

Transition Task Force
Date: May 5, 2009 1:30pm-5:00pm

Attendees:

Regis Groff, Retired Senator (Chair)
Brian Hulse, Intervention Community Corrections Services
Doyle Forrestal, Colorado Behavioral Healthcare Council
Ken Tomlinson, Judicial Department
Bridget Klauber, Defense Attorney
Brian Gomez, Department of Corrections
Dean Condor, Juvenile Parole Board Chair
Greg Mauro, Denver Community Corrections
Sean McDermot, Colorado Criminal Defense Bar
Carol Peeples, Colorado Criminal Justice Reform Coalition
Paul Herman, Center for Effective Public Policy
Christine Adams, Division of Criminal Justice
Germaine Miera, Division of Criminal Justice

Absent:

Lou Archuleta, Department of Corrections
Greg Kildow, Intervention Community Corrections Services
Reo Leslie, Private therapist
Keith Penry, Douglas County Sherriff
Charles Smith, Colorado Department of Human Services
Regi Huerter, Denver County Director of Public Safety
Traci Lacock, University of Colorado
Louise Boris, Colorado Coalition for the Homeless (Task Force Leader)
Nancy Rider, Homeless Initiative
Don Quick, DA for 17th Judicial District

Issue/Topic:	Discussion:
<p data-bbox="224 271 407 298">Social Supports</p> <p data-bbox="168 413 459 440">Final Recommendation:</p>	<p data-bbox="561 271 1507 298">***See handout on cost of Navigation system in Criminal Justice from Doyle***</p> <p data-bbox="561 344 695 370">Discussion:</p> <ul data-bbox="561 384 1528 1580" style="list-style-type: none"> • PRI grants have been used for similar systems in other cities/states. Question then – would this be duplicative of the existing reentry coordinators in CO? • Pre-release would be separate – offenders are being prepared for someone else to take care of them. <ul data-bbox="607 526 1308 553" style="list-style-type: none"> • This process is not meant to handle case management. • A navigation person is seen as the link to the PO and all other needs. • If we had the philosophy that we wanted to teach them (offenders) to serve themselves this person would be a resource to the Probation and Parole officers. • Parole Officers aren't knowledgeable in some of these areas (e.g., getting a birth certificate, etc). <ul data-bbox="607 782 1498 849" style="list-style-type: none"> • Having a position that is more structured will reduce the "hit and miss" that currently exists with officers. • Is this voluntary – "I want a navigator" or is it part of the parole plan? <ul data-bbox="607 889 1498 983" style="list-style-type: none"> • Depends on provider – right now it is something that is available to the JCMH providers if they need it. It's almost more of a resource to the provider/PO. • What would the max case load be for this person? –they are guessing around 50-75. • At the Beau Matthews Center for Excellence (Denver), where a similar program exists, it was discovered that people had many more needs than they had originally anticipated. <ul data-bbox="607 1185 1471 1212" style="list-style-type: none"> • Ran into problems carrying out their goals due to the huge caseload. • Pro Social component – this program would provide employment for a peer specialist. • This idea does speak directly to our charge of dealing with the 6 month transition period. • Won't need a navigator the whole time they're on parole. But this can help them to be balanced and will reduce the likelihood of recidivism. • Surprised by low cost for startup – but this may be a concern if the amount is not enough to maintain the person (they move on). <p data-bbox="561 1655 781 1682">Recommendation:</p> <ul data-bbox="561 1723 1498 2005" style="list-style-type: none"> • Role clarity is important – make sure no duplicity. • Pilot would be right for grant funding. • Need to decide what the next step is (and therefore the recommendation): <ul data-bbox="607 1830 1498 2005" style="list-style-type: none"> • Is this something that is unique enough for the group to push forward? • Must decide who needs to be at the table. • Must be practical/aware that the commission can only do so much. • Doyle – if this group gives this idea it's bless it can then move on to the commission to be passed to whoever the right group might be.

Issue/Topic:	Discussion:
<p data-bbox="155 2198 472 2225">Additional Pro-Social ideas</p> <p data-bbox="142 2306 433 2333">Final Recommendation:</p> <p data-bbox="94 2373 532 2475">The TF supports the utilization of the recovery model as practiced in the MH world as mechanism to support</p>	<p data-bbox="561 2198 954 2225">***See handout from Bridget***</p> <ul data-bbox="573 2239 1511 2413" style="list-style-type: none"> • Question - Wouldn't this be part of the navigation process (especially the mentoring program) instead of a separate recommendation? • It is felt that these are separate components within the recovery model. • Pro-social concerns seem to always be an afterthought, after basic needs, even though it has positive benefits.

and there is application for individuals in the CJ system.

- One opposition – Brian Gomez
- Needs word smithing
- Note that we all come from different parts of the CJ system and we have a consensus that a treatment model should be used. There is value to this mindset.

Recommendation #2 (pg 8 of summary)

- Does the group want to move forward with the recover model?
 - These are examples of how you might do this.
- Consistent with (some go beyond) the 8 principles of effective corrections (EBP).
- Paul sees this as a way to supplement/enhance the 8 principles rather than throwing out an all new model.
- It was suggested that the recovery model be operationalized with these EBPs.
- Is there any value in throwing out this new model to forward the shift in mindset to move people from the idea of retribution to recovery?
 - There is good EBP out there – this supports that – there is no need to make it a whole new thing.
 - Use the recovery model as an example of how to operationalize EBPs for successful reentry into practice.
- A pilot program has been suggested, but is this not the JERP program? Might JERP be the pilot program?
- Should employ models, like the recovery model, when deciding how to employ EBPs
- It has components that are EB but it itself is not truly an EBP. So we need to be careful that we’re not suggesting that it is.
- Is the juvenile model (which is based on treatment) the right way to go? If so, let’s expand that model to the adult system. However, this would require a philosophical shift in how we approach offenders.

<p>Issue/Topic: Employment</p> <p>Action: Data request: How many people are being trained for which jobs and in which facilities?</p> <p>Final Recommendation:</p>	<p>Discussion:</p> <p>***see handout from Carol***</p> <p>The employment sub-group was only able to work on DOC information. It is requested that the CCJJ push forward on the following recommendations: #1,2,3</p>
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<p>Issue/Topic: Drop-off site</p> <p>Final Recommendation:</p>	<p>Discussion:</p> <p>DOC report provides action they will agree to. Partial implementation has been met via DOC feedback. Since DOC has acknowledged that this is only partial implementation the task force is satisfied and hopes that the work will carry on.</p>
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<p>Issue/Topic: Assessments</p> <p>Final Recommendation:</p>	<p>Discussion:</p> <p>The LSI does not touch on benefit needs nor does it address survival needs. Therefore the job of meeting these needs go back to the work of the navigator (as previously discussed).</p>
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