

**Community Corrections Task Force
MINUTES**

December 5 / 10:30AM-12:00PM
Virtual Meeting

ATTENDEES

TASK FORCE MEMBERS

Glenn Tapia, *Task Force Chair*, Division of Probation Services

Tim Hand, *Task Force Vice-Chair*, Larimer County Community Corrections

Doug Carrigan, Advantage Treatment Centers

John Draxler, Probation Services/ 13th Judicial District (JD)

Ken Kupfner, DA Office/ 20th JD

Chris Meeks, Denver Community Corrections Board

Katie Ruske, Office of Community Corrections/ Division of Criminal Justice

Mark Wester, ComCor Inc.

ABSENT

David Coleman, Second Chance Center

Kristiana Huitron, Voces Unidas for Justice

James Karbach, D.A. Office/ 20th JD

Todd Rowell, Sheriff's Office/ Mesa County

STAFF

Richard Stroker, CCJJ Consultant

Laurence Lucero, CCJJ Staff, Division of Criminal Justice

Jack Reed, Research Director, Division of Criminal Justice

Agenda	Discussion
<p>Welcome, Introductions & Review of Agenda <i>Glenn Tapia, Task Force Chair</i></p>	<p>Glenn Tapia, Chair of the Task Force, welcomed and thanked everyone for participating in the Community Corrections Task Force (CCTF). Glenn reviewed the agenda of the meeting and solicited any additions or corrections to the November 7 minutes. A motion was offered and seconded to approve the minutes. Task Force members unanimously approved the November 7 minutes.</p>

Issue/Topic	Discussion
<p>Presentation: Recap of data and issues <i>Glenn Tapia, Task Force Chair</i></p>	<p>Glenn presented a summary of the information received and discussion from the Task Force.</p> <p>Probation has a need for probationers with misdemeanor cases who are not successful or suitable for probation placement/continued placement</p> <ul style="list-style-type: none"> • 67 to 75% of new cases or terminated cases, respectively • Risk/Need matters to outcomes not offense type <ul style="list-style-type: none"> ○ Low success rate (44%) and high failure rate for misdemeanor cases -especially for drug cases ○ Misdemeanor cases have higher recidivism rate than felons • Black, Indigenous, people of color (BIPOC), and men are over-represented in the high-risk groups <p>System Issues</p> <ul style="list-style-type: none"> • Limited Work release capacity post COVID • Limited Jail capacity options. • Problem Solving Courts exist for high risk/high need cases but are not available everywhere and not for specific types of clients • Probation revoke-and-regrant doesn't work to change terminal outcome <p>Community Corrections (CC) Issues</p> <ul style="list-style-type: none"> • CC capacity has reduced (due to facility closures and COVID-19), but is currently rebounding yet not back to the pre-COVID levels. • There is a waiting list for felony placements • Current law allows funding for beds for misdemeanants in Community Corrections Intensive Residential Treatment (IRT) and a Therapeutic Community (TC) but not in Residential Dual Diagnosis Treatment (RDDT) programs, Sex Offender Supervision Programs, or regular beds • No data shows that CC is as/more effective for high risk/high need cases or high risk/high need misdemeanor cases specifically • There were challenges with conditions of probation (CoPR) clients in the Denver pilot (see "Pilot Program in Denver" in the November 7 minutes). This led to staffing burnout and a negative client mindset towards jail and supervision. <p>Community Corrections Task Force</p> <ul style="list-style-type: none"> • Some members expressed mixed support and views for misdemeanor cases in Community Corrections being effective. • The group acknowledged that we won't know the potential outcomes without a pilot to study as no data exist now.

Issue/Topic	Discussion
<p>Group Discussion of Task Force Mandates</p>	<p>Below is a summary of the consensus and discussion points as of Dec. 5.</p> <p>Question: Are there persons that benefit from placement in community corrections? If so, for whom specifically?</p> <ul style="list-style-type: none"> • Yes, misdemeanants may benefit from placement in community corrections programs. • Pilot. The Task Force agreed to recommend a pilot project (not a statewide/broad initiative). • Population <ul style="list-style-type: none"> o For High Risk and High Need offenders, as defined by state probation risk/need assessments o For those at risk of revocation on probation o For individuals as a Condition of Probation (CoPR) but (See next bullet: Opt-in) • Opt-in. It might help to have clients “opt-in” to Community Corrections as a Condition of Probation to gauge client desire/choice, in lieu of revocation. • Regular or Specialized Beds. Regular beds preferred in order to better scale up the option after the pilot because there are already IRT placements, but would leave out Therapeutic Community [TC], Sex Offender [SXO] and Residential Dual Diagnosis Treatment [RDDT] beds. • Treatment duration. Unlimited in time (no finite number of days) but funding should be limited by DCJ contracts to not to overspend state funds. • Should misdemeanants be prioritized over felony placements? CCJJ proposal should let that be determined locally by board/program discretion, transportation issues, jail backlog and waitlist issues in the pilot project. This should be answered in the pilot study as an implementation issue. • Funding. General Assembly should appropriate new dedicated funds for the pilot, including evaluation and implementation support funding for DCJ or an external research entity. Could be achieved as a new line in DCJ budget (placements line footnote) with legislative intent established in Long Bill footnote. • Scale of Pilot. Two to three sites to include urban and rural sites or maybe limit to number of beds or Average Daily Population (ADP) for sake of funding limits. Scale should be large enough to generalize to larger population. • Implementation <ul style="list-style-type: none"> o DCJ to issue RFP/Competitive procurement process to interested boards and providers o CCJJ initiative should contain specific budgetary/legislative intent to fund rural initiative to study those unique issues

<p>Issue/Topic Group Discussion of Task Force Mandates (continued)</p>	<p>o Pilot should also include county-run run facilities in addition to for-profit/non-profit facilities.</p> <ul style="list-style-type: none"> • Pilot duration. Pilot should last long enough to give people time at risk for termination and recidivism outcomes and also to get a large enough sample to generalize to a larger population. • Board discretion. Local board and program screening/discretion should be preserved for this pilot. <p>These points will continue to be discussed and refined in subsequent meetings.</p>
---	---

<p>Issue/Topic Public Comment</p>	<p>Discussion No public comment was offered.</p>
--	---

<p>Issue/Topic Next Steps & Adjourn <i>Richard Stroker, CCJJ Consultant & Glenn Tapia</i></p>	<p>Discussion Glenn summarized the points to discuss at the next meeting in January.</p> <ul style="list-style-type: none"> • Discuss the finer points on Scale and Duration of Pilot • Type of programming/Standards. Same programming offered now or should there be specialized programming for this population? • Funding. Define finer points on additional funding versus existing funding for programming and for research/evaluation. Funding for specialized funding or programmatic requirements? Implementation support? What else? • What research questions should be answered and what data should be collected as part of pilot? <p>Glenn thanked the group for their participation and adjourned the meeting. With no further discussion, the meeting adjourned at noon.</p>
--	---

Next Meeting

Monday, January 9, 2023 / 10:30 am-12:00 pm

Meeting information will be emailed to members and posted at, colorado.gov/ccjj/ccjj-meetings