set, or a limited data set according to the criteria specified in this agreement.
19. *Adult core data base* means a data set combining information from existing DOCS, DOP, and DCJS data bases, made available to DOCS, DOP, and DCJS analysts without the necessity of further approvals, for the purpose of conducting TPC analyses as the need for such analyses arise.
20. *Special data set* means a data set that includes information that is not available in the adult core data base, usually (but not necessarily) combined with information from the adult core data base. A special data set is constructed pursuant to a certified data project, incorporates information from one or more of the data providers identified in the certification, and is made available for TPC analyses to one or more of the data recipients identified in the certification, as provided in the associated data project description.

Confidentiality Safeguards Applicable to All Participating Agencies

21. Data recipients may use data received from other parties pursuant to this agreement only for TPC purposes, as described in the applicable data project descriptions.
22. Data recipients will not combine information in a certified data set with information from sources other than those authorized in the applicable data project descriptions.
23. Data recipients will restrict access to data received from other parties to those employees whose responsibilities require access to accomplish the functions authorized in the applicable data project descriptions.
24. Data recipients will store all physical media containing individually identifiable information in secure locations.
25. Data recipients will refrain from adding any information that would make the records more identifiable than specified in the applicable data project descriptions.
26. Data recipients will retain the data only as long as necessary to effectuate the purposes specified in the applicable data project descriptions. Upon completion of the TPC analyses, the data recipients agree to return or, with the consent of the providing agencies, destroy all confidential or proprietary information. Destruction includes the complete purging of all confidential information from all computers and back up media storage.
27. Data recipients will permit data providers to monitor, audit, and review activities of receiving agencies to assure compliance with this agreement.

28. Data recipients will not disclose individual level information received from data providers to any other person or organization, except as explicitly authorized in the applicable data project description and certification.
29. No party to this agreement may disclose to any other party to this agreement any chemical dependence treatment information that is governed by 42 CFR Part 2 in a form that permits it to be linked to an identifiable individual, nor any information that identifies individuals as chemical dependency treatment participants, without the written consent of each individual who is the subject of such data. Additionally, no party to this agreement may disclose to any other party to this agreement any information that identifies an individual's HIV status.

Agency-Specific Provisions

30. *DCJS* can provide criminal history information under the following conditions: *DCJS* can provide aggregate data sets without restriction; can provide identifiable data sets, limited data sets, or de-identified data sets from which sealed cases have been excluded; and can also provide data sets which include sealed cases, dates, and geographic subdivisions, provided that such data sets are otherwise de-identified. *DCJS* can serve as a data recipient and, resources permitting, can match data sets, conduct person-level analyses on matched data sets, and provide matched data sets (either identifiable, limited, or de-identified, as permitted by the laws, rules, and regulations governing data disclosure by *DCJS* and the other parties contributing data to the matched data sets) to other parties to this agreement serving as data recipients, pursuant to applicable data project descriptions.
31. *DOCS* can provide aggregate data sets, de-identified data sets, limited data sets, or identifiable data sets, pursuant to certified data projects that comply in all other respects to the provisions of this agreement. *DOCS* can serve as a data recipient and, resources permitting, can match data sets, conduct person-level analyses on matched data sets, and provide matched data sets (either identifiable, limited, or de-identified, as permitted by the laws, rules, and regulations governing data disclosure by *DOCS* and the other parties contributing data to the matched data sets) to other parties to this agreement serving as data recipients, pursuant to applicable Data Project Descriptions.
32. *DOP* can provide aggregate data sets, de-identified data sets, limited data sets, or identifiable data sets, pursuant to certified data projects that comply in all other respects to the provisions of this agreement. *DOP* can serve as a data recipient and, resources permitting, can match data sets, conduct person-level analyses on matched data sets, and provide matched data sets (either identifiable, limited, or de-identified, as permitted by the laws, rules, and regulations governing data disclosure by *DOP* and the other parties contributing data to the matched data sets) to other parties to this agreement serving as data recipients, pursuant to applicable Data Project Descriptions.
33. *DOH* can provide aggregated data sets but cannot release individual level data (neither identifiable, limited, nor de-identified data sets) for the purposes of TPC analyses. *DOH* can serve as a data recipient for client identifying data and, resources permitting, can match data sets and conduct client level analyses on matched data sets.
34. *DOL* is prohibited by federal and state privacy statutes and regulations from sharing client identifying data without a specific release from each client. However, *DOL* can

serve as a data recipient for client identifying data and, resources permitting, match data sets and conduct client level analyses on matched data sets. Nonetheless, *DOL* is limited to providing only aggregate data and reports, and de-identified data sets, to other parties absent individual specific releases from each client.

35. *DPCA* can provide aggregate data sets from the Integrated Probation Registration System without restriction and other such data sets from which sealed cases have been excluded or de-identified or as otherwise not restricted. It is further understood that any data physically maintained on behalf of *DPCA* by *DCJS* is within *DPCA* control for purposes of this MOU.
36. *OASAS* is prohibited by federal privacy regulations from sharing client identifying data without a specific release from each client. *OASAS* can serve as a data recipient for client identifying data and, resources permitting, match data sets and conduct client level analyses on matched data sets. In the absence of client consent, *OASAS* is limited to providing only aggregate data sets and reports to other parties.
37. *OCFS* may provide, resources permitting, aggregate data sets, de-identified data sets, limited data sets, or identifiable data sets pursuant to certified data projects and, resources permitting, can match data sets, conduct person-level analyses on matched data sets, and provide matched data sets (either identifiable, limited, or de-identified, as permitted by the laws, rules, and regulations governing data disclosure by *OCFS*) to other parties to this agreement serving as data recipients, pursuant to applicable Data Project Descriptions.
38. *OMH* may provide health information in aggregated data sets or de-identified data sets. *OMH* may also provide health information in limited data sets pursuant to a standard Confidentiality and Non-Disclosure Agreement and a Data Exchange Agreement, provided the proposed use of the data is judged by *OMH* to constitute bona fide research. *OMH* can serve as a data recipient for client identifying data and, resources permitting, match data sets and conduct client level analyses on matched data sets.

Request and Certification Procedures

39. Each instance of a need to prepare and analyze a special data set requires a separate data project description and data project certification.
40. One of the parties to this agreement will be designated to serve as the lead agency for each data project, based on the recommendation of the Research and Information Support Team chairperson, with the approval of the Steering Committee representatives from the agencies participating in the data project.
41. The Research and Information Support Team representative from the lead agency will coordinate preparation of the data project description, certification by the parties serving as data providers and data recipients for the data project, construction and maintenance of the necessary data set, and the analyses specified in the data project description.
42. The data project description must include the following elements:
 - a. The purpose of the project and the questions to be addressed by the project;
 - b. A definition of the cohort or sample of cases to be analyzed and an explanation of how cases will be identified and selected;
 - c. Identification of the parties that will serve as data providers and data recipients;

- d. A list of the data elements or explanation of the types of data needed to support the proposed analyses, presented separately for each prospective data provider;
 - e. An explanation of matching criteria and procedures, including matching sequence if more than two data providers will be contributing data;
 - f. A summary of anticipated analyses and products; and
 - g. Designation of the party or parties to conduct analyses.
43. The data project description will be reviewed for feasibility and compliance with the provisions of this agreement by the Research and Information Support Team representatives of the parties designated as data providers and data recipients for the proposed project, drawing on the expertise of other staff in their respective agencies as appropriate.
44. If satisfied that the proposed data project complies with the provisions of this agreement and does not violate the policies of their respective agencies, each Research and Information Support Team representative of the parties designated as data providers and data recipients for the proposed project will sign a certification form, included with this MOU as Attachment A, which
- a. Identifies the parties designated as data providers and data recipients;
 - b. Certifies that the associated data project description conforms in all respects to the requirements for a data project description as specified in this MOU and describes a data project that conforms in all respects to the provisions of this MOU;
 - c. Certifies that individuals for whom case record data are requested are the subjects of bona fide TPC Analyses being conducted or coordinated by the lead agency as described in the associated data project description;
 - d. Certifies that any data obtained by data recipients from data providers will only be used for the purposes described in the associated data project description;
 - e. Includes a summary of the kinds of data requested from each data provider and certifies that the associated data project description includes a specific listing of the data items requested from each data provider.
45. A completed certification form signed by the Research and Information Support Team representatives of the parties designated therein as data providers and data recipients shall constitute authorization to proceed with the data project as described in the associated data project description.

Disclosure of Findings

46. The findings of TPC analyses conducted pursuant to certified data projects will be reviewed by data providers to correct factual errors, misinterpretations of data elements, or misinterpretation of agency policies prior to being disclosed to the Steering Committee or its workgroups.
47. The data exchanged among the agencies that are parties to this agreement may be protected by law, rule or regulation, and the findings of TPC analyses are confidential policy advice to the Steering Committee and its workgroups and will not be disclosed by any party to this agreement to any person or organization that is not party to this agreement without the explicit approval of the TPC Steering Committee and the agencies that contributed data to the analyses.

Term and Termination

48. This agreement shall take effect for each individual party immediately upon signature by that party, and shall remain in effect for each individual party so long as that party remains committed to the TPC data sharing initiative.
49. Each party shall have the right to terminate its participation in this agreement immediately upon written notice to the other parties.
50. This agreement may be modified or amended upon written notice of approval by a majority of members of the TPC Steering Committee and the unanimous written consent of the parties to this agreement.

Signatures

51. In witness whereof, the parties signed this agreement on the day and year appearing opposite their respective signatures.

NEW YORK STATE DIVISION OF CRIMINAL JUSTICE SERVICES

By: _____ Title: _____
Date: _____

NEW YORK STATE DEPARTMENT OF CORRECTIONAL SERVICES

By: _____ Title: _____
Date: _____

NEW YORK STATE DIVISION OF PAROLE

By: _____ Title: _____
Date: _____

NEW YORK STATE DEPARTMENT OF HEALTH

By: _____ Title: _____
Date: _____

NEW YORK STATE DEPARTMENT OF LABOR

By: _____ Title: _____
Date: _____

NEW YORK STATE DIVISION OF HOUSING AND COMMUNITY RENEWAL

By: _____ Title: _____
Date: _____

NEW YORK STATE DIVISION OF PROBATION AND CORRECTIONAL ALTERNATIVES

By: _____ Title: _____
Date: _____

NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES

By: _____ Title: _____
Date: _____

NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

By: _____ Title: _____
Date: _____

NEW YORK STATE OFFICE OF MENTAL HEALTH

By: _____ Title: _____
Date: _____

NEW YORK STATE OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

By: _____ Title: _____
Date: _____

NEW YORK STATE OFFICE OF TEMPORARY AND DISTABILITY ASSISTANCE

By: _____ Title: _____
Date: _____

ATTACHMENT A: CERTIFICATION FORM

Certification by Data Recipients

WHEREAS, the data recipients listed below request permission from the data providers listed below to compile and analyze certain case record information specified in the attached Data Project Description, in accordance with the provisions of the attached “Memorandum of Understanding Concerning Sharing Of Data And Other Data Analysis Resources Among Agencies Participating In The New York State Transition From Prison To Community Initiative” (hereinafter “the MOU”) first executed on <mm/dd/yyyy>;

1. The undersigned data recipients certify that the attached Data Project Description conforms in all respects to the requirements for a Data Project Description as specified in the attached MOU and describes a data project that conforms in all respects with the provisions of the attached MOU;
2. The undersigned further certify that the individuals for whom case record data are requested are the subjects of bona fide TPC Analyses being conducted or coordinated by the Lead Agency as described in the attached Data Project Description;
3. The undersigned further certify that any data obtained from data providers pertaining to the individuals for whom case record data are requested will only be used for the purposes described in the attached Data Project Description;
4. The undersigned further certify that the attached Data Project Description includes a specific listing of the data items requested from each data provider, which listing may be summarized as follows:

<brief paragraph summarizing kinds of data requested to be inserted here>

5. The undersigned further certify that only the appropriate data managers and analysts of the data recipients or their agents will have access to the data, and that the data recipients and their agents will comply in all respects with the procedures, requirements, and conditions specified in the MOU

| Data Recipients | Research and Information Support Team (RIST) | | | Date |
|-----------------|--|-------|-----------|------|
| | Representative | | | |
| | Name | Title | Signature | |
| (Lead Agency) | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

CERTIFICATION FORM (CONTINUED)

Approval by Data Providers

The undersigned agree that the data providers listed herein shall provide the items of case record information specified in the attached Data Project Description, to the extent such items are contained in data providers' files, subject to the terms and conditions of the attached MOU.

| Data Providers | Research and Information Support Team (RIST) | | | Date |
|----------------|--|-------|-----------|------|
| | Representative | | | |
| | Name | Title | Signature | |
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Example 19.

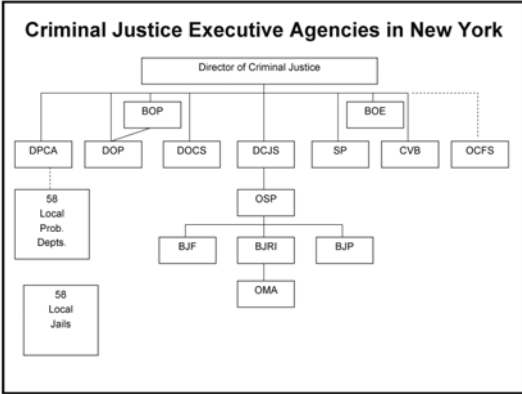
New York Presents an Information Strategy

New York Presents an Information Strategy

Transition from Prison to Community Initiative

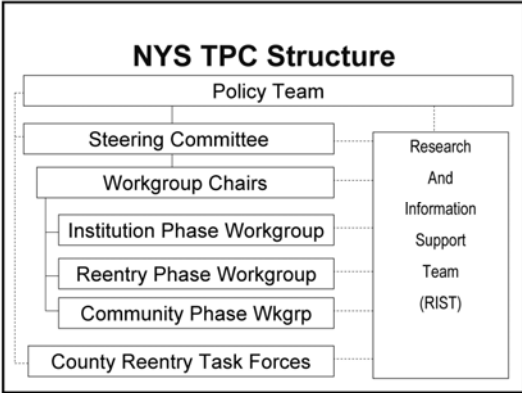
Research and Information Support Team (RIST)

“...a safer New York resulting from the successful transition of offenders from prison to living law-abiding lives in their communities.”



(Abbreviations)

| | |
|--|--|
| DPCA – Division of Probation and Correctional Alternatives DOCS – Department of Correctional Services BOP – Board of Parole DOP – Division of Parole SP – State Police BOE – Board of Examiners (for sex offenders) CVB – Crime Victims Board OCFS – Office of Children and Family Services | DCJS – Division of Criminal Justice Services OSP – Office of Strategic Planning BJF – Bureau of Justice Funding BJP – Bureau of Justice Partnerships BJRI – Bureau of Justice Research and Innovation OMA – Offender Mgt Analysis |
|--|--|



14 Agencies on Steering Committee
(Those in bold italics are represented on the RIST)

Division of Criminal Justice Services
Department of Correctional Services
 Board of Parole
Division of Parole
Department of Health
Department of Labor
Division of Housing and Community Renewal
Office of Alcoholism and Substance Abuse Services
Office of Children and Family Services
Office of Mental Health
Office of Temporary and Disability Assistance
 Office of Mental Retardation and Developmental Disabilities
 Division of Probation and Correctional Alternatives
 Division of the Budget

RIST Functions (Purpose)

- Answer questions from SC and its workgroups
- Proactively provide information the team judges to be relevant to issues being considered by the SC and its workgroups
- Develop data infrastructure to facilitate efficient response to SC and workgroup information needs

RIST Functions (Scope)

- Help Steering Committee and workgroups refine questions
- Design and conduct original statistical analyses of existing data
- Develop interdisciplinary data sets
- Summarize findings from academic literature, government reports, and unpublished research previously conducted by participating agencies
- Contribute to identification of evidence-based programs, policies, and procedures
- Recommend original research and evaluation studies
- Design and oversee monitoring and evaluation of TPC initiatives

Early Efforts (Preparations)

- Reviewed relevant data maintained by participating agencies
- Reviewed participating agencies' data sharing policies and procedures
- Drafted "charter"
 - Purpose and Scope
 - RIST procedures

Instructive Example: Eligibility and Utilization for Medicaid, Food Stamps, and Temporary Assistance

- Core question: Are there long delays in establishing eligibility for Medicaid, food stamps, and temporary (cash) assistance for reentering offenders, which if so would delay delivery of services?
- To answer the question requires combining individual level data from three participating agencies:
 - DOCS data to identify cohort of individuals released in 2003
 - OTDA data to analyze food stamp and temporary assistance eligibility
 - DOH data to analyze Medicaid eligibility and service utilization
- Barriers
 - DCJS had staff who could be assigned the analyses immediately, but
 - DOH could not share Medicaid data for this particular purpose
 - OTDA had access to some of DOH data, but only for a specified purpose
- Solution
 - DOCS defined cohort; passed identifiers to OTDA
 - OTDA matched to TA and FS data; forwarded combined file to DCJS for analysis; forwarded identifiers and matched "links" to DOH
 - DOH completed match and conducted Medicaid analysis; DCJS conducted TA and FS analyses
- (Oh, by the way, the answer appears to be "not attributable to eligibility processing system")

Lessons Learned

- Medicaid project took months; if the normal processes have to be repeated separately for each analysis, the work of the Steering Committee and its workgroups will be repeatedly and substantially delayed
- Analyses often can be completed quickly, once the relevant data have been compiled and prepared for analysis. The sources of greatest delay are
 - Preparing, reviewing, and approving requests for access to data
 - Matching records from two or more sources

An Overarching MOU

- Authorize the creation of a "TPC Core Data Base," incorporating individual-level data from DOCS, DOP, and DCJS for selected "cohorts"
- Establish a "certification process" whereby construction of additional data sets can be authorized for TPC purposes without executing separate MOUs for each instance
- Authorize "pre-matching" personal identifiers in the Core Data Base with internal data base identifiers in participating agencies' data systems.
- (See handout for additional details)

Examples of RIST Projects

- Review of criminogenic risk/need factors
- Population analyses
 - Preliminary analysis presented to SC (core data)
 - Expanded analysis under development (interdisciplinary)
 - County (aggregate) profiles under development
- Development of interim risk score (mostly static factors)
 - Demonstration of feasibility and validity for SC
 - Refinements under development for use by County RTFs?
- Literature reviews re: "best practices" for employment programs, SA and MH treatment, housing, and family reunification; perhaps cognitive-behavioral interventions
- Later:
 - Individual, interdisciplinary inmate profiles?
 - Practitioner surveys?
 - Performance indicators?

Example 20.

Oregon's Legislation Requiring Evidence-Based Practice

Enrolled Senate Bill 267

Sponsored by COMMITTEE ON JUDICIARY (at the request of AFSCME Council 75)

CHAPTER

AN ACT

Relating to public safety; creating new provisions; amending ORS 181.620 and 181.637; and declaring an emergency.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 181.620 is amended to read:

181.620. (1) The Governor shall appoint a Board on Public Safety Standards and Training consisting of [23] **24** members as follows:

- (a) Two members shall be chiefs of police recommended to the Governor by the Oregon Association of Chiefs of Police;
- (b) One member shall be a sheriff recommended to the Governor by the Oregon State Sheriffs' Association;
- (c) One member shall be a fire chief recommended to the Governor by the Oregon Fire Chiefs' Association;
- (d) One member shall be a representative of the fire service recommended to the Governor by the Oregon Fire District Directors' Association;
- (e) One member shall be a member of the Oregon State Fire Fighter's Council recommended to the Governor by the executive body of the council;
- (f) One member shall be a representative of corrections personnel recommended to the Governor by the Oregon State Sheriffs' Association;
- (g) One member shall be a representative of the fire service recommended to the Governor by the Oregon Volunteer Fire Fighters' Association;
- (h) One member shall be a representative of public safety telecommunicators;
- (i) One member shall be a district attorney recommended to the Governor by the Oregon District Attorneys Association;
- (j) One member shall be the Superintendent of State Police;
- (k) One member shall be the Chief of the Portland Police Bureau;
- (L) One member shall be the State Fire Marshal;
- (m) One member shall be the Chief of the Portland Fire Bureau;
- (n) One member shall be the Director of the Department of Corrections;
- (o) One member shall be the Special Agent in Charge of the Federal Bureau of Investigation for Oregon;
- (p) One member shall represent forest protection agencies recommended to the Governor by the State Forestry Department;
- (q) One member shall be an administrator of a municipality recommended to the Governor by the executive body of the League of Oregon Cities;
- (r) Two members shall be nonmanagement representatives of law enforcement;
- (s) One member shall be a public member. A person appointed as a public member under this section shall be a person:

- (A) Who has no personal interest or occupational responsibilities in the area of responsibility given to the board; and
- (B) Who represents the interests of the public in general; *[and]*
- (t) Two members shall be representatives of the private security industry recommended to the Governor by the Advisory Committee on Private Security Services; **and**
- (u) One member shall be a representative of the collective bargaining unit that represents the largest number of individual workers in the Department of Corrections.**
- (2) The term of office of a member is three years, and no member may be removed from office except for cause. Before the expiration of the term of a member, the Governor shall appoint the member's successor to assume the member's duties on July 1 next following. In case of a vacancy for any cause, the Governor shall make an appointment, effective immediately, for the unexpired term.
- (3) Except for members who serve by virtue of office, no member shall serve more than two terms. For purposes of this subsection, a person appointed to fill a vacancy consisting of an unexpired term of at least one and one-half years has served a full term.
- (4) Appointments of members of the board by the Governor, except for those members who serve by virtue of office, are subject to confirmation by the Senate in the manner provided in ORS 171.562 and 171.565.
- (5) A member of the board is entitled to compensation and expenses as provided in ORS 292.495.

SECTION 2. ORS 181.637 is amended to read:

- 181.637. (1) The Board on Public Safety Standards and Training shall establish the following policy committees:
- (a) Corrections Policy Committee;
 - (b) Fire Policy Committee;
 - (c) Police Policy Committee; and
 - (d) Telecommunications Policy Committee.
- (2) The members of each policy committee shall select a chairperson and vice chairperson for the policy committee. Only members of the policy committee who are also members of the board are eligible to serve as a chairperson or vice chairperson. The vice chairperson may act as chairperson in the absence of the chairperson.
- (3) The Corrections Policy Committee consists of:
- (a) All of the board members who represent the corrections discipline;
 - (b) The chief administrative officer of the training division of the Department of Corrections;
 - (c) A security manager from the Department of Corrections; and
 - (d) The following, who may not be current board members, appointed by the chairperson of the board:
 - (A) One person recommended by and representing the Oregon State Sheriffs' Association;
 - (B) Two persons recommended by and representing the Oregon Jail Managers' Association;
 - (C) One person recommended by and representing a statewide association of community corrections directors; *[and]*
 - (D) One nonmanagement corrections officer employed by the Department of Corrections; **and**
 - (E) One corrections officer who is a female, who is employed by the Department of Corrections at a women's correctional facility and who is a member of a bargaining unit.**
- (4) The Fire Policy Committee consists of:
- (a) All of the board members who represent the fire service discipline; and
 - (b) The following, who may not be current board members, appointed by the chairperson of the board:
 - (A) One person recommended by and representing a statewide association of fire instructors;
 - (B) One person recommended by and representing a statewide association of fire marshals;
 - (C) One person recommended by and representing community college fire programs; and
 - (D) One nonmanagement firefighter recommended by a statewide organization of firefighters.
- (5) The Police Policy Committee consists of:
- (a) All of the board members who represent the law enforcement discipline; and
 - (b) The following, who may not be current board members, appointed by the chairperson of the board:
 - (A) One person recommended by and representing the Oregon Association of Chiefs of Police;

- (B) Two persons recommended by and representing the Oregon State Sheriffs' Association;
- (C) One command officer recommended by and representing the Oregon State Police; and
- (D) One nonmanagement law enforcement officer.
- (6) The Telecommunications Policy Committee consists of:
 - (a) All of the board members who represent the telecommunications discipline; and
 - (b) The following, who may not be current board members, appointed by the chairperson of the board:
 - (A) Two persons recommended by and representing a statewide association of public safety communications officers;
 - (B) One person recommended by and representing the Oregon Association of Chiefs of Police;
 - (C) One person recommended by and representing the Oregon State Police;
 - (D) Two persons representing telecommunications;
 - (E) One person recommended by and representing the Oregon State Sheriffs' Association;
 - (F) One person recommended by and representing the Oregon Fire Chiefs' Association;
 - (G) One person recommended by and representing the Emergency Medical Services and Trauma Systems Program of the Department of Human Services; and
 - (H) One person representing paramedics and recommended by a statewide association dealing with fire medical issues.
- (7) In making appointments to the policy committees under this section, the chairperson of the board shall seek to reflect the diversity of the state's population. An appointment made by the chairperson of the board must be ratified by the board before the appointment is effective. The chairperson of the board may remove an appointed member for just cause. An appointment to a policy committee that is based on the member's employment is automatically revoked if the member changes employment. The chairperson of the board shall fill a vacancy in the same manner as making an initial appointment. The term of an appointed member is two years. An appointed member may be appointed to a second term.
- (8) A policy committee may meet at such times and places as determined by the policy committee in consultation with the board. A majority of a policy committee constitutes a quorum to conduct business. A policy committee may create subcommittees if needed.
- (9)(a) Each policy committee shall develop policies, requirements, standards and rules relating to its specific discipline. A policy committee shall submit its policies, requirements, standards and rules to the board for the board's consideration. When a policy committee submits a policy, requirement, standard or rule to the board for the board's consideration, the board shall:
 - (A) Approve the policy, requirement, standard or rule;
 - (B) Disapprove the policy, requirement, standard or rule; or
 - (C) Defer a decision and return the matter to the policy committee for revision or reconsideration.
- (b) The board may defer a decision and return a matter submitted by a policy committee under paragraph (a) of this subsection only once. If a policy, requirement, standard or rule that was returned to a policy committee is resubmitted to the board, the board shall take all actions necessary to implement the policy, requirement, standard or rule unless the board disapproves the policy, requirement, standard or rule.
- (c) Disapproval of a policy, requirement, standard or rule under paragraph (a) or (b) of this subsection requires a two-thirds vote by the members of the board.
- (10) At any time after submitting a matter to the board, the chairperson of the policy committee may withdraw the matter from the board's consideration.

SECTION 3. As used in this section and section 7 of this 2003 Act:

- (1) "Agency" means:
 - (a) The Department of Corrections;
 - (b) The Oregon Youth Authority;
 - (c) The State Commission on Children and Families;
 - (d) That part of the Department of Human Services that deals with mental health and addiction issues; and
 - (e) The Oregon Criminal Justice Commission.
- (2) "Cost effective" means that cost savings realized over a reasonable period of time are greater than costs.
- (3) "Evidence-based program" means a program that:

- (a) Incorporates significant and relevant practices based on scientifically based research; and
- (b) Is cost effective.
- (4)(a) “Program” means a treatment or intervention program or service that is intended to:
 - (A) Reduce the propensity of a person to commit crimes;
 - (B) Improve the mental health of a person with the result of reducing the likelihood that the person will commit a crime or need emergency mental health services; or
 - (C) Reduce the propensity of a person who is less than 18 years of age to engage in antisocial behavior with the result of reducing the likelihood that the person will become a juvenile offender.
- (b) “Program” does not include:
 - (A) An educational program or service that an agency is required to provide to meet educational requirements imposed by state law; or
 - (B) A program that provides basic medical services.
- (5) “Scientifically based research” means research that obtains reliable and valid knowledge by:
 - (a) Employing systematic, empirical methods that draw on observation or experiment;
 - (b) Involving rigorous data analyses that are adequate to test the stated hypotheses and justify the general conclusions drawn; and
 - (c) Relying on measurements or observational methods that provide reliable and valid data across evaluators and observers, across multiple measurements and observations and across studies by the same or different investigators.

SECTION 4. As used in sections 5 and 6 of this 2003 Act, “agency,” “cost effective,” “evidence-based program” and “program” have the meanings given those terms in section 3 of this 2003 Act.

SECTION 5. (1) For the biennium beginning July 1, 2005, the Department of Corrections, the Oregon Youth Authority, the State Commission on Children and Families, that part of the Department of Human Services that deals with mental health and addiction issues and the Oregon Criminal Justice Commission shall spend at least 25 percent of state moneys that each agency receives for programs on evidence-based programs.

- (2) Each agency shall submit a report containing:
 - (a) An assessment of each program on which the agency expends funds, including but not limited to whether the program is an evidence-based program;
 - (b) The percentage of state moneys the agency receives for programs that is being expended on evidence-based programs;
 - (c) The percentage of federal and other moneys the agency receives for programs that is being expended on evidence-based programs; and
 - (d) A description of the efforts the agency is making to meet the requirements of subsection (1) of this section and sections 6 (1) and 7 (1) of this 2003 Act.
- (3) The agencies shall submit the reports required by subsection (2) of this section no later than September 30, 2006, to the interim legislative committee dealing with judicial matters.
- (4) If an agency, during the biennium beginning July 1, 2005, spends more than 75 percent of the state moneys that the agency receives for programs on programs that are not evidence based, the Legislative Assembly shall consider the agency’s failure to meet the requirement of subsection (1) of this section in making appropriations to the agency for the following biennium.
- (5) Each agency may adopt rules necessary to carry out the provisions of this section, including but not limited to rules defining a reasonable period of time for purposes of determining cost effectiveness.

SECTION 6. (1) For the biennium beginning July 1, 2007, the Department of Corrections, the Oregon Youth Authority, the State Commission on Children and Families, that part of the Department of Human Services that deals with mental health and addiction issues and the Oregon Criminal Justice Commission shall spend at least 50 percent of state moneys that each agency receives for programs on evidence-based programs.

- (2) Each agency shall submit a report containing:
 - (a) An assessment of each program on which the agency expends funds, including but

- not limited to whether the program is an evidence-based program;
- (b) The percentage of state moneys the agency receives for programs that is being expended on evidence-based programs;
- (c) The percentage of federal and other moneys the agency receives for programs that is being expended on evidence-based programs; and
- (d) A description of the efforts the agency is making to meet the requirements of subsection (1) of this section and section 7 (1) of this 2003 Act.
- (3) The agencies shall submit the reports required by subsection (2) of this section no later than September 30, 2008, to the interim legislative committee dealing with judicial matters.
- (4) If an agency, during the biennium beginning July 1, 2007, spends more than 50 percent of the state moneys that the agency receives for programs on programs that are not evidence based, the Legislative Assembly shall consider the agency's failure to meet the requirement of subsection (1) of this section in making appropriations to the agency for the following biennium.
- (5) Each agency may adopt rules necessary to carry out the provisions of this section, including but not limited to rules defining a reasonable period of time for purposes of determining cost effectiveness.

SECTION 7. (1) The Department of Corrections, the Oregon Youth Authority, the State Commission on Children and Families, that part of the Department of Human Services that deals with mental health and addiction issues and the Oregon Criminal Justice Commission shall spend at least 75 percent of state moneys that each agency receives for programs on evidence-based programs.

- (2) Each agency shall submit a biennial report containing:
 - (a) An assessment of each program on which the agency expends funds, including but not limited to whether the program is an evidence-based program;
 - (b) The percentage of state moneys the agency receives for programs that is being expended on evidence-based programs;
 - (c) The percentage of federal and other moneys the agency receives for programs that is being expended on evidence-based programs; and
 - (d) A description of the efforts the agency is making to meet the requirement of subsection (1) of this section.
- (3) The agencies shall submit the reports required by subsection (2) of this section no later than September 30 of each even-numbered year to the interim legislative committee dealing with judicial matters.
- (4) If an agency, in any biennium, spends more than 25 percent of the state moneys that the agency receives for programs on programs that are not evidence based, the Legislative Assembly shall consider the agency's failure to meet the requirement of subsection (1) of this section in making appropriations to the agency for the following biennium.
- (5) Each agency may adopt rules necessary to carry out the provisions of this section, including but not limited to rules defining a reasonable period of time for purposes of determining cost effectiveness.

SECTION 8. The provisions of section 7 of this 2003 Act apply to biennia beginning on or after July 1, 2009.

SECTION 9. (1) As used in this section, "agency," "evidence-based program" and "program" have the meanings given those terms in section 3 of this 2003 Act.

- (2) Each agency shall conduct an assessment of existing programs and establish goals that enable the agency to meet the requirements of sections 5 (1), 6 (1) and 7 (1) of this 2003 Act. Each agency shall work with interested persons to establish the goals and to develop a process for meeting the goals.
- (3) No later than September 30, 2004, each agency shall submit a report containing:
 - (a) An assessment of each program on which the agency expends funds, including but not limited to whether the program is an evidence-based program;
 - (b) The percentage of state moneys the agency receives for programs that is being expended on evidence-based programs;

- (c) The percentage of federal and other moneys the agency receives for programs that is being expended on evidence-based programs; and
- (d) A description of the efforts the agency is making to meet the requirements of sections 5 (1), 6 (1) and 7 (1) of this 2003 Act.

SECTION 10. This 2003 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2003 Act takes effect on its passage.

Passed by Senate March 5, 2003

Received by Governor:

.....M.,....., 2003

Repassed by Senate July 24, 2003

Approved:

.....M.,....., 2003

.....
Secretary of Senate

.....
President of Senate

.....
Governor

Passed by House June 24, 2003

Filed in Office of Secretary of State:

Repassed by House July 29, 2003

.....M.,..... 2003

.....
Speaker of House

.....
Secretary of State

Example 21. Indiana's Gap Analysis and Targets of Change

INDIANA OFFENDER REINTEGRATION PROJECT ***First Report: Laying the Foundation***

Overview

The State of Indiana was selected by the National Institute of Corrections (NIC) to participate in the model reentry project titled, “Transition from Prison to Community Initiative” (TPC). Indiana’s Offender Reintegration Project (IORP) is based on the TPC model. IORP is designed to promote successful offender community reintegration upon release from prison by employing research-based practices in a case management approach to effectively address offender risks and needs while protecting public safety. This public safety-focused model is “. . . organized around identifying factors that put offenders at increased risk of recidivism, and engaging those offenders in treatment, programming, or supervision strategies that modify those factors, thereby lowering their odds of committing crimes after release.”

Indiana’s Offender Reintegration Project represents a substantial shift in criminal justice practices based on proven methods for ending the cycle of recidivism. IORP promotes collaborative efforts to help offenders return to their communities as productive citizens. Through the project, state and local agencies, organizations, and businesses will join forces to identify and provide the unique combination of services needed to successfully guide these men and women as they leave the criminal justice system and return home.

The goals of the Indiana Offender Reintegration Project are to promote public safety *and* reduce recidivism.

Analysis Findings and Recommendations

The Steering Committee for Indiana’s Offender Reintegration Project conducted a “gap analysis” to compare Indiana’s current policies and practices related to the transition from prison to community to a National Institute of Corrections’ model for offender reentry. Work Groups comprised of Steering Committee members were formed to answer strategic planning questions in each of the seven functional areas potentially requiring reform based on the model. Recommendations stemming from Indiana’s gap analysis are:

1. Resource allocation must be focused on offenders who are at highest risk to re-offend and pose the greatest threat to public safety upon release.
2. Develop a system for sharing information among the various components of the criminal justice system and its community partners to obtain comprehensive and timely offender information.
3. Enhance and implement comprehensive procedures to systematically assess offender security risk level and program/treatment/service needs upon admission to the Department of Correction.

4. Ensure each offender is housed in the most appropriate custody level while maintaining access to programs and services needed to reduce recidivism upon release.
5. Periodically update offender assessments, including prior to release from prison.
6. Develop Transition Accountability Plans (TAP; i.e., an offender's reintegration plan) for all offenders upon admission to the Department of Correction.
7. Identify justice system and community stakeholders to be involved in the development of the TAP and create procedures for this interdisciplinary work.
8. TAP must be based on comprehensive assessments of offender risk, background, criminal history, treatment/program/service needs, etc.
9. The TAP should be used as a guide or blueprint for the treatment, programs, and /services an offenders needs, beginning in the correctional setting.
10. The TAP should be considered as an evolving blueprint and should be updated as necessary based on new assessments and information about the progress of intervention efforts.
11. TAP programs should (a) be research-based and positively affect factors which lead to recidivism upon release, (b) address identified dynamic risk factors, and (c) employ standardized curricula system-wide.
12. Identify staff responsible for implementation of the TAP when an offender is under correctional custody.
13. Establish rewards and sanctions to hold offenders accountable to the TAP (both in prison and upon release to the community).
14. Establish procedures to transition the TAP from the Department of Correction to the community when an offender is released.
15. Identify parties responsible for implementation of the TAP when an offender is released into the community.
16. Review existing laws, rules, and administrative practices which might bar offenders from basic needs (e.g., employment) and services (e.g., welfare benefits).
17. The TAP should be considered as an evolving blueprint and should be updated as necessary based on new assessments and information about the progress of community intervention efforts.
18. Community supervision levels and services should follow from the TAP.
19. Identify staff responsible for implementation of community supervision responsibilities under the TAP.
20. Examine programs currently being offered in communities to ensure (a) that they are research-based and sustain reductions in recidivism upon release and (b) enhance

community capacity to achieve baseline programs and services needed by offenders (e.g., housing, jobs, food, mental/medical health, substance abuse, etc.).

21. Develop performance-based accountability procedures for community providers offering programs and treatment to offenders who are still under the jurisdiction of the justice system.
22. Develop standardized responses (i.e., sanctions and rewards) for TAP violations and accomplishments.
23. Tie responses to violations and accomplishments to the TAP.
24. Develop a standardized process for early discharge from community supervision based on demonstrated reduction in dynamic risk factors.
25. Establish a process to transition responsibility for post-discharge activities to the ex-offender and the community.

THE TPC MODEL: ASSESSMENT AND CLASSIFICATION

Assessment occurs soon after offenders are admitted to prison and is the process by which information is obtained about offenders that is needed to make decisions about their placement, management, and programming while confined, and about the timing and conditions of their release to the community. Assessments are used to measure offenders' risk of engaging in behaviors of concern (e.g., escape while confined, recidivism after release, etc.) or the presence of specific strengths or deficits. Different assessments are used for measuring different aspects of offenders' strengths or needs. Instruments used to predict risk of recidivism should be empirically based, validated on the population of offenders to which they will be applied, and should rely on objective and uniformly accessible variables.

Classification is the process whereby correctional institutions use information about offenders to make decisions about the conditions under which they will be confined. Classification decisions focus on such things as inmate's custody level and specific housing assignment. Those decisions, in turn, strongly affect the transition process—for example, offenders may be unable to enter a vocational training program (needed to lower a dynamic risk factor—lack of employable skills) until they are transferred to a lower custody level.

Under the TPC both assessment and classification are conceived to be continuous—or at least, periodic and reiterative—processes. Offenders are re-assessed to determine their progress on mitigating dynamic risk factors. They are re-classified to determine if their custody levels should be modified based on their conduct and behavior in their current custody level.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

Systematic dynamic risk assessment is not currently conducted upon intake to prison with one exception—the LSI-R (Level of Service Inventory-Revised) is used to assess risk factors among male youth incarcerated as adults. Some dynamic risk factors are assessed either upon intake to the prison system or at an assigned facility, such as educational needs, mental health needs, medical needs, substance abuse and sex offender identification. The department is currently developing risk assessment instruments to be used upon admission to and prior to release from prison.

The department currently employs a classification assessment tool to determine appropriate facility placement during an offender's period of incarceration. An offender's classification assessment is reviewed, at a minimum, on an annual basis. The department's classification assessment tool and process are currently being revised.

Some dynamic risk factors may be continually assessed in response to specific problems or as the offender progresses through applicable program components. Individualized treatment based on an offender-specific case management plan does not currently occur. The department is currently designing a case management approach to offender management.

Steering Committee Recommendations

1. Enhance and implement comprehensive procedures to systematically assess offender security risk level and program/treatment/service needs upon admission to the Department of Correction.
2. Ensure each offender is housed in the most appropriate custody level while maintaining access to programs and services needed to reduce recidivism upon release.
3. Periodically update offender assessments, including prior to release from prison.

THE TPC MODEL: TRANSITION ACCOUNTABILITY PLANS (TAP)

The Transition Accountability Plan (TAP) integrates offenders' transition from prisons to communities by spanning phases in the transition process and agency boundaries. The TAP is a collaborative product involving prison staff, the offender, the releasing authority, community supervision officers, human services providers (public and/or private), victims, and neighborhood and community organizations. The TAP describes actions that must occur to prepare individual offenders for release from prison, defines terms and conditions of their release to communities, specifies the supervision and services they will experience in the community, and describes their eventual discharge to aftercare upon successful completion of supervision. The objective of the TAP is to increase both overall community protection by lowering risk to persons and property and by increasing individual offender's prospects for successful return to and self-sufficiency in the community.

The TAP process begins soon after offenders enter prison and continues during their terms of confinement, through their release from prison, and continues after their discharge from community supervision as an evolving framework for aftercare provided by human service agencies or other means of self-help and support. At each step along this continuum, the TAP is administered by a Transition Management Team, whose members include prison staff, parole supervision staff, and community agencies and service providers. The membership of the Transition Management Team and their respective roles and responsibilities will change over time. During the institutional phase prison staff may lead the team. During the reentry and community supervision phase parole officers may lead the team. During the reintegration phase human services agencies or community services providers may lead the team. After offenders have successfully completed community supervision, their TAP may continue and be managed by staff of human services agencies, if the former offender chooses to continue to seek and receive services or support. At each stage in the process Team members will use a case management model to monitor progress in implementing the plan.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

Individual offender programming and treatment based on a case management/accountability plan is not currently systematically employed by the Department of Correction. Current department procedures and programs that are consistent with the development of a TAP include risk assessment (as noted above); the Adult Program Management Data System; intake classification procedures and annual reviews of offender classification; the department's Transition Program, and parole release procedures; calculation of Earliest Projected Release Dates; and the Victim/Witness Notification Program.

Steering Committee Recommendations

1. Develop Transition Accountability Plans (TAP; i.e., an offender's reintegration plan) for all offenders upon admission to the Department of Correction.
2. Identify justice system and community stakeholders to be involved in the development of the TAP and create procedures for this interdisciplinary work.
3. TAP must be based on comprehensive assessments of offender risk, background, criminal history, treatment/program/service needs, etc.
4. The TAP should be used as a guide or blueprint for the treatment, programs, and /services an offenders needs, beginning in the correctional setting.
5. The TAP should be considered as an evolving blueprint and should be updated as necessary based on new assessments and information about the progress of intervention efforts.
6. TAP programs should (a) be research-based and positively affect factors which lead to recidivism upon release, (b) address identified dynamic risk factors, and (c) employ standardized curricula system-wide.
7. Identify staff responsible for implementation of the TAP when an offender is under correctional custody.
8. Establish rewards and sanctions to hold offenders accountable to the TAP (both in prison and upon release to the community).

THE TPC MODEL: RELEASE FROM PRISON TO THE COMMUNITY

The model requires that jurisdictions establish target release dates for inmates early in their terms of imprisonment. The target release date is the benchmark around which elements of the Transition Accountability Plan are arranged.

Target release dates should be established for individual inmates using processes that are fair, objective, equitable, and based on rational policy objectives (e.g., to impose just punishment, to protect public safety). The public and policy makers should understand that effective transition does not thwart Justice, but occurs after Justice has been served.

Releasing authorities can establish target release dates by release guidelines or by policy statements applicable to general categories of inmates. We recommend that states develop and use structured release guidelines that incorporate validated risk-prediction instruments, and that permit policy-guided overrides for exceptional cases.

We recommend that the corrections agency, releasing authority, and supervision agency have a consistent—even congruent—approach to risk assessment and risk management. Ideally, the partners in the transition process would use the same assessment instruments to predict risk of recidivism. This will reduce duplication and promote a consistent approach to risk management across agencies. If a common risk instrument is not possible, the agencies should use generically similar information to assess offenders' risk.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

For a vast majority of Indiana's incarcerated offenders, the Earliest Projected Release Date (EPRD) is statutorily determined by the length of the determinate sentence, the number of days incarcerated, and credit time earned. Offenders who are serving an indeterminate sentence under Indiana's old criminal code, are released based on the number of days incarcerated and upon review by Indiana's Parole Board. Based on county participation and judicial approval, offenders also may be released 60 to 180 days prior to their EPRD under the Community Transition Program.

Steering Committee Recommendations

1. Establish procedures to transition the TAP from the Department of Correction to the community when an offender is released.
2. Identify parties responsible for implementation of the TAP when an offender is released into the community.
3. Review existing laws, rules, and administrative practices which might bar offenders from basic needs (e.g., employment) and services (e.g., welfare benefits).

THE TPC MODEL: SUPERVISION AND SERVICES IN THE COMMUNITY

In the community phase, the model proposes that supervision should be structured around a case management model. The case manager should develop a case plan for each offender, which shows how the community-phase of the offender's TAP will be implemented. The case management model we envision is consistent with the enforcement of elements of the TAP related to public safety. Case management should strive for parsimony, by allocating high-cost responses, interventions and services to offenders who pose the greatest risk.

The case plan is the foundation for monitoring each offender's progress in the community, to intervene when needed, to advocate on behalf of those affected by the case plan, and to refer offenders to service providers as required.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

Supervision conditions are generally the sole means by which offender management in the community phase is individualized based on offender need. The Department of Correction's Sex Offender Monitoring and Management program utilizes a case plan in a containment team structure during the community supervision phase, but offender assessment and case planning does not currently occur for all offenders during community supervision. The LSI-R (Level of Service Inventory-Revised) is used on a limited basis by certified parole agents. Each parole district has a staff Substance Abuse Counselor who develops a case plan in conjunction with the parole agent to monitor substance abuse. Parole has an electronic program designed to track and maintain individual parolee information.

Accountability is achieved through community supervision conditions and is enforced when violations are detected. Positive reinforcement occurs within the supervision options available (both in intensity of supervision and the conditions imposed), and on an officer-by-officer basis.

Very little formal advocacy occurs on behalf of the offender though this varies from field officer to field officer. Community supervision agencies actively seek community services based on offender need. Little or no proactive advocacy occurs on behalf of victims and other members of the community.

Referrals (i.e., connecting offenders with appropriate community services) are made on a case-by-case basis depending on offender need, the availability of programs and services in the community, and the case officer involved.

Steering Committee Recommendations

1. The TAP should be considered as an evolving blueprint and should be updated as necessary based on new assessments and information about the progress of community intervention efforts.
2. Community supervision levels and services should follow from the TAP.
3. Identify staff responsible for implementation of community supervision responsibilities under the TAP.
4. Examine programs currently being offered in communities to ensure (a) that they are research-based and sustain reductions in recidivism upon release and (b) enhance community capacity to achieve baseline programs and services needed by offenders (e.g., housing, jobs, food, mental/medical health, substance abuse, etc.).
5. Develop performance-based accountability procedures for community providers offering programs and treatment to offenders who are still under the jurisdiction of the justice system.

THE TPC MODEL: RESPONSE TO VIOLATIONS AND ACCOMPLISHMENTS WHILE ON COMMUNITY SUPERVISION

States should develop structured policies to govern responses to offenders when they violate conditions of release as well as when they have significant positive accomplishments.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

Probation, parole, and community corrections utilize many of the same responses to violations, including, reprimands/counseling, increased drug testing, more frequent reporting requirements, residence searches, administrative hearings, modification of conditions, revocations, etc. While this list represents a continuum of graduated sanctions, most jurisdictions do not have formal sanctioning guidelines. Proportional sanctioning is available but utilization is. In general, responses to violations are not uniformly handled from jurisdiction to jurisdiction.

The use of a continuum of rewards for accomplishments while on community supervision is less widespread and uniform than responses to violations. Current practices in rewarding positive community adjustment include a decrease in the level of supervision, a decrease in the frequency of reporting requirements, placement in a less restrictive environment, early discharge and rewards such as bus passes, employment and education programs, etc.

Steering Committee Recommendations

1. Develop standardized responses (i.e., sanctions and rewards) for TAP violations and accomplishments.
2. Tie responses to violations and accomplishments to the TAP.

THE TPC MODEL: DISCHARGE FROM COMMUNITY SUPERVISION

Just as release from prison gives inmates an incentive for good behavior and addressing risk-related problems, so discharge from supervision gives offenders incentive to conform to the terms and conditions of their release from supervision. In addition, discharge signals the end of supervision—the end of the active portion of the criminal sanction—and the beginning of a formal re-integration of offenders into the body of civil society.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

By statute, a majority of offenders released from the Department of Correction are on parole for two years unless discharged earlier. Certain sex offenders may remain on parole for up to 10 years. Probationers are on community supervision for the length of their suspended sentence unless they are discharged earlier. The conditions under which offenders are discharged from community supervision are not currently based on standardized responses to demonstrated reductions in risk.

Steering Committee Recommendation

1. Develop a standardized process for early discharge from community supervision based on demonstrated reduction in dynamic risk factors.

THE TPC MODEL: AFTERCARE AND SERVICES FOLLOWING RELEASE FROM COMMUNITY SUPERVISION

The transition process seeks to produce offenders who are law-abiding citizens with the strengths and skills to successfully manage the problems they will face daily. However, as with citizens generally, . . . offenders [discharged from community supervision] may require assistance and services from human service agencies. The offender's TAP contains a framework to guide human service providers, as well as a wealth of information they might need to respond to requests for assistance from the offender.

The TAP process begins soon after offenders enter prison and continues during their terms of confinement, through their release from prison, and continues after their discharge from supervision as an evolving framework for aftercare provided by human service agencies or other means of self-help and support. . . After offenders have successfully completed community supervision, their TAP may continue and be managed by staff of human services agencies, if the former offender chooses to continue to seek and receive services or support.

The discharge phase begins when the offender's sentence ends or when officials make a discretionary choice to end community supervision. In this phase it is the responsibility of the former offender, human services providers, and the former offender's network of community supports, linkages, and mentors to continue relevant aspects of the TAP during the period of aftercare.

Source: National Institute of Corrections Transition from Prison to Community Initiative Manual

Gap Analysis Findings: Current Practices In Indiana

Very little is known about offenders once they are discharged from their obligation to the criminal justice system. The justice system no longer has legal authority over the individual and, for the most part, no further monitoring or follow-up is undertaken.

Steering Committee Recommendation

1. Establish a process to transition responsibility for post-discharge activities to the ex-offender and the community.

CRITICAL NEXT STEPS

1. The following work groups led by Steering Committee members and comprised of subject matter experts will be formed to develop action plans for implementation of the recommendations presented in this report: Community Resource Work Group, Community Supervision Work Group, Personnel Work Group, and Technology Work Group.
2. Three existing Steering Committee Work Groups also will develop action plans to implement recommendations: Adult Case Management Work Group, Employment Work Group, and Risk and Needs Assessment Task Force.
3. Steering Committee activities will be coordinated as necessary with other key groups such as the Department of Correction's IORP Implementation Team and the Indiana General Assembly.
4. Work group progress toward implementation of approved recommendations and critical next steps will be presented to the Policy Group on January 14, 2020.

Example 22. Georgia's Targets of Change

Georgia Reentry Impact Project

Recommendations

The Policy Team studied nine phases of offender reentry and developed the following three core recommendations:

1. Implement better interagency electronic communications as outlined by the interagency information technology working group to improve continuity and accountability for offender reentry. Utilize emerging XML technologies to develop a single repository and source for offender data that is accessible to all partner agencies. Overcome barriers (including HIPAA requirements) to sharing offender information with other pertinent agencies and community partners.
2. Develop and implement an automated assessment instrument that identifies an offender's risk to re-offend, as well as the offender's crime-producing factors and behaviors. This instrument will drive offender placement into evidence-based interventions. Task the criminal justice information technology interagency sharing group with reviewing existing electronic systems and determining information that can be shared and a timeline for sharing the information.
3. Driven by recommendations derived by the automated assessment instrument, a Transition Accountability Plan (TAP) should be developed as a pre-sentence investigation and will follow the offender through the criminal justice system from sentencing (or entry into the prison) to reentry into the community. The TAP will include critical pre-entry and reentry issues that are relevant for release planning (i.e. housing, disability, substance abuse, physical and mental health, employment, education, family and community supports). The TAP should be updated continually as needed and should take the place of a release-planning document. The TAP should be available electronically. The TAP should create a seamless system between institutional and community service providers to swiftly assess and treat the crime-producing behaviors of offenders.

I. SENTENCING

1. Authorize a pre-sentence investigation workgroup to review current sentencing practices; implement a criminogenic risk and needs based, victim

restoration and family/community pro-social supports assessment, and provide this information to judges prior to sentencing.

2. Review and recommend modifications to existing mandatory sentencing laws to accommodate community-based alternatives to prison, and a period of community supervision after release from incarceration.
3. Authorize a workgroup to examine utilization of existing sentencing alternatives and diversionary facilities, including specialty courts (mental health, drug, DUI, reentry, etc.); and consider expanding community-based sentencing alternative that are derived from evidence-based practices.

II. INSTITUTIONAL INTAKE AND CLASSIFICATION

4. Modify the intake/assessment process to identify and document gender-specific criminogenic risk and reentry needs and use the TAP as a component in making institutional placements.
5. Share the TAP with institutional program and parole staff, faith/community-based service providers and all other relevant parties; and provide a means for these individuals to input offender program participation and progress

III. INSTITUTIONAL PROGRAMMING

6. Expand programming/beds allocated for special needs (substance abuse, sex offenders. mental health) and develop or expand specialized housing units to include faith and character-based dorms, work release and in-house transitional centers so that available space will exist to accommodate recommendations contained in the TAP and have offenders released in a timely fashion.
7. Target crime producing factors and behaviors that have been identified by an assessment instrument on offenders who are at a high risk of reoffending so as to address these factors and behaviors through programs and services delivered by designated staff.
8. Expand evidence-based institutional programming that prepares offenders for post-release employment or continuation of education or job training:
 - Vocational and job skill programming, alternative ways of providing skills training, and integration with prison industries;
 - Cognitive/Behavioral Training;
 - Education
 - English-as-a-Second-Language (ESL) classes.

9. Consider expansion of existing relationships with technical colleges to broaden the range of available vocational programming to offenders. Also, continue to provide dual credit for programs offered by the Department of Technical and Adult Education in order to support enrollment in technical colleges upon the offender's return to the community.

IV. OFFENDER TRANSITION

10. Develop a transitional services procedure that includes factors that are necessary for successful reentry: housing, treatment, and programs, employment, family issues and financial obligations (i.e. child support and restitution to crime victims) and designate institutional staff responsible for implementation.
11. Work with driver's services and other organizations to ensure that necessary identification and other pertinent documents for employment are available to the offender prior to release.
12. Administer through the Georgia Department of Corrections a disability qualification advocate program to assist inmates in securing Medicaid and Social Security Benefits prior to release.

V. RELEASE DECISION MAKING AND TRANSITION

13. Consider the offender's progress on goals outlined in the TAP as a significant factor for release decision-making.
14. Assign pre-release and post-release conditions that are consistent with the goals of the individual offender's TAP.

VI. HOUSING AND COMMUNITY/FAMILY SUPPORT

15. Complete housing arrangements in accordance with offender's TAP at least 90-120 days prior to release.
16. Utilize the Alternative Living Facilities Manual or create a similar resource directory of housing options with links to other sources as noted by other pertinent agencies.
17. Provide offenders with a certificate of progress when they have successfully completed one year of community supervision. This document will assist the offender in accessing housing and employment options.

18. Implement a program whereby inmates who participate in prison work programs will place their residual earnings (after restitution and/or housing in prison) in escrowed savings accounts and use these funds for transition obligations including housing.
19. Develop and implement model guidance on offender eligibility for public assisted housing.
20. Expand interaction with faith/community-based organizations to create additional transitional or reentry housing, particularly for offenders with special needs.
21. Share information concerning offender's circumstances with public housing authorities.

VII. COMMUNITY SUPERVISION

22. Establish protocols that incorporate supervision with social services, law enforcement and other agencies that interact with offenders and their families.
23. Integrate the post-release supervision plan with the offender's TAP.

VIII. COMMUNITY PROGRAMS

24. Develop linkages between institutional treatment and community treatment providers, particularly for groups requiring specialized services (i.e. sex offenders, brain injured, mentally retarded, HIV+ offenders).
25. Sanction and encourage regular collaborative events and information sharing opportunities between institutional staff, local supervision and service provider staff to discuss offender eligibility and intervention issues, capacity and available slots in community programs.
26. Develop and improve existing collaborative partnerships with local community service boards to provide more effective community-based offender programs. Identify additional community staff and resources that will target the indigent offender population for expedient and affordable substance abuse and mental health treatment options.

IX. NEXT STEPS

27. Implementation: Establish an implementation team consisting of representatives from each of the policy team agencies to operationalize the recommendations.

28. Communication: Develop an orientation for partner organizations on the “big picture” benefits of effective offender reentry; publicize the benefits and outcomes of the GRIP program to local governments and organizations.
29. Evaluation: Create measurable benchmarks and standards against which the GRIP program can be evaluated.

Juvenile Offender Reentry Considerations

During the preparation of the TPC recommendations, much attention was focused on the development of ideas related to the adult offender population. However, the following were a list of considerations that have been developed specific to the juvenile offender population. Further collaboration is necessary to provide a complete list of juvenile recommendations.

I. SENTENCING

1. Evaluate the need for and the cost of juvenile courts having juvenile pre-disposition assessments and reports available to the court prior to disposition.
2. Review and recommend modifications to juvenile disposition options to further reduce or further eliminate the short term program provided by the Department of Juvenile Justice. Study recommendations made by the Juvenile Code Re-write Committee to consider dispositional options relating to the serious, violent or chronic juvenile offenders.

II. INSTITUTIONAL PROGRAMMING

3. Target the risks and needs of juvenile offenders at a high risk of offending through evidence-based practices, programming and services.
4. Expand the existing Department of Juvenile Justice program of youth to community transition to all state Youth Development Campuses (YDCs).

III. OFFENDER TRANSITION

5. Evaluate whether family involvement in juvenile release and transition planning activities can be increased or improved in order to better support transition and achieve successful reintegration into the community.
6. Study and recommend ways to ensure that released juveniles are transitioned to an appropriate educational placement upon release and not be automatically funneled to an alternative school.

IV. RELEASE DECISION MAKING AND TRANSITION

7. Support the Juvenile Code Re-Write Committee's recommendations that support DJJ flexibility to request designated felon release based on program progress and success rather than the minimum length of stay.

V. HOUSING AND COMMUNITY/FAMILY SUPPORT

8. Recommend that the Department of Juvenile Justice continue and improve its current planning/aftercare planning processes.
9. Seek to provide older juvenile offenders with needed housing and employment assistance by expanding existing agreements with the Department of Labor and other faith and community-based groups as appropriate.

VI. COMMUNITY SUPERVISION

10. Support the Juvenile Code Re-Write Committee initiative to strengthen support for mental health and substance abuse treatment in the community for juveniles involved with courts who have mental illness, substance abuse or whose competency may be an issue.

VII. COMMUNITY PROGRAMS

11. Strengthen and broaden existing Department of Juvenile Justice initiatives that link institutional treatment with community service providers for special needs populations.

VIII. NEXT STEPS

12. Consider specific juvenile justice system issues both as part of the overall justice system as well as based on the special needs of the juvenile system population.
13. Identify the specific juvenile system issues that are of interest to local governments, schools and other community organizations. Consider whether there should be a separate process within the GRIP TPC framework to focus specific juvenile issues.

Example 23.

Missouri's Transition Accountability Plan



STATE OF MISSOURI
DEPARTMENT OF CORRECTIONS
TRANSITION ACCOUNTABILITY PLAN

PHASE:
TRANSITIONAL

LOCATION:
WERDCC

| | | |
|---|--|------------------------------|
| OFFENDER NAME | DOC NUMBER | DATE |
| BIRMINGHAM, BETTY DECARLO | 2000964 | 12/21/2006 |
| ASSETS FINANCIAL, LEGAL | LIABILITIES EDUCATION, FAMILY, MENTAL HEALTH, PERSONAL/SOCIAL, SUBSTANCE ABUSE | |
| PHASE START DATE: | NEXT REVIEW DATE: | PAROLE HEARING DATE: |
| 11/01/2006 | 01/15/2007 | N/A |
| RELEASE DATE: | DISCHARGE DATE: | |
| 07/18/2003 | 03/18/2010 | |
| SPECIAL CONDITIONS: Enter and successfully complete an outpatient abuse program. Enter and successfully complete an outpatient mental health program. Enter and successfully complete an aggressive assaultive program. Work towards GEO completion. | | |
| The following is a cooperative effort among the offender, staff, and other resources. | | |
| 01--MENTAL HEALTH | | |
| MY SELF-DEFEATING BEHAVIOR/PROBLEM THAT BLOCKS MY SUCCESS IS: NOT TAKING MY MENTAL HEALTH MEDICATION | | |
| MY BEHAVIORAL GOAL TO ADDRESS MY PROBLEM IS: GET MY MENTAL HEALTH ISSUES UNDER CONTROL | | |
| MY ACTION PLAN TO MEET THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: I WILL SEE THE MENTAL HEALTH COUNSELOR FOR AN EVALUATION BEFORE 03-01-2007. I WILL TAKE ALL MEDICATIONS THREE TIMES A DAY, EVERY DAY, AS INDICATED BY MY DOCTOR | | |
| TARGET COMPLETION DATE: | COMPLETION DATE: | |
| 03/01/2007 | 03/01/2007 | |
| STAFF ACTION PLAN TO ASSIST IN MEETING THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: CASEWORKER WILL HELP ME GET AN APPT FOR A MH EVALUATION BEFORE 03-01-2007 CASEWORKER WILL CONTACT BJC FOR ASSISTANCE WITH MH ISSUES UPON MY RELEASE | | |
| EMPLOYEE: | LOCATION: | COMP DATE |
| E0052009, AGGELER, D. | WERDCC | |
| E0052009, AGGELER, D. | WERDCC | |
| 02--PERSONAL/SOCIAL | | |
| MY SELF-DEFEATING BEHAVIOR/PROBLEM THAT BLOCKS MY SUCCESS IS: I AM VERBALLY AND PHYSICALLY AGGRESSIVE | | |
| MY BEHAVIORAL GOAL TO ADDRESS MY PROBLEM IS: LEARN HOW TO MANAGE MY ANGER AND AGGRESSION | | |
| MY ACTION PLAN TO MEET THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: ATTEND AN ANGER MANAGEMENT CLASS EVERY WEDNESDAY AT 6:00PM FOR 12 WEEKS BEGINNING 04/01/2007. | | |
| TARGET COMPLETION DATE: | COMPLETION DATE: | |
| 04/01/2007 | | |
| STAFF ACTION PLAN TO ASSIST IN MEETING THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: GET MS BIRMINGHAM SCHEDULED FOR ANGER MGMT CLASS BY 3/15/2007 TO BEGIN ATTENDING ON 4/1/2007. | | |
| EMPLOYEE: | LOCATION: | COMP DATE |
| E0052009, AGGELER, D. | WERDCC | |
| 03--SUBSTANCE ABUSE | | |
| MY SELF-DEFEATING BEHAVIOR/PROBLEM THAT BLOCKS MY SUCCESS IS: CONTINUING TO USE ILLEGAL DRUGS (COCAINE AND MARIJUANA) | | |
| MY BEHAVIORAL GOAL TO ADDRESS MY PROBLEM IS: REMAIN FREE OF ILLEGAL DRUGS | | |
| MY ACTION PLAN TO MEET THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: SUBMIT TO RANDOM URINALYSIS EVERY TIME IT IS REQUIRED OF ME. ATTEND SA TREATMENT CLASSES WEEKLY ON THURSDAYS AT 2:30 PM FOR 16 WEEKS BEGINNING 3/15/2007 | | |
| TARGET COMPLETION DATE: | COMPLETION DATE: | |
| 02/01/2007 | 03/15/2007 | |
| STAFF ACTION PLAN TO ASSIST IN MEETING THE ABOVE GOAL AND/OR SPECIAL CONDITIONS: RANDOMLY DRUG TEST MS. BIRMINGHAM SCHEDULE MS. BIRMINGHAM FOR SA TREATMENT CLASSES BY 3/1/2007 INVESTIGATE COMMUNITY TREATMENT OPTIONS FOR MS BIRMINGHAM | | |
| EMPLOYEE: | LOCATION: | COMP DATE |
| E0052009, AGGELER, D. | WERDCC | |
| E0052009, AGGELER, D. | WERDCC | |
| E0052009, AGGELER, D. | WERDCC | |
| COMMUNITY LINKS & RESOURCES USED TO ASSIST IN MEETING THE GOALS & SPECIAL CONDITIONS: | | |
| NAME OF RESOURCE | ADDRESS | CONTACT PERSON |
| 01 BJC | 112345 GLENN AVE ST LOUIS, MO 63101 | EMMA LINCOLN 314-555-5555 |
| APPT. DATE/TIME | | |



STATE OF MISSOURI
DEPARTMENT OF CORRECTIONS
TRANSITION ACCOUNTABILITY PLAN

PHASE:
TRANSITIONAL

LOCATION:
WERDCC

| | | |
|--|-------------|------------|
| OFFENDER NAME | DOC NUMBER | DATE |
| BIRMINGHAM, BETTY DECARLO | 2000964 | 12/21/2006 |
| PROGRAMS COMPLETED AND PERSONAL ACHIEVEMENTS: No Accomplishments found. | | |
| ADDITIONAL INFORMATION: No significant other support. Has not had contact with her children. | | |
| I understand that information about my case history, which may include medical, mental health, and/or substance abuse information will be shared within the Department of Corrections. | | |
| OFFENDER SIGNATURE: | DOC NUMBER: | DATE: |
| | 2000964 | |
| STAFF NAME: | ID#: | SIGNATURE: |
| | | DATE: |

Example 24. Michigan's Gender Responsive Strategies for Reentry

There are five general approaches to effectively managing and assisting women parolees:

1. Acknowledge that gender makes a difference.
2. Create an environment based on safety, respect, and dignity.
3. Develop policies, practices, and programs that are relational and promote healthy connections to children, family, significant others, and the community.
4. Address substance abuse, trauma, and mental health issues through comprehensive, integrated, and culturally relevant services and appropriate supervision.
5. Provide women with opportunities to improve their socioeconomic conditions.

See: U.S. Department of Justice, National Institute of Corrections manuscript, Research, Practice and Guiding Principles for Women Offenders: Gender Responsive Strategies (Bloom, Owen, Covington, et al; July 2003). (<http://www.nicic.org/Library/018017>)

Approaches to Addressing Gender Responsive Strategies

Acknowledge That Gender Makes a Difference

- Allocate both human and financial resources to create women-centered services
- Designate a high-level administrative position for oversight of management, supervision, and services
- Recruit and train personnel and volunteers who have both the interest and the qualifications needed for working with women under criminal justice supervision.

Create an Environment Based on Safety, Respect, & Dignity

- Conduct a comprehensive review of the institutional or community environment in which women are supervised to provide an ongoing assessment of the current culture.
- Develop policy that reflects an understanding of the importance of emotional and physical safety.
- Understand the effects of childhood trauma to avoid further trauma.
- Establish protocols for reporting and investigating claims of misconduct.
- Develop classification and assessment systems that are validated by samples of women offenders.

Develop Policies, Practices, and Programs That Are Relational and Promote Healthy Connections

- Develop training for all staff and administrators in which relationship issues are a core theme. Such training should include the importance of relationships, staff-client relationships, professional boundaries, communication, and the mother-child relationship.
- Examine all mother and child programming through the eyes of the child (e.g. child-centered environment, context), and enhance the mother-child connection and to child caregivers and other family members.
- Promote supportive relationships among women offenders.
- Develop community and peer-support networks.

Address Substance Abuse, Trauma, and Mental Health Issues

- Service providers need to be cross-trained in these three primary issues.
- Resources, including skilled personnel, must be allocated.
- The environment in which services are provided must be closely monitored to ensure the emotional and physical safety of the women being served.
- Service providers and criminal justice personnel must receive training in cultural sensitivity so that they can understand and respond appropriately to issues of race, ethnicity, and culture.

Provide Women With Opportunities To Improve Their Socioeconomic Conditions

- Allocate resources within both community and institutional correctional programs for comprehensive, integrated services that focus on the economic, social, and treatment needs of women (jobs, family services, alcohol/drug and mental health treatment). Ensure that women leave prison and jail with provisions for short-term emergency services.
- Provide training, education, and skill-enhancing opportunities to assist women in earning a living wage.
- Provide sober living space in institutions and in the community.

Comprehensive Prisoner ReEntry Plan

EIGHT PRINCIPLES OF EVIDENCE BASED PRACTICESⁱ

1. Assess Actuarial Risk/Needs.
2. Enhance Intrinsic Motivation.
3. Target Interventions.
 - a) *Risk Principle*: Prioritize supervision and treatment resources for higher risk offenders.
 - b) *Need Principle*: Target interventions to criminogenic needs.
 - c) *Responsivity Principle*: Be responsive to temperament, learning style, motivation, culture, and gender.
 - d) *Dosage*: Structure 40-70% of high-risk offenders' time for 3-9 months.
 - e) *Treatment*: Integrate treatment into the full sentence/sanction requirements.
4. Skill Train with Directed Practice (use Cognitive Behavioral treatment methods).
5. Increase Positive Reinforcement.
6. Engage Ongoing Support in Natural Communities.
7. Measure Relevant Processes/Practices.
8. Provide Measurement Feedback.

Implementing Evidence Based Practices

Implementing the principles of evidence based practice in corrections is a tremendous challenge requiring strong leadership and commitment. Such an undertaking involves more than simply implementing a research recommended program or twoⁱⁱ. These 7 Guidelines provide insight into implementation.

Limit new projects to mission-related initiativesⁱⁱⁱ

- Clear identification and focus upon mission is critical within business and the best-run human service agencies.
- When mission scope creep occurs, it has a negative effect on progress, morale, and outcomes.

Assess progress of implementation processes using quantifiable data^{iv}

- Monitoring system implementations for current, valid information regarding progress, obstacles, and direction changes is pivotal to project success.

Acknowledge and accommodate professional over-rides with adequate accountability^v

- No assessment tool, no matter how sophisticated, can (or should) replace a qualified practitioner's professional judgment. All professional over-rides need to be adequately documented, defensible, and made explicit.

Focus on staff development, (research, skill development, management of behavioral/organizational change processes) within the context of a complete training or human resource development program^{vi}

- Staff need to develop reasonable familiarity with relevant research.
- Informed administrators, information officers, trainers, and other organizational ambassadors are necessary to facilitate this function in larger agencies or systems.

Routinely measure staff practices (attitudes, knowledge, and skills) that are considered related to outcomes^{vii}

- Critical staff processes and practices should be routinely monitored in an accurate and objective manner to inform managers of the state of the operation.

Provide staff timely, relevant, and accurate feedback regarding performance related to outcomes^{viii}

- At an organizational level, gaining appreciation for outcome measurement begins with establishing relevant performance measures. Keys: If a certain kind of performance is worth measuring, it's worth measuring right (with reliability and validity); Any kind of staff or offender activity is worth measuring if it is reliably related to desirable outcomes; If performance measures satisfy both the above conditions, these measures should be routinely generated and made available to staff and/or offenders, in the most user-friendly manner possible.

Utilize high levels of data-driven advocacy and brokerage to enable appropriate community services^{ix}

- In terms of producing sustained reductions in recidivism, the research indicates that the treatment service network and infrastructure is the most valuable resource that criminal justice agencies can access.
- Collaborating and providing research and quality assurance support to local service providers enhances interagency understanding, service credibility, and longer-term planning efforts. It also contributes to the stability and expansion of treatment services.

ENDNOTES

ⁱ See: U.S. Department of Justice, National Institute of Corrections manuscript, Implementing Evidence Based Practice in Community Corrections (April 2004).

ⁱⁱ Minimally, a commitment to EBP involves: a) developing staff knowledge, skills, and attitudes congruent with current research-supported practice (principles #1-8); b) implementing offender programming consistent with research recommendations (#2-6); c) sufficiently monitoring staff and offender programming to identify discrepancies or fidelity issues (#7); d) routinely obtaining verifiable outcome evidence (#8) associated with staff performance and offender programming.

ⁱⁱⁱ Harris & Smith, 1996; Currie, 1998; Ellickson et al, 1983

^{iv} Harris & Smith, 1996; Burrell, 2000; Dilulio, 1993; Palmer, 1995; Mihalic & Irwin, 2003; Gottfredson et al, 2002

^v Burrell, 2000; Clear, 1981; Andrews, et al, 1990; Kropp, et al, 1995; Gendreau et al, 1999

^{vi} Latessa, et al, 2002; Elliott, 1980; Harland, 1996; Andrews, 1989; Miller & Rollnick, 2002; Taxman & Byrne, 2001; Taxman, 2002; Baer, et al, 1999; Gendreau, et al, 1999; Durlak, 1998

^{vii} Gendreau, et al, 1999; Henggeler et al, 1997; Miller & Mount, 2001

^{viii} Burrell, 1998; Lipton, et al, 2000; Carey, 2002; O'Leary & Clear, 1997; Bogue, 2002; Maple, 2000; Henggeler, 1997; Miller & Mount, 2001

^{ix} Corbette, et al, 1999; Gendreau & Goggin, 1995; Gendreau, et al, 1993; Meyers & Smith, 1995; Bogue, 2002; Maple, 1999

Example 25. New York State Support and Expectations of Local Reentry Task Forces

State of New York – Division of Criminal Justice Services

PROGRAM ANNOUNCEMENT

Request for Applications to Develop Local reentry task Forces/Strategies

Program Overview/Understanding the Problem

Each year approximately 26,000 offenders are released from New York State prisons and return to local communities. Consistent with Governor Pataki's goal of making New York the safest state in the nation, - it is now the sixth safest state - the New York State Offender Reentry Task Force, through the Division of Criminal Justice Services, is offering funding for local communities to establish local prisoner reentry task forces as a tool to reduce recidivism and increase public safety.

Upon release from prison, many offenders have difficulties obtaining housing, securing employment, accessing treatment services, and reunifying with their families. As research has shown, to the extent an offender is employed, sober, in a stable living environment, and moving toward self sufficiency, the greater chance he or she has of not committing further crimes – benefiting the community by reducing crime and improving the stability of the community.

Reentry is more than just a criminal justice issue. Emphasis on reentry serves the broader community's interest in public safety as well. Public, community and neighborhood organizations, and criminal justice and human service agencies are all stakeholders in this process. Collaboration in an effort such as this is critical. Coordinating the delivery of support services and securing interdisciplinary collaboration between the criminal justice, social services, educational, health and mental health systems during the reentry process are key factors in assuring successful reentry.

Not only in New York, but across the United States, significant attention has been paid to the record numbers of offenders returning to the community and to the promise of innovative interventions designed to smooth their transition. The focus on offender reentry at the federal level has been demonstrated by: (1) the appropriation of considerable funding to assist communities in improving their reentry process; and (2) groundbreaking collaboration among the Social Security Administration and the Departments of Justice, Labor, Health and Human Services, Housing and Urban Development, Veterans Affairs, and Education in the development of strategies to address the challenges of offender reentry.

Consistent with the national focus on offender reentry, in 2003, New York State convened a prisoner Reentry Task Force to examine current statewide reentry policies and develop a comprehensive continuum of reentry services, programs and supervision that is consistent with national best practices. The Reentry Task Force is comprised of a Policy Team of commissioners and directors from fourteen criminal justice and human service agencies directly involved in offender reentry and a Steering Committee of representatives from each of these agencies. The Reentry Task Force has adopted the Transition from Prison to Community (TPC) model of reentry developed by the National Institute of Corrections (NIC), which espouses shared interest among criminal justice and human service agencies for achieving the successful transition of persons from prison to the community.

The vision of the Reentry Task Force is to build a safer New York resulting from the successful transition of offenders from prison to living law-abiding and productive lives in their communities. In order to achieve this vision, the Reentry Task Force is working to establish a coordinated statewide system to accurately assess and respond to offender risks and needs, support offender accountability and reparation to victims and communities, promote offender self-sufficiency, and encourage family and community involvement.

The Reentry Task Force recognizes that local communities play a critical role in the successful transition of persons from prison to the community. Accordingly, the Reentry Task Force has developed this grant program to support the establishment or enhancement of local reentry task forces to coordinate and strengthen the community response to high-risk offenders transitioning from prison back to the community with the ultimate goal of reducing the number who return to prison after committing new crimes.

The role of county-level reentry task forces would be threefold. First, county task forces would provide coordinated services to high-risk offenders around housing, employment, education, family support and reunification, substance abuse, mental and physical health, and other transitional needs. County task forces would collaborate with state criminal justice, particularly with the State Division of Parole, and human service providers to develop well-crafted transition plans for high-risk offenders transitioning from prison back into the community. Second, county task forces would assess the current system of offender transition in the county and implement strategies to enhance successful transition. Lastly, local task forces would develop the community's capacity to assist in offender reentry through means such as public education, development of mentoring programs, and inclusion of ex-offenders in volunteer services as a means of reparation.

2) Funding, Match and Program Period

Grant awards of up to \$100,000 will be made available to each of the New York State IMPACT counties. The IMPACT counties include the 17 largest counties that account for 80% of the crime outside of New York City and are participating in our statewide crime reduction program administered by the District Attorneys offices. Award priority will be given to those jurisdictions with the highest volume of returning offenders. Grant funds

must be expended within the contract period, in accordance with the program budget. Grant recipients are required to designate \$5,000 of grant funds for travel to attend two mandatory workshops. This requirement is addressed further in Section 4 (d) of this announcement.

This program will be funded by the Federal Fiscal Year 2005 Edward Byrne Justice Assistance Program Grant. Therefore, grant recipients must provide a hard cash match equal to 10% of the total project cost (or 11.11% of the final award.) Operation IMPACT II program funds may be used as eligible match for this program if IMPACT II funds support components of the Reentry Project.

Contracts will be for the 18 month period beginning January 1, 2006 through June 30, 2007. Contingent upon availability of funds, these contracts may be renewed for one year.

3) Targeted Offender Population

The targeted returning offender population for this grant consists of those returning from prison who are deemed by the local reentry task force to pose a significant risk to public safety or who present to the community with reintegration needs that are particularly difficult to address. The State Reentry Task Force will work jointly with the local partnerships to identify high-risk offender populations specific to each grant recipient county.

Offenders returning from prison may be under parole supervision or may have been released due to the maximum expiration of their sentence. Grantees may also choose to develop specific protocols to target such sub-populations as sex offenders or those with a history of violence.

4) Program Requirements/Activities

a. Development and composition of local reentry task forces

The primary requirement of this grant program is the establishment of a comprehensive reentry task force. The County Executive's Office will be the fiscal agent responsible for administering the grant and will identify the implementing agency to oversee the Reentry Project. The designated agency will serve as the chair of the local reentry task force. An alternate management structure for the task force may be considered upon request by the county. At a minimum, the reentry task force must include the following agencies/organizations:

1. Regional or Area Parole Office
2. Sheriff's Office
3. Police Department (of largest jurisdiction)
4. County Department of Mental Health
5. County Department of Probation
6. County Department of Social Services

7. Local VESID (Vocational and Educational Services for Individuals with Disabilities) Office
8. Local One-Stop Center (Department of Labor)
9. OASAS Field Office (Addiction Specialist)
10. Faith-based/community organization(s)
11. Victim advocacy organization(s)

Because the criminogenic needs of returning offenders and available system resources will differ across counties, grantees should consider engaging other reentry stakeholders as appropriate. Additional optional partners may include: community treatment providers, New York State Police Community Outreach Representative, district attorney's office, county legislators, local research partners, local educators and representatives from courts, the local housing authority, and the business community.

Grantees are encouraged to build on existing structures; therefore, if a group is already in place with an appropriate composition and similar purpose, it may serve as the foundation for the complete reentry task force.

Representatives from DCJS, the Division of Parole, the Department of Correctional Services and other State agencies, as appropriate, will partner with the local reentry task forces by providing supportive services and technical assistance via the Statewide Reentry Task Force. To ensure the coordination between the State and local jurisdictions, and to further enhance the contribution of State agency representatives, grantees will be required to interact with the Statewide Reentry Task Force. Minimally, the local reentry task force chairperson and the reentry coordinator will be required to attend periodic meetings of all grant recipients coordinated by DCJS and the Division of Parole (co-chairs of the Statewide Reentry Task Force).

b. Designation of Reentry Coordinator

In addition to the development of local reentry task forces, a second program requirement is the **designation of a full-time county reentry coordinator**. The role of the reentry coordinator would be twofold. First, the reentry coordinator would be responsible for developing a case conferencing process to assist in the coordination of services for high-risk offenders. An extension of this function will be to communicate service gaps, redundancies or inconsistencies experienced at the individual case-level to the full reentry task force for their attention in the context of strategic planning and system-wide assessment and coordination.

For those offenders under supervision, case management coordination would be provided following referral by the supervising agency. For offenders who are not under criminal justice supervision, the reentry coordinator would develop an "in-reach" process to establish contact with eligible offenders pre-release. One mechanism by which this could occur is through exit orientations conducted by teams including law enforcement, service providers and the reentry coordinator to deliver a collective message that the offender will be held accountable for his/her actions post-release, but that there are specific

services available in the community, including case management by the reentry coordinator, to assist in the reentry process.

The second role of the reentry coordinator is to oversee a comprehensive assessment of the local reentry system that the task force must undertake as part of the grant requirements. The reentry coordinator would act as a facilitator, working across agency lines to enhance partnerships among criminal justice and human service agencies. This could include developing coordinated working agreements that address duplication of services and establishing new relationships with agencies that could assist in the county reentry process.

c. Roles and activities of local reentry task forces

Once established, local reentry task forces will oversee the following activities:

- *Assist in the coordination of services in targeted, high-risk cases:* Assist in coordinating services in high-risk re-entry cases to enable the offender to meet needs that will reduce the probability of recidivism and increase self-sufficiency in areas such as housing, employment, education, family support and reunification, substance abuse, and mental health.
- *Strategic planning and system-wide coordination:* Assess the quality and comprehensiveness of the current system of offender transition within the county through use of the Transition from Prison to Community (TPC) model; implement strategies that enhance the accountability and management of all offenders reentering the community and improve the coordination of services across agencies;
- *Public education and outreach:* Engage the community in building a reentry system through public education and activities that: (1) explain the reentry process to the public; and (2) provide for community participation in reentry planning and programming such as offender mentoring.

d. Training

County reentry teams must reserve \$5,000 for two training workshops to be arranged by the Statewide Reentry Task Force and conducted by technical assistance providers designated by the Statewide Reentry Task Force. The training workshops will address the components of the Transition from Prison to the Community (TPC) approach to offender reentry and the fundamentals of effective collaboration. The workshops will: (1) assist teams in the development of collaborative, sustainable partnerships that integrate basic policies; (2) enhance the provision of services; and (3) maximize resources in order to improve the transition process for returning offenders and increase the likelihood of successful reintegration.

Local reentry task force leadership along with the reentry coordinator and the regional Parole representative will be required to attend the first training to be held in Albany. Additionally, once the entire reentry task force has been established, complete teams will be required to attend a collaboration training.

e. Grant timeline

Within the first 90 days following the grant award, local reentry task forces must conduct their first meeting and designated members must attend the mandatory workshop trainings. Task forces must meet at least quarterly for the remainder of the grant period.

Also within the first 90 days, grantees must designate a reentry coordinator. The reentry coordinator should immediately establish a relationship with the regional Parole office and begin to develop the case conferencing process described above for both supervised and unsupervised offenders. Throughout the remainder of the grant period, the reentry coordinator will continue to manage the case conferencing process while concurrently overseeing the system assessment to be conducted by the complete task force.

Systematic assessment of the county reentry process relative to currently understood best practices in offender reentry should be conducted and completed by June 30, 2006. The steps necessary to complete this task will be outlined in detail during the first mandatory training workshop. The assessment should include an analysis of the returning offender population as well as a compilation of the existing resources, policies and practices with regard to the reintegration of these offenders.

Following the system assessment, grant recipients will be required to submit a county reentry strategy that identifies three measurable goals that the local reentry task force will achieve over the remaining twelve months of the grant. Once achieved, these goals should begin to bridge the identified gaps between current and best practices. Additionally, grantees must submit an implementation plan to achieve these goals, a method to gather data and measure progress toward goal fulfillment, and an updated budget, as appropriate.

f. Funding uses

Grant funds, first and foremost, **must be used to support a reentry coordinator position** to help coordinate services to targeted cases and assist in system assessment as described above. A variety of methods may be used to meet this requirement: 1) If the county already has a full-time reentry coordinator or equivalent position supported by another source, the funds supporting this position may be applied toward the required cash match for this program. Grant funds may then be used to support other allowable program activities and costs described below; 2) County may choose to hire a consultant to support the coordinator position; and 3) A new position may be established and hired for the reentry coordinator.

All grantees must allocate \$5,000 of their grant funds for travel to attend two mandatory workshops.

Any grant funds remaining after the support of a reentry coordinator position and travel for mandatory workshops may be used for the following:

1. Purchasing treatment or other specialized services needed to improve the reentry of high-risk offenders.
2. Providing victims and other persons whose safety may be placed in jeopardy by offender reentry with services to enhance their safety.
3. Systems coordination planning and developmental activities that bring key stakeholder agencies/organizations together.
4. Purchasing supplies and services required by the workgroup to carry out its plans (e.g., preparation and printing of educational materials).
5. Providing services and advice to families of reentering offenders who will be housing those offenders and helping them to reintegrate into the community.
6. Training community members and volunteers to assist reentering offenders through mentoring and other programs designed to increase offender employment and otherwise improve their adjustment to the community.

5) *Performance Measures*

As indicated in the grant timeline Section 4(e) above, each local reentry task force will be required to establish **three measurable goals** that can be monitored and evaluated throughout the duration of the grant period. DCJS will assist local reentry task forces in the measurement and calculation of these goals and will provide information to each grant recipient county regarding their specific returning offender population.

6) *Application Requirements*

Applications must be submitted by the County Executive's Office. Only one application will be accepted from each county.

a. Memorandum of Understanding

Applicants must submit an MOU signed and dated by the chief executive officers of each of the required criminal justice and human service agencies on the reentry task force indicating their planned participation. The MOU should describe an understanding of the grant deliverables and indicate the agreement of the signatories to participate in a coordinated multi-disciplinary approach to offender reentry. A sample MOU is provided with this announcement. The original signed MOU may be mailed and be received by the due date to: DCJS Funding, 4 Tower Place, Albany, New York 12203, Attn: Anne Marie Strano, or you may scan the signed MOU and attach it to your GMS application.

Individual agency MOUs are not acceptable. In addition, letters of support may not be substituted in place of one originally signed MOU.

b. Budget

Applicants are required to submit a budget that includes a concise narrative outlining how funds would be spent. As each county task force is required to complete a comprehensive system assessment, the budget should only outline how initial funds will be spent in order to complete this assessment and early case conferencing activities. For example, this may include the cost of the full-time reentry coordinator and estimated

travel expenses for the training in Albany to be conducted in the Winter of 2006. Applicants' budgets should then identify how remaining grant funds will be used to develop, execute and evaluate their county reentry strategy during the implementation phase of the grant.

c. Narrative

The narrative portion of the application should be at least four, but no more than eight, double-spaced, single-sided pages with 12-point text font and one-inch margins and can be typed in a word processing format first and then copied and pasted into the program specific question area in GMS. Narratives should consist of responses to each of the following questions.

1. County-level reentry issues

Describe up to four specific reintegration issues experienced by the submitting county. Include references to present key policies and practices affecting transition that are currently in place. You may incorporate data from your county reentry profile which is attached to this program announcement.

2. Need for grant support

How would this grant opportunity assist the county in its efforts to increase the success rate of offenders transitioning from prison to the community?

How would this grant opportunity improve the county's capacity to conduct coordinated case management and evidence-based planning around offender reentry?

How would the local reentry task force build appropriate community participation in the reentry process?

3. Current state of collaboration

If a team is already in place with an appropriate composition and congruous purpose that could be expanded to function as the reentry task force, please describe the team, its mission, and its members.

If a suitable team does not currently exist, please describe any recent, formal collaboration between criminal justice and human service agencies established in your county to solve common problems or achieve mutual objectives.

4. Reentry coordinator

Describe the proposed plan for implementing the reentry coordinator function.

If this role is currently being accomplished in the county, please describe the position and the agency or agencies supporting it. Alternatively, please describe the position to be

created, as envisioned, including where it would be located and the supervising agency or agencies.

7) Application Preparation, Forms and Requirements

Grant applications should be submitted to the NYS Division of Criminal Justice Services (DCJS) automated DCJS Grants Management System (GMS). The system allows an agency to complete an application electronically and submit it over the Internet. If upon reading this program announcement you are interested in completing a grant application, and you have not previously been registered to use the DCJS GMS system, your agency will need to register and be assigned a password. The Registration Request Form and instructions for use of the GMS system can be found at the following Internet address: <http://criminaljustice.state.ny.us/ofpa/gms.htm>

When your request has been processed, you will receive a username, password, instructions and a link to a user manual. Please allow 3-5 business days for your Registration Request to be processed. **Applicants are encouraged to register their agency immediately.**

Should you have difficulty in accessing or using the GMS system, please email GMS Technical Assistance at funding@dcjs.state.ny.us for assistance.

All applications must be received by 5:00 p.m. December 5, 2005.

8) Timeline

DCJS will receive applications starting November 4, 2005 and continue receiving applications through the close of business (5:00 p.m.) on December 5, 2005. All applications will be reviewed and awards made to those applications selected for funding by January 1, 2006.

9) Approval and Notification of Award

The Director of Criminal Justice will provide oversight of the grant review process. The Director will announce the final grant award decisions based on the review and rating of applications and recommendations by the staff. Nothing herein requires DCJS to approve grant funding for any applicant.

DCJS will notify all applicants in writing as to whether or not they will receive a grant award.

10) Administration of Grant Contracts

Contract Approval – All contracts are subject to the approval of the Attorney General and the Comptroller of the State of New York, and until said approval has received and indicated thereon, the Contract shall be of no force and effect.

Contract Period – Contracts will be executed for an 18-month period beginning January 1, 2006 and may be renewed for one year, subject to the continued availability of grant funding.

Contract Activities – All activities must have prior approval from DCJS and meet guidelines established by the State of New York and the Federal government.

Contract Changes – Contracts with grantees may be executed, terminated, renewed, increased, reduced, extended, amended, or renegotiated at the discretion of the Director of Criminal Justice in light of a grantee's performance, changes in project conditions, or otherwise.

Records – Grantees must keep books, ledgers, receipts, work records, consultant agreements and inventory records pertinent to the project; and in a manner consistent with DCJS contractual provisions and mandated guidelines.

Liability – Nothing in the contract between DCJS and the grantee shall impose liability on the State of New York, for injury incurred during the performance of approved activities or caused by use of equipment purchased with grant funds.

Payments – Payments to reimburse project expenses will be made pursuant to schedule specified in a contract entered into between the State of New York and the grant award recipient.

Reports – The grantee shall submit to DCJS reports in a format and time schedule specified in the grant contract, which shall include a description of the program efforts undertaken during the report period and the current status of the project. Reports must address program goals and objectives to be monitored and evaluated throughout the duration of the grant period.

Review – The grantee's performance in all areas mentioned above, in addition to the services contracted for, will be monitored by DCJS. Monitoring activities may take the form of site visits, record inspections, written and telephone communication, or other methods deemed necessary by DCJS.

Revocation of Funds – Funds awarded to an applicant who does not implement an approved project within 120 days of the execution date may be revoked and reallocated to another applicant at the discretion of the Director of DCJS.

Standard Contract Provisions – Grant contracts executed as a result of this Program Announcement will be subject to the terms and conditions of Appendix A and Appendix a-1, which are available for review on the Internet site <http://criminaljustice.state.ny.us/ofpa/forms.htm>.

Example 26. Michigan's Implementation Plan Implementation Matrix of the MPRI Model at 7 Key Decision Points; November Status Report and Recommendations to the State Policy Team

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| <p><u>Inmate Assessment and Classification</u></p> <p>Establish a process for assessment of offender risk, need and strengths to begin at intake and continue through discharge from parole. Process will be based on a comprehensive, objective assessment tool that:</p> <ul style="list-style-type: none"> • Identifies relevant risk, needs and strengths • Is Valid and Reliable • Is normed for specific populations • Is useful for Case Plan, TAP and Case Management • Uses both static and dynamic factors • Is done early in point of incarceration • Performs ongoing reassessment • Uses common tools for all stakeholders • Is practical in terms of cost, resources and compatibility with existing data and systems <p>Based on assessment, develop a process for Case Planning and Management that addresses offender's risk, needs and strengths and results in improvement in offender's prospects for successful completion of parole and reintegration into society</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ One reception center for males and one for females. ❖ Prisoners given wide range of tests and evaluations on education, vocational needs, mental & physical health & substance abuse. ❖ Use of objective validated risk instrument for prediction of recidivism and misconduct and parole decision making is well established and in use. <p><u>Weaknesses:</u></p> <ul style="list-style-type: none"> ➤ No standard form of communication between stakeholders. ➤ Many instruments rely heavily on static factors ➤ Validation of assessment instruments not ongoing. ➤ Limited information available regarding family, housing, treatment and employment history involvement prior to incarceration | <p>Work Group Preliminary Goal:</p> <p>Create a process that will accurately identify offender risk, needs, and strengths of each prisoner during the intake process and use these assessments to design an individual Transition Accountability Plan.</p> <p>Tasks and Strategies to Accomplish Goal:</p> <ul style="list-style-type: none"> • Develop the format and content of the Transition Accountability Plan (TAP) • Obtain Technical Assistance from NIC regarding best practices for TAP and risk, needs and strengths assessment. • Survey other ReEntry states to determine the approaches and instruments they are using to address TPC Decision Point goals on assessment. • Identify current MDOC processes for classification and assessment (including an inventory of existing methods and instruments) • Identify and assess alternative classification methods and instruments from other sources. • Select tool to assess offender risk, needs and strengths • Review, assess, and incorporate other work group recommendations for the TAP • Create a final TAP model for presentation to EMT/SPT based upon a synthesis of all of the foregoing • Determine improvements needed in the PreSentence Investigation (PSI) process so that information is provided to prison reception in order to create realistic TAP. • Address system weaknesses. <p>November 2004 Status and State Policy Team (SPT) Decisions:</p> <ul style="list-style-type: none"> • Nationwide survey of TAP/Case Management practices: Completed and reviewed • Draft TAP/Case Management Plans developed/reviewed/revise, with input from all interested participants: Completed <p>SPT Decisions</p> <ul style="list-style-type: none"> • Approve draft TAP/Case Management Plans, and pilot to assess content, usability, and transferability of information • Begin the process of developing a computerized form of MPRI documents, and the means to transfer data between agencies. • Select tool to assess Risk, Needs and Strengths and be basis for Case Planning and Management • Issue contract for Technical Assistance with implementing new Risk, Needs and Strengths Assessment process and integrating it into the overall MPRI process. • Establish subcommittee consisting of MDOC and partner agency representatives to monitor and assist in implementation of assessment process and integrating it into MPRI. • Expand Office of Research and Planning resources to perform duties related to implementation of Assessment and Classification and Case Plan TAP, including extraction and interpretation of data, conduct of needed program outcome assessments and other MPRI related activities. |
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GETTING READY

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| <p><u>Inmate Behavior and Programming</u></p> <p>Develop a case management plan for each prisoner that:</p> <ul style="list-style-type: none"> - Includes programs to reduce risk of recidivism by changing prisoners' dynamic risk factors, such as programs for: <ul style="list-style-type: none"> • Anger Control • Employability • Education • Substance Abuse - Specifies behavioral expectations and consequences - Rewards - Sanctions <p>Covers each prisoner's time incarceration, parole supervision, and aftercare</p> <p>GETTING READY</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ Available programs include education, substance abuse, mental health, voc training, sex offender & assaultive offender therapy. <p><u>Weaknesses:</u></p> <ul style="list-style-type: none"> ➢ No standard form coordination and communication between stakeholders ➢ Lack of consistency in programming ➢ Insufficient capacity resulting in waiting lists for programming ➢ Lack of criteria for consistency in forfeiture, restoration, and awarding of disciplinary credits ➢ Incomplete, out of date, and inaccurate information on program needs and participation ➢ Lack of coordination between programming and parole supervision needs | <p>Work Group Preliminary Goal:</p> <p>Develop and implement a process for ensuring that the risk, needs and strengths identified during the Assessment and Classification process are addressed through a case management plan which operationalizes (defines and implements) the institutional phase of the TAP through the appropriate assignment of the inmate to programs that will reduce risk, address needs and build on identified strengths.</p> <p>Tasks and Strategies to Accomplish Goal:</p> <ul style="list-style-type: none"> • Work within Cluster to design the TAP • Review "best practices" for prisoner programming and treatment (Technical Assistance obtained from NIC, Literature Review, Other States and Departments) that will assist Work Group and Cluster in determining most effective ways to reduce recidivism through programming. • Review current MDOC practices and recommend changes with respect to consequences of prisoner Disciplinary Process on case management planning (e.g. Security Classification, Program Eligibility, Risk and Time Computation). • Develop a model for determining and scheduling offender treatment and programming according to risk, needs, strengths and expected release date. • Establish a method for measuring the offender's progress toward meeting case management plan objectives including periodic reassessment of risk. • Establish a system for case management plan progress reporting that begins with the TAP, includes the case plan and builds – over time – toward the development of a specific "re-entry plan" (parole plan), and can be readily transmitted to key community stakeholders who will be involved in the process of release preparation. • Address system weaknesses. <p>November 2004 Status and Recommendations:</p> <ul style="list-style-type: none"> • Developed draft TAP/Case Management Plan in expandable layout to address individualized risk/needs/strengths, and to provide information to other agencies/the community in one comprehensive format • Begin use of the draft plans at pilot demonstration sites with current community involvement, and expand use throughout system |
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| <p><u>Education/Vocational Training and Employment</u></p> <p>This Work Group does not represent a decision point but, rather, a critical service area that is essential to offender re-entry success. Early involvement of other Departments, Agencies and Community based organizations with development of plans to match individual offender's needs with locally available services and education, vocational training and employment are all essential.</p> <p>As the lead service providers for much of the inmate programming available in the prisons, MDOC representatives from the educational/voc ed area can assist in the timely and complete sharing of information across all agencies involved with planning and implementing supervision and treatment plans for offenders.</p> <p>Ensure continuity of services from to prison to community to avoid gaps and replication of services/treatments is essential and the education/voc ed professionals in the MDOC have a unique history in the department on working collaboratively with "outside" groups, assisting them in getting inside the prison walls to provide essential services to inmates.</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ Testing & assessment done at intake to determine program needs. ❖ MDOC maintains electronic Community Service Directory with listings of local adult education providers. Directory is available to prison staff and is on each agent's desktop. ❖ Education/voc ed staff promote job readiness among parolees. ❖ Educational/voc ed staff are trained & prepared to help coordinate educ. & vocational training with locally available services & jobs to maximize the relevance of training for actual employment opportunities. <p><u>Weaknesses:</u></p> <ul style="list-style-type: none"> ➤ Information flow to and from community to MDOC is extremely limited. ➤ Education reports from programs during incarceration are often not provided to field agents and community service providers. ➤ No standard form for communication and coordination between MDOC and local service providers of educational services, vocational services, employment placement agencies, employers, housing agencies, health care providers, mental health providers, etc. ➤ Failure to coordinate prisoner vocational training programs with the target community's available positions | <p><u>Preliminary Work Group Goal:</u></p> <p>Develop a standardized pre-release program for inmates and a process for the development of individual offender "portfolios" that contain information relative to inmate's programming and educational attainments in prison that can be used, in addition to other strengths and attributes that can be documented, to assist in the re-entry process.</p> <p><u>Tasks and Strategies to Accomplish Goal:</u></p> <ul style="list-style-type: none"> • Acquaint all prison and parole staff with programming and portfolio initiatives so that they fully understand and support the approaches – develop in-service training opportunities. • Work with research staff to develop data collection, monitoring and reporting system for programs. • Help develop Public Education Plan to educate public about positive services within the prison system and how those services positively affect recidivism. <p><u>November 2004 Status and Recommendations:</u></p> <p>Status:</p> <ul style="list-style-type: none"> • Standardized pre-release program implemented, and delivery staff trained • Standardized portfolio developed • Grant written by EVTE member to support portfolios allocated through DLEG • Michigan Works! video created, for CFA to give agency information to prisoners • MDOC Education PowerPoint created as training tool/presented at Michigan Works! annual conference • Developed Parole Agent Q&A for distribution to all prisons to establish standardized contact/communication between prison and parole <p>Recommendations:</p> <ul style="list-style-type: none"> • Implement standardized use of portfolios • Design curriculum, training model, and training tools to deliver targeted training on MPRI and MPRI implementation • Develop a training timeline in conjunction with rollout of demonstrations and pilots • Develop a creative training program to impact, motivate and inspire cultural change in MDOC employees • Establish a targeted training program for Classification Directors and Parole Agents • Create a Speaker's Bureau to provide MPRI presentations to employers, community members, with emphasis on prisoners' acquired assets and transferable work skills • Duplicate/distribute MDOC Education PowerPoint for use with partner agencies • Continue to pursue social enterprise and apprenticeship/apprenticeship readiness potentials • Utilize Michigan Works! Board of Directors for implementation feedback related to employability (support offered by Michigan Works! Executive Director) • Draft appropriate memoranda of understanding (MOUs) with collaborating agencies as needed |
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GETTING READY

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| <p><u>Inmate Release Preparation</u></p> <p>As part of the Transition Accountability Plan, develop a reentry plan for each prisoner that covers the period six months before and after release and specifies:</p> <ul style="list-style-type: none"> • Housing • Employment • Conditions and restrictions of supervision based on risk • Access to programs, services, and supports. <p>And, defines actions and responsibilities of offender, parole agent and service providers.</p> <p>GOING HOME</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ MDOC facility staff prepare parole eligibility report 6-8 months before earliest parole eligibility date, including info on: <ul style="list-style-type: none"> - Criminal history - Institutional behavior - Progress in meeting Reception Center recommendations - Mental/physical health - Substance abuse history ❖ Field staff conduct home site investigation prior to release & prepare parole release plan, including proposed employment & treatment needs. <p><u>Weaknesses:</u></p> <ul style="list-style-type: none"> ➤ Incomplete and out-of-date information ➤ Lack of coordination with outside service agencies ➤ Lack of proper identification, i.e., drivers license, social security card, etc. ➤ Lack of family support ➤ Lack of appropriate housing ➤ Lack of personal funds ➤ Continuity of health care ➤ Insufficient communication between facility and field staff | <p>Preliminary Work Group Goal:</p> <p>Extend the case management plan into the community through the development of a Re-Entry Plan that identifies predicted continued offender risk/need as well as projected barriers for successful offender reintegration. This represents the planning for the “community phase” of the TAP.</p> <p>Tasks and Strategies to Accomplish Goal</p> <ul style="list-style-type: none"> • Identify needs which are properly addressed by agencies outside the MDOC. • Review the parole eligibility report to ensure that it accurately and completely summarizes up to date information regarding offender risk, needs and strengths. • Develop a mechanism for communicating offender’s needs to other agencies as part of the case management process. • Resolve any confidentiality issues (e.g. release of medical record; security issues; access to prisoners; prisoner’s access to computers). • Develop strategies for connecting community agencies and service providers to offender needs including a Memorandum of Understanding (MOU) for agency access to prisons. • Work with DIT to develop “virtual case management system” that will allow for off-site, internet communication between prison staff and community stakeholders who are assisting with development of the ReEntry Plan. • Work with community groups and legislature and Secretary of State to address the unacceptable and longstanding problem of offender identification – offenders MUST have IDs when they are released from prison (being addressed by Implementation Committee). • Address system weaknesses. |
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| <p><u>Release Decision Making</u></p> <p>The releasing authority assigns each offender a tentative release date early in their term of imprisonment.</p> <p>Describes what each offender must do to be released on that date</p> <ul style="list-style-type: none"> + Behavior + Achievements <p>Defines general requirements of supervision for each offender</p> <p>The tentative release date is a benchmark around which to schedule elements of the case plan, e.g. when an inmate needs to enter a particular program; when an inmate needs to be reclassified to a lower security level</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ Parole Board uses following in parole consideration process in conjunction w/static factors to calculate parole guideline score. <ul style="list-style-type: none"> - Pre-Sentence Investigation Report - Parole Eligibility Report (PER) - Major misconduct reports - Block reports - Assaultive/Sex Offender Therapy Termination Reports ❖ Conditions of parole may require continued participation in similar prison-based programming after release; conditions may be specifically tailored to address prisoner's unique needs ❖ CFA staff review each prisoner annually to determine if transfer to lower custody level is appropriate <p><u>Weaknesses:</u></p> <ul style="list-style-type: none"> ➤ Lack of relevant info in PSI & PER (often very generalized or broad) ➤ Lack of continuity of case planning e.g. mentally ill, sex offender therapy, substance abuse, etc ➤ Parole Guideline score not given to prisoner until 30 days before interview. ➤ Failure to use common risk/needs assessment instrument throughout process. ➤ Biases w/respect to certain conviction offenses that negatively impact positive parole action ➤ Poor communication to prisoner of expectations, goals, objectives early in prison term & at time of negative parole board action ➤ Lack of confidence/availability in community-based programs & behavior-specific field supervision tools e.g., GPS monitoring, polygraph testing, cognitive restructuring based counseling, substance abuse treatment, half-way houses, etc ➤ Inability of prisoners to reenter programming after initial completion; also limited access to these programs within certain facilities; limited number of enrichment programming available to prisoners. | <p>Preliminary Work Group Goal:</p> <p>Consistent with the TAP, ensure that release decisions are based on an objective assessment of offender's risk needs, and strengths and a thorough review of offenders' ReEntry Plans, under a revised set of parole guidelines.</p> <p>Task and Strategies to Accomplish Goal</p> <ul style="list-style-type: none"> • Obtain technical assistance from the National Institute of Corrections to improve parole guidelines • Review the current release decision-making process with regard to its strengths and weaknesses • Provide recommendations to Assessment and Classification work group regarding its information needs from the TAP so that the parole decision making process is based on current and relevant information. • Provide input on ways to improve the Parole Eligibility Report (PER). • Develop or revise parole guideline processes and instruments. • Migrate parole guidelines scoring into the MDOC probation/parole OMNI database. <p>Notes:</p> <ul style="list-style-type: none"> • This Work Group, through an implementation committee within the MDOC, established a method for the Parole Board to review Level I and II prisoners who had case continuances and accelerated their review by 30 to 60 days. • As a result of this type of creative thinking and other efforts within the department, the Parole approval rate increased from a 2003 year-to-date average through October of 50% to a 66% approval rate in November and a 58% rate in December. The average parole rate in the two months since the ReEntry reforms were implemented has been 61%, an increase of 12% from the most recent five-year average (1998 to 2002). The number of paroles approved in the past two months compared to the same time period last year increased from 1,924 to 2,328 or 404 more paroles. This two month average is the highest parole rate recorded since April-May of 1996. |
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GOING HOME

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| <p><u>Parole Supervision and Services</u></p> <p><i>Monitoring and Interventions:</i></p> <p>Parole supervision agency uses risk assessment tools to assign</p> <ul style="list-style-type: none"> + Supervision levels and strategies + Details conditions of supervision <p><i>Advocacy and Referrals:</i></p> <p>Human service agencies coordinate with the supervision agencies to deliver needed programs and support</p> <p>Community, neighborhood, faith-based groups and victims are involved as required</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ Pre-parole investigation conducted utilizing Pre-Sentence Investigation Report and Parole Eligibility report ❖ Risk assessment used to determine supervision level ❖ Initial orientation conducted to provide parolee with thorough understanding of rules, conditions & expectations of their supervision. ❖ Assigned supervision level determines frequency and type of contacts ❖ Dynamic supervision plan developed; reviewed at minimum of 90-day intervals ❖ Program referrals made to link parolees to needed services where possible. Referrals made for family members and partners as needed. ❖ Advocate for victims: <ul style="list-style-type: none"> • Enforcing restitution collection • Adding and enforcing victim protection special conditions • Responding to victims' concerns. <p><u>Weaknesses</u></p> <ul style="list-style-type: none"> ➤ Insufficient Info Sharing within MDOC: <ul style="list-style-type: none"> • Institution programming & treatment • Prisoner's health • Marriages/divorces that occur in institution • Domestic violence history • Substance abuse assessment & treatment results ➤ Placement info often outdated, incomplete or unrealistic ➤ Pre-parole investigation & planning done too late in release process ➤ Placement & special condition needs not based on validated needs assessment ➤ Supervision plan not developed until prisoner released to parole ➤ Supervision practices driven by policy; limited agent discretion for case planning & supervision ➤ Valid ID difficult to obtain in timely manner after release | <p><u>Preliminary Work Group Goal:</u></p> <p>Maximize the likelihood of offender success on parole while ensuring public safety by re-designing parole efforts to include a dedicated effort to match offenders' risk, needs, and strengths with supervision strategies and community services to minimize parole violations and new criminal activity.</p> <p><u>Tasks and Strategies to Accomplish Goal:</u></p> <ul style="list-style-type: none"> • Provide recommendations to Assessment and Classification work group in its information needs of the TAP • Review and assess process for assigning parolees to levels of supervision • Obtain technical assistance on best practices with respect to parole risk and supervision standards • Create a list of stakeholders and develop a consistent process for networking between the offender, supervision staff, community agencies, and service providers • Develop standard for early parole discharge • Develop a case plan model for community supervision phase for the TAP • Develop means to expand MDOC involvement with existing and planned Multi-Purpose Collaborative Bodies. <p><u>Notes:</u></p> <ul style="list-style-type: none"> • Further thought needs to be given to means to resolve the problem of offenders being continued on parole solely because of unpaid restitution. • Parole discharge plan for early release being reviewed by Deputy Director – pending approval. • Work with offender services work group to help determine process for determining need and providing resources for housing, voc/ed, alcohol and drug counseling, mental health services, education, etc. that can reduce violations. • Determine how the state's "data warehouse" can be tapped to assist with service referral and delivery. • Work within Cluster to improve parole guidelines and the PER. |
| <p>STAYING HOME</p> | | |

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| <p><u>Revocation Decision Making</u></p> <p>Releasing authority establishes policy governing revocations</p> <ul style="list-style-type: none"> • Based on risk • Based on nature of violation <p>Revocation policies incorporate graduated responses to violations</p> <ul style="list-style-type: none"> • As risk increases responses become harsher/swifter <p>As severity of violation risk increases responses become harsher/swifter</p> <p>Revocation policies free up resources by reducing the number of offenders returned to prison.</p> <p>STAYING HOME</p> | <p>Strengths:</p> <ul style="list-style-type: none"> ❖ Parole Board governed by statute (MCLD 791.240a) in handling parolees accused of violating parole. Statute sets forth required due process before an alleged violator's parole may be revoked. ❖ Parole Violation Response Guideline (CFJ-175) governs revocations based on risk and nature of violation. Guideline provides for progressive sanctions based on static and dynamic factors ❖ Current revocation policy reduces number of parole violators returned to prison via hierarchical system of decision making <p>Weaknesses:</p> <ul style="list-style-type: none"> ➢ The definition of "risk" is subjective – MDOC authorities define differently than the public at large. Revocations may be influenced by the media, public reaction and political climate. ➢ Current MDOC risk assessment instrument is static rather than dynamic. ➢ Parolees diverted from prison currently create a burden for community/MDOC resources ➢ Once revoked, parolees are not re-assessed upon their return to the institution to address the violation behaviors for which they were returned. ➢ Repetitive use of the same programming may not achieve change in offender. | <p>Preliminary Work Group:</p> <p>Ensure that Parole Revocation decisions are appropriately based upon offender's risk and severity of behavior by developing specific, validated, risk based standards and guidelines for parole revocation.</p> <p>Task and Strategies to Accomplish Goal:</p> <ul style="list-style-type: none"> • Review and assess current violation decision process • Provide recommendations to Assessment and Classification work group in its information needs of the TAP • Obtain technical assistance for best practices regarding risk assessment • Develop a revocation policy based on graduated sanctions in response to risk and severity • Identify and assess alternatives to revocation. • Work with offender services work group to help determine process for determining need and providing resources for housing, voc/ed, alcohol and drug counseling, mental health services, education, etc. that can reduce violations. • Work within Cluster to improve parole guidelines and the PER. |
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| <p><u>Discharge and Aftercare</u></p> <p>Offenders should be moved off supervision after a reasonable period of successful adjustment.</p> <p>Lowers odds of future technical violations.</p> <p>Gives offenders substantial incentive for compliance and good conduct on supervision.</p> <p>Human Services Agencies assume responsibility for implementing remainder of case plan.</p> | <p><u>Strengths:</u></p> <ul style="list-style-type: none"> ❖ MDOC has policy in place that allows for early discharge review and recommendation processing. ❖ Classification review process allows for reduction in levels of supervision which leads to eligibility for early discharge. ❖ Supervision plans are developed and reassessed to address identified needs of parolee to increase likelihood of early discharge where applicable. ❖ Utilize progressive sanctions to address violations. ❖ Referral to community resource programs and monitor compliance. ❖ Parole discharge consideration includes: <ul style="list-style-type: none"> • Substantial period of compliance. • Full payment of victim restitution <p><u>Weaknesses:</u></p> <ul style="list-style-type: none"> ➤ Early discharge review process not mandated. ➤ Lack of post discharge/aftercare plan. ➤ Lack of funding for discharged parolee to continue with needed services. ➤ Lack of integration with community resources to develop strengths and skills to successfully manage daily problems. | <p>Preliminary Work Group Goal:</p> <p>Ensure that offender needs continue to be met following release from MDOC jurisdiction by developing a system which ensures that responsibility for the case management plan is passed to the non-MDOC agency/provider at discharge and that needed services continue to be available to ex-offenders without disruption. This “discharge plan” will be needed prior to early discharge from parole.</p> <p>Tasks and Strategies to Accomplish Goal:</p> <ul style="list-style-type: none"> • Provide recommendations to Assessment and Classification work group in its information needs of the TAP • Explore the role of Multi-Purpose Collaborative Bodies in providing ongoing services to ex-offenders. • Determine mechanisms to identify needs of offenders to communicate to service providers prior to parole discharge. • Explore mechanisms for obtaining/continuing funding for services to ex offenders. • Work with research to determine discharge numbers and differences between those who are placed on parole and those who are discharged on the max. • Determine ways to reduce public safety threat of offenders discharged from prison on the max. • Determine how the state’s “data warehouse” can be tapped to assist with service referral and delivery <p>Notes:</p> <ul style="list-style-type: none"> • This Work Group intends to review both offenders’ discharges from Parole supervision and those discharged directly from prison with no period of community supervision. • Flow of case/offender data and information to and from MDOC and other agencies/providers will be critical to ongoing case management and services. |
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STAYING HOME

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| <p>Offender Services</p> <p>This Work Group does not represent a decision point but, rather, a collaborative of service providers that are essential to offender re-entry success. Early involvement of other Departments, Agencies and Community based organizations with development of plans to match individual offender's needs with locally available services in the areas of housing, alcohol, drug addiction and mental health services, education, vocational training and employment are all essential.</p> <p>These agencies can assist in the timely and complete sharing of information across all agencies involved with planning and implementing supervision and treatment plans for offenders.</p> <p>These agencies can help ensure continuity of services from to prison to community to avoid gaps and replication of services/treatments is essential.</p> | <p>Strengths:</p> <ul style="list-style-type: none"> ❖ Special conditions of parole including involvement in sex offender treatment. ❖ Community agencies/organizations help match offender needs w/local services. ❖ Info sharing across agencies often occurs. ❖ Special conditions requiring periodic substance abuse testing. ❖ Expanded substance abuse testing capabilities. ❖ MDOC cooperates w/outside agencies that run programs at all female facilities & a few male facilities to strengthen / maintain parent/child relationships. ❖ Selected MDOC prisons have a Life Skills Program that focuses on family/child welfare <p>Weaknesses:</p> <ul style="list-style-type: none"> ➤ Delays in getting parolees eligible for Medicaid & other programs can result in offenders going without needed Rx drugs, etc. ➤ Parolees sometimes released w/o medication or inadequate supply to get by until community referrals are in place. ➤ Placement info in the PER often outdated, incomplete or unrealistic. ➤ No generally applicable cross agency involvement during development of PER placement plan. ➤ Difficult to place mentally ill parolees who need Adult Foster Care, supervised living, etc. ➤ Incomplete or outdated health, family & other needs information often does not exist. ➤ Community based agencies & organizations frequently reluctant to get involved w/MDOC. ➤ Significant proportion of parolees end up in commercial placements (e.g. hotels, short-term residences, rooming houses). ➤ Insufficient time (sometimes <2 wks) for complete investigation & placement. ➤ Lack of coordination with Employment, Substance Abuse, Mental Health, Housing and other agencies results in gaps and/or duplication of services. | <p>Preliminary Work Group Goal:</p> <p>To provide insight to the ReEntry Initiative process about the services that are available for offenders, the challenges that are being faced to increase funding for offender services and participate in each of the 7 Decision Point Work Groups as much as possible. In addition, suggestions for agencies and individuals who should be involved in the planning and implementation process.</p> <p>Tasks and Strategies to Accomplish Goal:</p> <ul style="list-style-type: none"> • Work within departments to develop ways to re-invest money saved from decarcerative policies into services such as substance abuse services. • Connect Multi-purpose Collaborative Bodies to ReEntry process and to the MDOC. • Form a data group to review IT data sharing issues • Outline the documents that need to be included and the format of the "release portfolio" • Identify what changes need to be made to the Medicaid system and how these changes may be implemented • Identify the forms and process that need to be completed in order to make disability determinations. Devise a procedure that would allow the process to be completed at least 60 days prior to the offender's release. • Obtain an opinion from the Attorney General's office regarding the application of HIPPA regarding DOC offenders. • Outline the federal requirements regarding confidentiality waivers and develop language that satisfies those requirements. Develop language that would require all state agencies and vendors to accept the "parole certificate" waiver " • Discuss and develop group recommendations for TAPS process. • Discuss and develop recommendations for factors / criteria to be considered in MDOC risk assessment tool. • Compare goals and tasks with model and identify which TPC principles are addressed by each task. • Recommend appropriate workgroup to perform assignment or assist in developing plan. |
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Example 27.


Georgia—Key Messages for
Organizational Change:
A Presentation to Wardens,
Superintendents, and
Chief Probation Officers

Georgia–Key Messages for
Organizational Change:
A Presentation to Wardens, Superintendents,
and Chief Probation Officers




**Department
of Corrections**

ON THE MOVE




OFFENDER REENTRY
August 23, 2007

Presented to:
Corrections Division Administrators



OFFENDER REENTRY

**REENTRY
BEGINS WHEN
OFFENDERS ENTER
THE “CRIMINAL
JUSTICE” SYSTEM**




OFFENDER REENTRY

REENTRY: A CHANGE IN CORRECTIONAL PHILOSOPHY

HISTORICAL PERSPECTIVE


- ❖ Rising crime rate and increase in violent crimes
- ❖ Public and political perceptions
- ❖ Allocation of resources
- ❖ Early research on effects of treatment on recidivism
 - ❖ Narrative or qualitative review
 - ❖ Meta-Analysis, effect size between treatment and recidivism
- ❖ Current Research used to substantiate: direction, philosophy, & budget



OFFENDER REENTRY

REENTRY: A CHANGE IN CORRECTIONAL PHILOSOPHY


- ❖ Guiding correctional philosophies and strategies of last 50 years
 - ❖ Punishment / Just Deserts
 - ❖ Deterrence
 - ❖ Collective Incapacitation
 - ❖ Restorative Justice
 - ❖ Selective Incapacitation
 - ❖ Reentry
- ❖ Long range effects on agency, state, and federal budgets
- ❖ Strategy must be:
 - Evidence-based
 - Results driven
 - Cost effective
 - Cost efficient
 - Measurable



OFFENDER REENTRY

REENTRY: What Is It ?


- ❖ A process of transition that should begin at the offenders earliest point of entry into probation, the prison or at pre-sentence guided by offender assessment and evidenced based interventions.
- ❖ A process to provide effective opportunities for offenders to achieve positive change and to be a more prosocial contributor to society.
- ❖ A process to promote public safety through collaborative partnerships which reflect a seamless system that ensures all returning offenders are law-abiding, productive community citizens.



OFFENDER REENTRY

REENTRY: Why Does It Matter?


- Approximately 97% of offenders who enter prison will eventually be released to the community.
- Approximately 650,000 offenders are released from prison to the community each year (18,500 from Georgia in 2006).
- Georgia received 21,500 offenders in 2006. (Increase of 3,000)
GDC Bed space capacity at 104%
- Georgia had 135,480 probationers at the end of 2005 and 136,829 at the end of 2006. (Increase of 4,803)
- Nearly 2/3 of formerly incarcerated persons return to prison after their release. (1/3 based on 3 year return to prison rate in Georgia)
- 1 in 15 Georgians experience some form of criminal justice supervision, nationally it is 1 in 32. It's PERSONAL



OFFENDER REENTRY

REENTRY: Mission


Establish effective methods that permeate all levels of affected agencies and organizations to reduce recidivism through collaborative partnerships that support offender transition to the community.



OFFENDER REENTRY

Reentry: Goals


- ☐ To increase public safety by implementing research-based interventions that increase offenders capacity to remain crime free.
- ☐ To flatten the growth of the prison and probation population by implementing intervention strategies and programs that reduce recidivism.
- ☐ To implement programs that support restitution, restoration, and rehabilitation of offenders based on individual assessed criminogenic risk and needs.
- ☐ To leverage information technology that is cost effective, cost efficient, reduces redundancy of information gathering and supports web-based data systems
- ☐ Promote public safety through collaborative partnerships that support offender transition to the community



OFFENDER REENTRY

Reentry: Objectives


- ☐ To build individual capacity of the offender to be a productive member of his/her family and community
- ☐ To link offenders to program services necessary for successful transition and reentry into community
- ☐ To increase the community and correctional capacity to address the offenders' needs and identify community resources to match assessed needs
- ☐ To enhance public safety by reducing recidivism among probation, parole and the formerly incarcerated population



OFFENDER REENTRY

Reentry: Offender(s) Needs



- Transitional Housing and Housing Assistance
- Job Readiness Training and Job Placement Assistance
- GED and Education Assistance
- Substance Abuse Treatment
- Life Skills Services – Financial Literacy and Mentoring
- Mental and Physical Health Assessment with Treatment Plan
- Cognitive Skills Training
- Family Violence Intervention Training
- Children and Family Support Assistance
- Connection with Community Resources and Social Services
- Pro-social Community Associations and Activities



OFFENDER REENTRY

Reentry: Anticipated End Results

- Formerly incarcerated and probated persons do not return to prison and/or probation
- Redeploy and leverage existing community resources
- Formerly incarcerated/probated persons and their family structures are stable
- Formerly incarcerated/probated persons sustain employment at a livable wage
- Formerly incarcerated/probated persons have access to appropriate physical and mental health treatment
- Reduce recidivism - when recidivism is reduced by 1% it saves taxpayers 7 to 8 million dollars
- Make our communities safer and healthier
- Manage state resources better

OFFENDER REENTRY



Other Stakeholders and Partnerships

- ✓ Faith-based Organizations (FBO)
- ✓ Private Industry and Businesses
- ✓ Faith and Character Based Advisory Boards
- ✓ Corporate Advisory Board
- ✓ GDC Volunteers
- ✓ Aftercare Providers
- ✓ Community-Based Organizations (CBO)
- ✓ Civic Organizations
- ✓ Partner Agencies
- ✓ Health Service (Physical & Mental)




Georgia Reentry Impact Project





OFFENDER REENTRY

GEORGIA REENTRY IMPACT PROJECT (GRIP)

The Georgia Reentry Impact Project (GRIP) is a collaborative project of state agencies that provide supervision and services to adult offenders. GRIP is supported by the National Institute of Corrections through the Transition from Prison to Community Initiative (TPCI); the U.S. Department of Justice, Office of Justice Programs through the Serious and Violent Offender Reentry Initiative (SVORI); and the National Governors Association (NGA) through the Reentry Policy Academy. The State of Georgia is unique as it has established a single three-tier structure for addressing these three initiatives.



OFFENDER REENTRY

GEORGIA REENTRY IMPACT PROJECT

National Governor's Association (NGA) Reentry Policy Academy Tier I

Steering Committee (Agency Heads)

- Address Broad Cross-System Issues
- Assure Statewide Support
- Develop Interdisciplinary Prisoner Reentry Policies and Programs
- GEORGIA -- One of Seven States Chosen by NGA



OFFENDER REENTRY

Transitions from Prison to Community Initiative (TPCI)

Tier II

Policy Committee


- Policy Practice Analysis
- Identification of gaps
- Strategies to address gaps
- Implementation Planning and Monitoring
- GEORGIA -- One of nine states selected by National Institute of Corrections

OFFENDER REENTRY

Participating Agencies


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| ➤ Office of the Governor | ➤ Criminal Justice Coordinating Council |
| ➤ Council of Superior Court Judges | ➤ State Board of Pardons and Paroles |
| ➤ Department of Corrections | ➤ Office of Planning and Budget |
| ➤ Department of Human Resources | ➤ Department of Juvenile Justice |
| ➤ Department of Labor | ➤ Department of Technical and Adult Education |
| ➤ Department of Education | ➤ Department of Community Affairs |
| ➤ Workforce Investment Board | ➤ Center for Effective Public Policy |
| ➤ Department of Public Health | |



OFFENDER REENTRY

GRIP Policy Team Core Recommendations


- **Recommendations**
- The Policy Team studied nine phases of offender reentry and developed the following three core recommendations that will lead to the best managed criminal justice system in the nation:
- **1. Develop and implement an automated assessment instrument** that identifies an offender's risk to re-offend, as well as the offender's crime-producing needs and behaviors. This instrument will drive offender placement into evidence-based interventions. COMPAS
- The criminal justice information technology interagency sharing group should be tasked with reviewing existing electronic systems, determining information that can be shared, and establishing a timeline for sharing the information with the aim of eliminating data redundancy.



OFFENDER REENTRY

GRIP Core Recommendations


- **2. Develop a Transition Accountability Plan (TAP)** driven by recommendations derived from the automated assessment's recidivism risk factors that will move with the offender through the criminal justice system from sentencing (or entry into the prison or probation) to reentry into the community. Reentry Case Plan
- The TAP will include critical pre-entry and reentry issues that are relevant for release planning (i.e. housing, disability, substance abuse, physical and mental health, employment, education, family and community supports). Offenders will actively participate in the development of their TAP; the TAP should be updated frequently, as needed, and should take the place of a release-planning/supervision plan document.
- The TAP should be available electronically so staff can access, review, and update the plan quickly and easily. The TAP is the foundation of a seamless system between institutional and community service providers to swiftly assess and treat the crime producing behaviors of offenders.



OFFENDER REENTRY

GRIP Core Recommendations


- **3. Implement more efficient interagency electronic communications**—as outlined by the interagency information technology working group to improve continuity and accountability for offender reentry. Utilize emerging XML technologies to develop a single repository and source for offender data that is accessible to all partner agencies.
- Overcome barriers (including HIPAA requirements) to sharing offender information with other pertinent agencies and community partners.



OFFENDER REENTRY

GRIP Implementation Subcommittees

- 1. Pre-Incarceration** (Pilot: Douglasville Judicial Circuit)
- 2. Incarceration and Release Decision Making**
 1. Intake & Assessment, Development of TAP/ Case Planning
 2. Institutional Programming
 3. Transition Planning
 4. Release Decision Making
 5. Pilot Sites: Wilkes PRC & Arrendale State Prison
- 3. Supervision and Community Stakeholders**



OFFENDER REENTRY


Serious and Violent Offender Reentry Initiative (SVORI)

Tier III

Local Implementation Pilot

Local pilot projects that experiment with initiatives

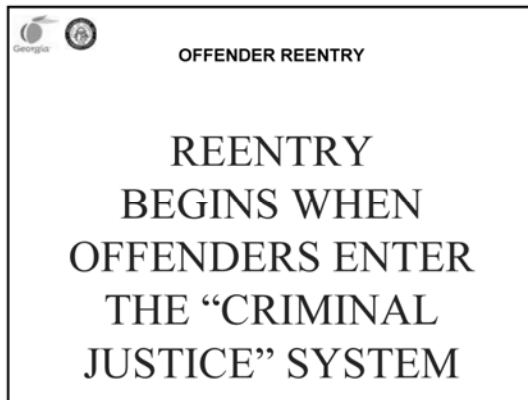
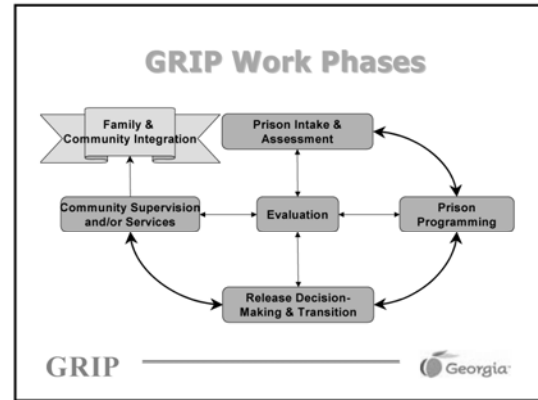
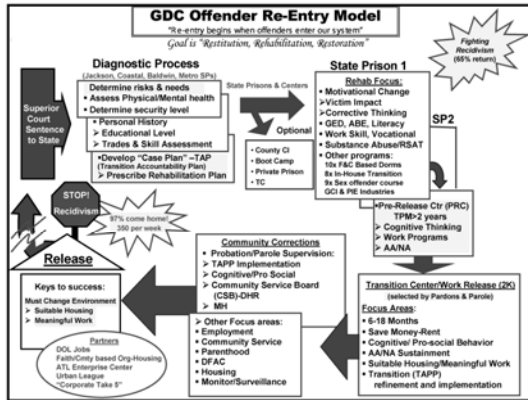
- Albany
- Macon
- Savannah
- Augusta



OFFENDER REENTRY

Reentry Keys to Success

- Must Change Environment
- Pro-Social Associations
- Suitable Housing
- Meaningful Work
- Stable Family Structure
- Link w/ Appropriate Partners



Example 28. Michigan Prisoner ReEntry Initiative Collaborative Case Management

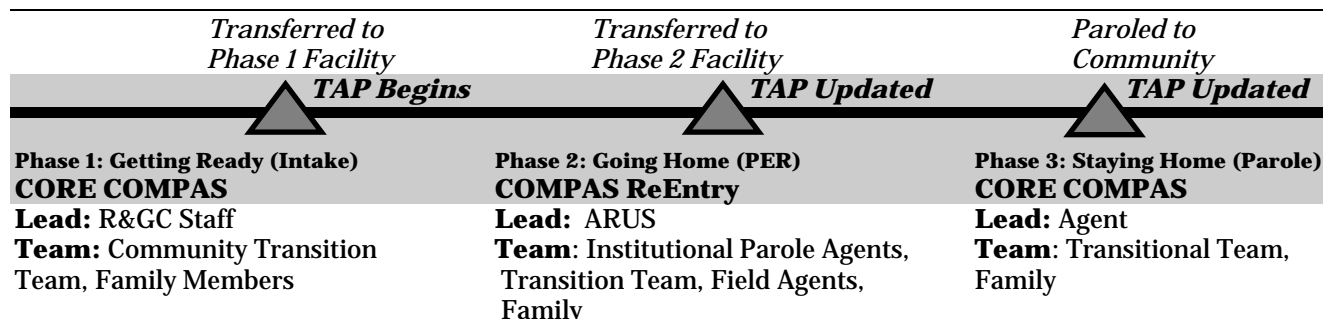


Figure 1. The illustration demonstrates the milestones associated with implementing collaborative case management.

- **Phase 1: Getting Ready.** R&GC staff will complete the CORE COMPAS and begin the Transition Accountability Plan (TAP) at Intake.
- **Phase 2: Going Home.** The COMPAS-ReEntry will be administered by an ARUS as part of the Parole Eligibility Report. The TAP will also be updated before the parole interview.
- **Phase 3: Staying Home.** The CORE COMPAS will be administered and the TAP will be updated again by Parole Agents once the offender is released on parole.

DEFINITION

Collaborative Case Management is the strategic and coordinated use of resources at the case level to enhance community safety. It seeks to reduce recidivism and relapse, encouraging prisoners and former prisoners to be successful while supporting the development of safer neighborhoods and better citizens.

CORE VALUES

1. Hold offenders accountable.
2. Focus on a commitment to offender success.
3. Utilize evidence-based practices.
4. Reinforce a strength-based approach to behavior change.
5. Recognize that no approach will completely eliminate crime.

VISION

CCMS is an effective way to reduce crime by engaging all partners in a collaborative process that holds offenders accountable for their behavior and increases offender success.

MISSION

MPRI partners will create, maintain, and operate a seamless system of collaborative case management and supervision that includes assessment, planning, management, and collaboration that begins at intake to prison and continues through successful transition back into the community.

CORNERSTONES

The four cornerstones – assessment, planning, management, and collaboration – support the offender's transition through incarceration into the community and are built upon five core values.

DEMONSTRATIONS

Collaborative Case Management began with Phase 2 and Phase 3 with a demonstration project in the Capital Area in July 2006 and will expand Phase 2 and Phase 3 implementation to another demonstration site, Kent County, in Spring 2007.

Example 29. Michigan Collaborative Case Management and Supervision Tracks

JULY 18, 2006

| | High Risk* High on Violence OR Recidivism NEEDS: <i>High, Medium, or Low</i> | Medium Risk Medium on Violence OR Recidivism NEEDS: <i>High or Medium</i> | | Low Risk Low on Violence OR Recidivism NEEDS: <i>High or Medium</i> | |
|-------------------------|--|---|---------------------------------|---|--------------------------------|
| | | LEVEL 3 Enhanced Supervision | LEVEL 3 Enhanced Supervision | LEVEL 1 Limited Supervision | LEVEL 1 Limited Supervision |
| COMPAS Scale | | | | | |
| Violence SUPERVISION | LEVEL 3 Enhanced Supervision | LEVEL 3 Enhanced Supervision | LEVEL 2 Standard Supervision | LEVEL 1 Limited Supervision | LEVEL 1 Limited Supervision |
| Violence INTERVENTION | Enhanced Services | Enhanced Services | Community Resources Referral | Community Resources Referral | Community Resources Referral |
| Recidivism SUPERVISION | LEVEL 3 Enhanced Supervision | LEVEL 3 Enhanced Supervision | LEVEL 2 Standard Supervision | LEVEL 1 Limited Supervision | LEVEL 1 Limited Supervision |
| Recidivism INTERVENTION | Enhanced Community Services | Enhanced Community Services | Community Resources Referral | Community Resources Referral | Community Resources Referral |

*NOTE: If an offender scores High on Violence AND on Recidivism, notify supervisor.

- **LEVEL 1: Limited Supervision and Community Resources Referral.**
 - One (1) contact is required per QUARTER.
 - The Parole Agent will refer the offender to services. Transition Team meetings may occur, but the Parole Agent will not participate in transition team meetings.
- **LEVEL 2: Standard Supervision and Community Resources Referral.**
 - One (1) contact is required per MONTH.
 - The Parole Agent will refer the offender to services. Transition Team meetings will occur and the Parole Agent will occasionally participate in transition team meetings to resolve specific problems as they arise with the offender.

■ *LEVEL 3: Enhanced Supervision and Enhanced Community Services*

- One (2) contact is required per MONTH.
- The Parole Agent will refer the offender to services. Transition Team meetings will occur and the Parole Agent will participate in transition team meetings to resolve specific problems as they arise with the offender.

■ *LEVEL A: Administrative Supervision*

Example 30. New York and North Dakota Trainings on Collaboration

Transition and Reentry from Prison to the Community

A Workshop for New York Teams Collaborating on the Transition from Prison to the Community (TPC) Initiative

Albany, New York
May 8 – 10, 2006

“The vision of New York State’s Reentry Task Force is to build a safer New York resulting from the successful transition of offenders from prison to living law-abiding and productive lives in their communities.”

Workshop Goals

The goals of this workshop are to:

- Review New York’s vision for successful transition and reentry, its definition of “offender success,” its empirical basis, and consider together how best to achieve our vision through a state-local partnership;
- Provide an overview of transition and reentry from a national perspective and its implications for New York;
- Orient participants to the Transition from Prison to the Community (TPC) model – in particular the role of evidence-based practice – and New York’s progress in implementing the model;
- Provide an opportunity for each participating team to define its individual mission and goals with respect to offender reentry in the context of the State’s vision;
- Emphasize the importance of collaboration to reentry work and provide an opportunity for team building during the workshop along with resources to strengthen each task force’s collaboration skills in the future;
- Articulate the responsibilities of local teams for:
 - Conducting a system assessment regarding current policies, practices, and resources relevant to transition and reentry;
 - Testing and developing a case conferencing and service coordination capability;
 - Developing a strategic plan for enhancing reentry efforts at the local level including a case conferencing and service coordination capability; and
 - Identifying three measurable outcomes toward which the CRTF will work.

***Enhancing the Effectiveness of
Our Collaborative Work as a Departmental Team:***

Transition and Reentry from Prison to the Community

***A Workshop for the
North Dakota Department of
Corrections and Rehabilitation***

Workshop Goals

There is general agreement in the criminal justice field that offender transition and reentry initiatives can benefit from collaboration among the agencies and disciplines that share responsibility for working with offenders who are released into the nation's communities. It is still challenging for many jurisdictions to maximize their collaborative reentry efforts – even within the boundaries of a single organization when that organization has a range of functions and responsibilities. This workshop, with its focus on collaboration within the North Dakota Department of Corrections and Rehabilitation, will provide an opportunity for participants to gain a greater understanding of the elements of successful teams, to begin to apply some of these concepts to their own work on offender transition issues, and to better prepare them to engage in collaborative efforts with other agencies and stakeholders in the communities they serve.

The goals of this workshop are to:

- Promote a common understanding of the language and concepts of collaboration;
- Clarify the vision and mission of implementing successful transition that has been embraced by the Department and its leadership;
- Brief and orient participants on progress to date in implementing the Transition from Prison to the Community model;
- Provide an opportunity for participants to explore the implications of the Department's vision and mission regarding transition, contribute to its evolution, and discuss the importance of collaboration in their work;

Promote team building; and

Example 31. New York's Local Reentry Task Forces—Membership and Strategic Plan Outline

Suffolk County Reentry
Task Force

Suffolk County CJCC
P.O. Box 205 Yaphank Ave.
Yaphank, NY 11980-0205

Phone 631-852-6824
Fax 631-852-5164

Suffolk County Reentry Task Force Strategic Plan

For New York's Transition from Prison
to Community Initiative

July 2006

Suffolk County Reentry Task Force Members

| Name | Agency |
|--|--|
| Ahearn, Laura - Executive Director | Parent's For Megan's Law |
| Colleen Ansanelli - Program Coordinator | Criminal Justice Coordinating Council |
| Michael Burdi- Director Region III | NYS Division of Parole |
| Dan Callahan- Forensic Program Director | Hands Across Long Island |
| Doreen Conway - Vocational Training Coordinator | Office of the Sheriff |
| Cira DiPietro - Program Specialist | NYS Division of Parole |
| John Desmond - Director | Probation Department |
| Don Fries - Area Supervisor | NYS Division of Parole |
| Louis Gallagher - Supervising Psychologist | Division of Community Mental Hygiene |
| James Golbin - Chief Planner | Probation Department |
| Edward Hernandez - Deputy Commissioner | Department of Social Services |
| Robert Lewis - Bureau Chief | NYS Division of Parole |
| Lisa Lite-Rottmann- Regional Director | NYS Office of Alcohol and Substance Abuse Services |
| Robert Marmo - Chief Planner | Criminal Justice Coordinating Council |
| Margaret McRoberts - Coordinator of Transitional Services | NYS Division of Parole |
| Aristedes Mojica - Inspector | Suffolk County Police Department |
| Paul Murphy - Senior Parole Officer | NYS Division of Parole |
| Raymond O'Rourke - Labor Specialist | Department of Labor |
| Daniel Osborne - Bureau Chief | NYS Division of Parole |
| Kenneth Perez - Assistant Director Bureau of Systems Development | NYS Office of Alcohol and Substance Abuse Services |
| Kimberly Schaivone, - Steps Program | NYS Division of Criminal Justice |

| Coordinator | Services |
|-------------------------------------|-------------------------------|
| Michael Stoltz - Executive Director | Clubhouse of Suffolk County |
| Shelda Washington | NYS Department of Corrections |
| Michael White – Parole Officer | NYS Division of Parole |
| Kerri Kosloff – Research Intern | James Madison University |

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